Before Starting the CoC Application

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

The Collaborative Applicant is responsible for: - Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while completing the application in e-snaps.

- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by - Some questions require the Collaborative Applicant to attach a document to receive credit.

This will be identified in the question.

- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click here.

FY2016 CoC Application	Page 1	08/14/2019
------------------------	--------	------------

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: IL-501 - Rockford/Winnebago, Boone Counties CoC

1A-2. Collaborative Applicant Name: City of Rockford

1A-3. CoC Designation: CA

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

FY2016 CoC Application	Page 2	08/14/2019
------------------------	--------	------------

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.

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

FY2016 CoC Application	Page 3	08/14/2019
------------------------	--------	------------

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.

The CoC solicits knowledge from law enforcement, specifically the City of Rockford Police Department. Two officers, a Lieutenant and a Sergeant participate in the full CoC. In addition, the Sergeant participates on the committee dedicated to ending chronic homelessness and participates in case conferencing and also assists with street outreach. The Mayor of the City of Rockford has been a driving force behind ending homelessness, especially veteran and chronic homelessness. He has participated in committee meetings, requires monthly reports and updates, has gone to training and has personally reported and sent street homeless to the Single Point of Entry. He has offered to assist in any way possible to help the CoC end homelessness.

1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Youth Services Network	Yes	Yes	Yes
MELD	No	Yes	Yes
Boone/Winnebago Community Action	No	Yes	Yes
SAFE Families	No	Yes	No
Mother House	No	No	No
Maya's House	No	Yes	Yes
School District/Regional Office of Education	No	Yes	No

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

		Voting M	pated as a lember in at two CoC	Sat on CoC Board as active member or official at any point
FY2016 CoC Application	Page 4	ge 4 08		8/14/2019

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Meetings between July 1, 2015 and June 30, 2016	between July 1, 2015 and June 30, 2016.
Remedies	Yes	Yes
Rockford Rescue Mission	Yes	Yes
Rockford Alliance Against Sexual Exploitation	No	No
Prairie State Legal Services	Yes	No

1B-2. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for new projects in 2016. (limit 1000 characters)

The CoC makes available to any eligible entity the opportunity to apply for reallocated or new funds annually by publishing the information via Facebook, website, and public sessions. An eligible entity is any non-profit with the fiscal capacity to match and leverage the requested funding who is planning to address HUD or local CoC defined priority populations. In addition, the collaborative applicant provides technical assistance to any agencies interested in applying.

1B-3. How often does the CoC invite new Semi-Annually members to join the CoC through a publicly available invitation?

FY2016 CoC Application	Page 5	08/14/2019
------------------------	--------	------------

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Does the CoC coordinate with Federal, State, Local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

1C-2. The McKinney-Vento Act, requires CoC's to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program Interim rule at 24 CFR 578.7 (c) (4) requires the CoC to provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110 (b)(2) requires the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for the information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	1
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	1
How many of the Con Plan jurisdictions are also ESG recipients?	1
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1

FY2016 CoC Application	Page 6	08/14/2019
------------------------	--------	------------

1C-2a. Based on the responses provided in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)

The CoC overlaps with two jurisdictions, the local entitlement area which is the City of Rockford Illinois and the State of Illinois. The State of Illinois requires the CoC to recommend the ESG funding decisions through the CoC process. For the City of Rockford, the CDBG staff responsible for the Consolidated Plan is an active member of the CoC and attends monthly meetings. The CoC assists in writing the appropriate sections of the Consolidated Plan including the section on homeless needs, affordable housing and greatest need. In addition, the CoC provides PIT data both for report purposes as well as uploading the ESG csv data files so that the CR 70 and 75 reports are complete. CoC members also attend Consolidated Plan and Action Plan public hearings and provide feedback and input.

1C-2b. Based on the response in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities. (limit 1000 characters)

The CoC has worked with the City of Rockford to create ESG performance standards and has formally voted on them. They also have developed specific standards for Rapid Rehousing. In addition, we recently developed an additional process that takes into consideration HIC and PIT data to determine utilization that factors into funding decisions. The CoC establishes an ad hoc committee annually to serve as an application review committee for ESG funding. Their recommendation goes to the CoC Board for approval which then goes to City Council for final approval.

1C-3. Describe how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)

Survivors of domestic violence work with victim service providers to develop a safety plan prior to exiting the secure shelter for permanent housing. Survivors who enter into the Single Point of Entry for coordinated intake and assessment without coming through a domestic violence service provider have the opportunity to self identify as a survivor. In that case they are referred to the victim service provider for temporary placement while a permanent housing placement is determined. Once they are referred to the victim services provider they will develop a safety plan. Survivors who choose not to access the services of the victim services provider receive counseling at the single point of

FY2016 CoC Application	Page 7	08/14/2019
------------------------	--------	------------

entry on safety and security. In addition, our other emergency shelters also have safety protocols and security systems in place to ensure that victims of domestic violence are safe.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Rockford Housing Authority	18.00%	Yes-Both
Winnebago County Housing Authority	2.00%	Yes-Both

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

1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

Winnebago County Health Department provides HOPWA vouchers for persons who are living with HIV. Local Townships provide general assistance housing vouchers for individuals and one month worth of rental assistance for families in crisis. Shirleys Place is a transitional housing project that provides apartment housing for women (and their children) leaving the correctional system. Youth aging out of foster care can access a monthly subsidy through the State of Illinois Department of Children and Family Services. We also use State of Illinois Homeless Prevention funds to provide rental assistance. Also our County Veteran's Assistance Commission provides an ongoing rental subsidy for qualifying veterans who are not yet on VASH.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:		
FY2016 CoC Application	Page 8	08/14/2019

	X
Engaged/educated law enforcement:	X
Implemented communitywide plans:	X
No strategies have been implemented	
Other:(limit 1000 characters)	
Educated local Public Works on homeless rights in public spaces	X
Outreach	x

FY2016 CoC Application	Page 9	08/14/2019
------------------------	--------	------------

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Select the system(s) of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.

Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	x
None:	

1D-2. Select the system(s) of care within the CoC's geographic area with which the CoC actively coordinates with to ensure institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.

Foster Care:	x
Health Care:	x
Mental Health Care:	x
Correctional Facilities:	x
None:	

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons

FY2016 CoC Application	Page 10	08/14/2019
------------------------	---------	------------

discharged are not discharged into homelessness. (limit 1000 characters)

FY2016 CoC Application	Page 11	08/14/2019
------------------------	---------	------------

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.

1E-1. Explain how the CoC's coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services. (limit 1000 characters)

The CoC's Coordinated entry process uses a single point of entry (SPOE). The SPOE is promoted through a 24/7 hotline, card sized informational material and placards posted many places including shelters, parking garages, etc. Entities likely to see the homeless have been provided information and cards including Police, Fire, Public Works, churches and others. The CoC maintains a web page and a Facebook page. There is a CoC homeless outreach team that seeks out the homeless as well as responds to contacts from citizens. Everyone encountered is encouraged to go through the SPOE so they can be assessed and assigned a ranking based on the VISPDAT and other critical factors such as chronicity. Once assessed they are assigned a temporary location until a permanent location becomes available or given an appointment for a permanent housing unit. In addition, those who present at the SPOE with other factors that might affect their housing status are referred for appropriate assessment.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If there are other organizations or persons who participate but are not on this list, enter the information in the blank text box, click "Save" at the bottom of

FY2016 CoC Application	Page 12	08/14/2019
------------------------	---------	------------

the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	x			x	x		
CDBG/HOME/Entitlement Jurisdiction	x	x					
Law Enforcement	x	x			x		
Local Jail(s)		x					
Hospital(s)		x			x		
EMT/Crisis Response Team(s)	x	x			x		
Mental Health Service Organizations	x	x	x		x		
Substance Abuse Service Organizations	x	x	x		x		
Affordable Housing Developer(s)	x	x	x		x		
Public Housing Authorities	x	x	x		x		
Non-CoC Funded Youth Homeless Organizations	x	x	x		x		
School Administrators/Homeless Liaisons		x	x				
Non-CoC Funded Victim Service Organizations	x	x	x		x		
Street Outreach Team(s)	x	x	x	x	x		
Homeless or Formerly Homeless Persons	x	x					
Veteran Organizations	x	x	x		x		
Faith Based Organizations	x	x	x		x		
Legal Services	x	x	x		x		

FY2016 CoC Application	Page 13	08/14/2019
------------------------	---------	------------

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2016 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?		
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	2	
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	13	
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%	

1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

Performance outcomes from APR reports/HMIS:	
% permanent housing exit destinations	X
% increases in income	X

Monitoring criteria:	
Utilization rates	X
Drawdown rates	X
Frequency or Amount of Funds Recaptured by HUD	X

Need for specialized population services:		
FY2016 CoC Application	Page 14	08/14/2019

Youth	X
Victims of Domestic Violence	X
Families with Children	X
Persons Experiencing Chronic Homelessness	x
Veterans	x

None:	

1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority. (limit 1000 characters)

The CoC project review included points for serving persons who are chronic and serving persons with the lowest income as well as for addressing special vulnerable populations. These were all scoring factors in the ranking of applications. The special populations included veterans, chronic, youth and persons fleeing domestic violence.

1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. Evidence of the public posting must be attached. (limit 750 characters)

The CoC made the local competition review, the ranking and the selection criteria available in four formats, Rock River Homeless Coalition Facebook page, the Rock River Homeless Coalition web page, the City of Rockford web page and a public invite to a meeting for public comment. Applications were submitted in writing to the CoC on August 12th.

1F-4. On what date did the CoC and 08/19/2016 Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached).

FY2016 CoC Application	Page 15	08/14/2019
	-	

1F-5. Did the CoC use the reallocation No process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)

1F-6. In the Annual Renewal Demand (ARD) Yes is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW?

FY2016 CoC Application	Page 16	08/14/2019
------------------------	---------	------------

1G. Continuum of Care (CoC) Addressing Project Capacity

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

The CoC monitors performance through HMIS reports. These reports include APRS as well as data quality and completeness reports. Specifically questions Q8-10 on utilization, Q27-29 on housing stability and returns to homelessness and Q24b3 on income. The HMIS Lead provides these reports for review. In addition, the CoC considers unspent grant funds remaining as part of it's performance review. This is also part of the scoring for project ranking for the NOFA application.

1G-2. Did the Collaborative Applicant include Yes accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing?

FY2016 CoC Application Page 17 08/14/2019

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have a Governance Yes Charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the Charter itself or by reference to a separate document like an MOU/MOA? In all cases, the CoC's Governance Charter must be attached to receive credit, In addition, if applicable, any separate document, like an MOU/MOA, must also be attached to receive credit.

- 2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA.
- 2A-2. Does the CoC have a HMIS Policies and Yes Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application.

2A-3. Are there agreements in place that Yes outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organization (CHOs)?

2A-4. What is the name of the HMIS software ServicePoint

FY2016 CoC Application	Page 18	08/14/2019
------------------------	---------	------------

used by the CoC (e.g., ABC Software)?

2A-5. What is the name of the HMIS software Bowman vendor (e.g., ABC Systems)?

FY2016 CoC ApplicationPage 1908/14/2019

2B. Homeless Management Information System (HMIS) Funding Sources

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Select the HMIS implementation Single CoC coverage area:

* 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.

Funding Source	Funding
CoC	\$117,434
ESG	\$10,000
CDBG	\$0
НОМЕ	\$0
НОРWA	\$0
Federal - HUD - Total Amount	\$127,434

2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

2B-2.3 Funding Type: State and Local

Funding Source		Funding
FY2016 CoC Application	Page 20	08/14/2019

City	\$0
County	\$0
State	\$0
State and Local - Total Amount	\$0

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$35,050
Private - Total Amount	\$35,050

2B-2.5 Funding Type: Other

Funding Source	Funding	
Participation Fees	\$1,500	
Other - Total Amount	\$1,500	

2B-2.6 Total Budget for Operating Year	\$163,984
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FY2016 CoC Application	Page 21	08/14/2019
------------------------	---------	------------

2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Enter the date the CoC submitted the 05/02/2016 2016 HIC data in HDX, (mm/dd/yyyy):

2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells in that project type.

	Total Beds	Total Beds in HIC	Total Beds	HMIS Bed
Project Type	in 2016 HIC	Dedicated for DV	in HMIS	Coverage Rate
Emergency Shelter (ESG) beds	245	45	34	17.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	96	0	96	100.00%
Rapid Re-Housing (RRH) beds	8	0	8	100.00%
Permanent Supportive Housing (PSH) beds	226	0	226	100.00%
Other Permanent Housing (OPH) beds	96	0	0	0.00%

2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)

The HIC data was collected in January, 2016. In March, 2016, our largest local faith based shelter began using HMIS. Now that they are using HMIS, the Domestic Violence shelter is the only shelter not using HMIS and our coverage rate for emergency shelter is now 82%. The OPH rate is VASH units. We are in negotiation with the VASH voucher provider to begin entering no later than 10/1/16 in HMIS.

2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.

VA Grant per diem (VA GPD):		
FY2016 CoC Application	Page 22	08/14/2019

VASH:	X
Faith-Based projects/Rescue mission:	X
Youth focused projects:	
Voucher beds (non-permanent housing):	
HOPWA projects:	
Not Applicable:	

2C-4. How often does the CoC review or Quarterly assess its HMIS bed coverage?

FY2016 CoC Application	Page 23	08/14/2019
------------------------	---------	------------

2D. Homeless Management Information System (HMIS) Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" within the last 10 days of January 2016.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	2%	11%
3.3 Date of birth	0%	0%
3.4 Race	0%	0%
3.5 Ethnicity	0%	0%
3.6 Gender	1%	0%
3.7 Veteran status	1%	0%
3.8 Disabling condition	0%	0%
3.9 Residence prior to project entry	0%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	1%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	2%	1%

2D-2. Identify which of the following reports your HMIS generates. Select all that apply:

CoC Annual Performance Report (APR):			X
ESG Consolidated Annual Performance and Evaluation Report (CAF	PER):		X
Annual Homeless Assessment Report (AHAR) table shells:			x
FY2016 CoC Application	Page 24	08/14	/2019

Applicant: Rockford ILContinuum of Care **Project:** IL 501 CoC Registration FY2016

IL-501 CoC COC_REG_2016_135935

None		

2D-3. If you submitted the 2016 AHAR, how 12 many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?

2D-4. How frequently does the CoC review Monthly data quality in the HMIS?

2D-5. Select from the dropdown to indicate if Both Project and CoC standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both.

2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.

VA Supportive Services for Veteran Families (SSVF):	
VA Grant and Per Diem (GPD):	x
Runaway and Homeless Youth (RHY):	x
Projects for Assistance in Transition from Homelessness (PATH):	x
None:	

2D-6a. If any of the Federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the Federal partner program and the anticipated start date. (limit 750 characters)

Our community does not have SSVF funding so there is no agency to participate in HMIS.

FY2016 CoC Application	Page 25	08/14/2019
------------------------	---------	------------

2E. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context and nature of homelessness throughout the country, and to provide Congressand the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. Accurate, high quality data is vital to inform Congress' funding decisions.

2E-1. Did the CoC approve the final sheltered Yes PIT count methodology for the 2016 sheltered PIT count?

2E-2. Indicate the date of the most recent 01/26/2016 sheltered PIT count: (mm/dd/yyyy)

2E-2a. If the CoC conducted the sheltered PIT Not Applicable count outside of the last 10 days of January 2016, was an exception granted by HUD?

2E-3. Enter the date the CoC submitted the 05/02/2016 sheltered PIT count data in HDX: (mm/dd/yyyy)

FY2016 CoC Application	Page 26	08/14/2019
------------------------	---------	------------

2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:

Complete Census Count:	X
Random sample and extrapolation:	
Non-random sample and extrapolation:	

2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	X
HMIS plus extrapolation:	
Interview of sheltered persons:	X
Sample of PIT interviews plus extrapolation:	

2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology. (limit 1000 characters)

We did pull all HMIS data plus we conducted individual face to face interviews with each sheltered person. We collected the following information in order to ensure de duplication; Have you already completed a survey today?, Date of

FY2016 CoC Application	Page 27	08/14/2019
------------------------	---------	------------

birth and initials. Respondents were assisted by volunteers to ensure completeness and accuracy of responses. We use this method because we do not believe that random sampling would provide us with the same level of accuracy in data. Our community is of a reasonable size that allows us to actually survey everyone we encounter.

2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the PIT count). (limit 1000 characters)

In 2015, we used the HUD provided mobile app to collect data. This year the app was not available so we went back to a combination of HMIS and paper surveys.

2F-5. Did your CoC change its provider No coverage in the 2016 sheltered count?

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)

FY2016 CoC Application	Page 28	08/14/2019
------------------------	---------	------------

2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	X
Follow-up:	X
HMIS:	X
Non-HMIS de-duplication techniques:	X

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g. change in sampling or extrapolation methods). (limit 1000 characters)

There were no changes.

FY2016 CoC Application	Page 29	08/14/2019
------------------------	---------	------------

2H. Continuum of Care (CoC) Unsheltered Pointin-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days in January 2015.

2H-1. Did the CoC approve the final Yes unsheltered PIT count methodology for the most recent unsheltered PIT count?

2H-2. Indicate the date of the most recent 01/26/2016 unsheltered PIT count (mm/dd/yyyy):

2H-2a. If the CoC conducted the unsheltered Not Applicable PIT count outside of the last 10 days of January 2016, or most recent count, was an exception granted by HUD?

2H-3. Enter the date the CoC submitted the 05/02/2016 unsheltered PIT count data in HDX (mm/dd/yyyy):

2I. Continuum of Care (CoC) Unsheltered Pointin-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:

Night of the count - complete census:	X
Night of the count - known locations:	x
Night of the count - random sample:	
Service-based count:	x
HMIS:	x

2I-2. Provide a brief descripton of your CoC's unsheltered PIT count methodology and describe why your CoC selected this unsheltered PIT count methodology. (limit 1000 characters)

Volunteers conducted a street count going to all known locations that persons experiencing homelessness frequent. Surveys were conducted with every person experiencing homelessness that was found. Agencies that have drop in services also completed surveys with their guests. Police and Fire were also involved in the count and notified CoC personnel if they found anyone who could be surveyed.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change

FY2016 CoC Application	Page 31	08/14/2019
------------------------	---------	------------

in partners participating in the count). (limit 1000 characters)

In 2015, we used the HUD provided mobile app to collect data. This year the app was not available so we went back to a combination of HMIS and paper surveys.

2I-4. Has the CoC taken extra measures to Yes identify unaccompanied homeless youth in the PIT count?

2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth.

(limit 1000 characters)

The street outreach teams looked in places such as parks and near schools when unaccompanied youth are likely to sleep. We also worked with the homeless department of the school district to identify unaccompanied youth and the school district reached out to them and conducted surveys.

FY2016 CoC Application	Page 32	08/14/2019
------------------------	---------	------------

2J. Continuum of Care (CoC) Unsheltered Pointin-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:

Training:	x
"Blitz" count:	X
Unique identifier:	X
Survey questions:	X
Enumerator observation:	
None:	

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)

Added additional youth measures.

FY2016 CoC Application	Page 33	08/14/2019

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

* 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	327	255	-72
Emergency Shelter Total	146	131	-15
Safe Haven Total	0	0	0
Transitional Housing Total	152	76	-76
Total Sheltered Count	298	207	-91
Total Unsheltered Count	29	48	19

3A-1b. Number of Sheltered Persons Homeless - HMIS. Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015	
Universe: Unduplicated Total sheltered homeless persons	407	
Emergency Shelter Total	135	
Safe Haven Total	0	
Transitional Housing Total	289	

3A-2. Performance Measure: First Time Homeless.

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors of becoming homeless.

FY2016 CoC Application	Page 34	08/14/2019
------------------------	---------	------------

(limit 1000 characters)

The CoC has identified these risk factors; un/deremployment, LGBTQ status, mental health/addiction, criminal behavior, DV, kids leaving foster care and pregnant/parenting youth. We work with WIOA/other agencies on jobs. For LGBTQ we expedite prevention funds. For persons in mental health/addiction crisis we have a triage center for stabilization. We link ex-offenders to case management on release. For DV victims, we work with police/landlords so the victim is not being evicted but the abuser. For youth, we offer lock out counseling, de-escalation, wrap around services with case management and family mediation. We also use non HUD funding to assist with housing costs including township assistance, State Homeless Prevention and CSBG. For youth aging out of foster care, we have state funded housing assistance and preferences through the PHAs. We use LIHEAP where loss of utilities causes eviction. Our Legal Aid office represents persons being evicted from public housing.

3A-3. Performance Measure: Length of Time Homeless.

Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless. (limit 1000 characters)

We prioritize the chronically homeless through the single point of entry. We use the ViSPDAT to prioritize our wait list. We have reallocated funding to rapid rehousing and chronic beds. Shelters may not hold a homeless person more than 24 hours before sending them to the single point of entry for assessment. Our PHA has changed their admission policies to expedite homeless entries. Our coordinated intake and assessment policies support reduction in both time from identification of homeless status to intake as well as reduction in time from homeless status to housed. We use a by name list approach for all homeless with targeted lists for chronic and veterans. Our housing placement rate for veterans is under 30 days and we are working to reduce our chronic days to house by increased outreach.

* 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.

In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

3A-4a. Exits to Permanent Housing Destinations: Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent

FY2016 CoC Application	Page 35	08/14/2019
------------------------	---------	------------

supportive housing.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	93
Of the persons in the Universe above, how many of those exited to permanent destinations?	53
% Successful Exits	56.99%

3A-4b. Exit To or Retention Of Permanent Housing: In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2014 and September 31, 2015.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	270
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	248
% Successful Retentions/Exits	91.85%

3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

The CoC uses the following strategies to reduce returns to homelessness; working to increase income, providing follow up services for persons placed in permanent housing, providing relocation services versus eviction if a client needs to leave a unit, providing corrective action plans as an alternative to eviction for lease violations, the PHA has changed their ACOP to avoid evictions whenever possible, we create an intervention loop so that property owners know to contact a case manager when a placed person begins having any problems and utility assistance to ensure housing remains stable.

3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and nonemployment non-cash sources. (limit 1000 characters)

The CoC Strategy for increasing job and income growth includes; support to enroll in TANF, education about how to access WIOA services, including the ability to access WIOA via Skype at the Single Point of Entry, expungement and

FY2016 CoC Application	Page 36	08/14/2019
------------------------	---------	------------

sealing of criminal record service and ongoing job listings, support for employment services at the project level as well as working with employers such as Bridgeway.

3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.

(limit 1000 characters)

The CoC works with mainstream organizations as follows; our Shelter Plus Care program works with Bridgeway on training and employment, Carpenter's Place operates an employment program for all housing participants and MELD operates one for youth. Our WIOA office prioritizes homelessness as a eligibility factor.

3A-7. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count? (limit 1000 characters)

None were excluded

3A-7a. Did the CoC completely exclude No geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)?

3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)? (limit 1000 characters)

No one excluded

3A-8. Enter the date the CoC submitted the 08/10/2016 system performance measure data into HDX. The System Performance Report generated by HDX must be attached. (mm/dd/yyyy)

FY2016 CoC Application	Page 37	08/14/2019
------------------------	---------	------------

3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data. (limit 1500 characters)

Submitted on time.

FY2016 CoC Application	Page 38	08/14/2019
------------------------	---------	------------

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing; 2. Prioritizing chronically homeless

individuals, youth and families who have the longest histories of homelessness; and

3. The highest needs for new and turnover units.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	31	47	16
Sheltered Count of chronically homeless persons	22	38	16
Unsheltered Count of chronically homeless persons	9	9	0

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2016 compared to 2015. (limit 1000 characters)

FY2016 CoC Application	Page 39	08/14/2019
------------------------	---------	------------

Because we are focused on ending chronic homelessness we have been conducting significant outreach to connect with and house chronically homeless persons. This has led to an unprecedented number of chronically homeless entering our PIT counts. While our first choice is always streets to permanent housing, our permanent housing capacity is not large enough to move all chronic people into a slot immediately. Instead they are placed temporarily in emergency shelter pending permanent placement. We are actually happy to have an increase in those in emergency shelter as they are off the streets and in process for permanent housing.

3B-1.2. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.

	2015	2016	Difference	
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	140	164	24	

3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)

We were funded for three small chronically homeless projects in the 2015 application that started in 2016. In addition, some of our former Shelter Plus Care beds have been converted to PSH for the chronically homeless.

3B-1.3. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status?

3B-1.3a. If "Yes" was selected for question attached 3B-1.3, attach a copy of the CoC's written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found.

FY2016 CoC Application	Page 40	08/14/2019
------------------------	---------	------------

3B-1.4. Is the CoC on track to meet the goal Yes of ending chronic homelessness by 2017?

This question will not be scored.

3B-1.4a. If the response to question 3B-1.4 was "Yes" what are the strategies that have been implemented by the CoC to maximize current resources to meet this goal? If "No" was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017? (limit 1000 characters)

Twice monthly coordination meetings, using a by-name list, using tools provided by Corporation for Supportive Housing and Community Solutions. Prioritizing for placement in permanent supportive housing and rapid rehousing.

FY2016 CoC ApplicationPage 4108/14/2019	19
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3B. Continuum of Care (CoC) Strategic Planning Objectives

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).

Vulnerability to victimization:	X
Number of previous homeless episodes:	X
Unsheltered homelessness:	X
Criminal History:	X
Bad credit or rental history (including not having been a leaseholder):	
Head of household has mental/physical disabilities:	X
Access to shelter	X
N/A:	

3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

FY2016 CoC Application	Page 42	08/14/2019
------------------------	---------	------------

Our first strategy is to increase Rapid Rehousing. We brought new projects on line for Rapid Rehousing through reallocation and we use ESG for Rapid Rehousing. We have requested new Rapid Rehousing projects in this funding cycle. We use the same strategies that we did with ending veteran homelessness, including a by name list and coordinated case management. The primary barriers facing our families are poverty and trauma. Over 80% of the women in our two primary family shelters have experienced domestic violence at some point. To address this, both shelters offer counseling and support for victims of domestic violence. The other primary barrier, poverty is a combination of difficulty finding decent jobs combined with the need for birth to five childcare. Our shelters and Single Point of Entry work with our Workforce Investment partner to support employment efforts including the ability to Skype directly to the office. We refer to Early/Head Start from the Single Point of Entry.

3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve families in the HIC:	0	8	8

3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, gender or disability when entering shelter or housing? (check all strategies that apply)

CoC policies and procedures prohibit involuntary family separation:	X
There is a method for clients to alert CoC when involuntarily separated:	X
CoC holds trainings on preventing involuntary family separation, at least once a year:	X
Prioritize programs/rank lower if involuntarily seperating	X
None:	

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

FY2016 CoC Application Page 43 08/14/2019

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	47	23	-24
Sheltered Count of homeless households with children:	47	23	-24
Unsheltered Count of homeless households with children:	0	0	0

3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

We have been utilizing both ESG and State homeless prevention funds to focus on Rapid Rehousing for homeless families. In addition, since implementing Coordinated Intake and Assessment and the Single Point of Entry in early 2015, we have seen an overall decrease in homelessness.

3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth ages 18-24, including the following.

Human trafficking and other forms of exploitation?	Yes
LGBTQ youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes
Unaccompanied minors/youth below the age of 18?	Yes

3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	X
Increase housing and service options for youth fleeing or attempting to flee trafficking:	X
Specific sampling methodology for enumerating and characterizing local youth trafficking:	X
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	X
Community awareness training concerning youth trafficking:	X

FY2016 CoC Application	Page 44	08/14/2019
------------------------	---------	------------

N/A:	

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

Vulnerability to victimization:	X
Length of time homeless:	X
Unsheltered homelessness:	X
Lack of access to family and community support networks:	X
In school	X
Aging out of foster care/emancipation	X
N/A:	

3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 -September 30, 2015).

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	2	2	0

3B-2.8a. If the number of unaccompanied youth and children, and youthheaded households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why. (limit 1000 characters)

No change

FY2016 CoC Application	Page 45	08/14/2019
------------------------	---------	------------

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2016 and CY 2017.

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$881,568.00	\$881,568.00	\$0.00
CoC Program funding for youth homelessness dedicated projects:	\$52,818.00	\$52,818.00	\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$828,750.00	\$828,750.00	\$0.00

3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	24
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenille justice or out of school time) attended by CoC representatives:	9
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	24

3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts. (limit 1000 characters)

The Regional Office of Education is a member of the Continuum of Care and attends meetings regularly. CoC agencies attend many of the local and regional educational meetings including Local Area Network (LANS) and truancy and diversion meetings. All of the local school districts refer homeless families directly to the Single Point of Entry for assessment, intake and linkage to temporary and permanent housing.

3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow.

(limit 2000 characters)

All homeless service providers are required to have a written, board approved education policy for both children and adults as well as an identified staff person specifically responsible for educational linkages. This policy is kept on file at the grantee office and compliance with the policy is monitored during monitoring and evaluation site visits.

FY2016 CoC Application Page 4	46 08/14/2019
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3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others? (limit 1000 characters)

The following written agreements exist between CoC programs and local child development programs; IGrow, Women, Infant and Children (WIC), Head Start, Child and Family Connections, Easter Seals (disabled children), Health Dept, and Mayas House.

FY2016 CoC Application	Page 47	08/14/2019

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	20	13	-7
Sheltered count of homeless veterans:	19	6	-13
Unsheltered count of homeless veterans:	1	7	6

3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Overall, we have housed 91 homeless veterans since January, 2015. We continue to maintain increased outreach to homeless veterans to ensure that they are located and permanently housed within 30 days of identifying them. Although we had a brief spike in unsheltered veterans at the beginning in 2016, we were able to house them within 30 days and maintain functional zero.

3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)

FY2016 CoC Application	Page 48	08/14/2019
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The VA is a member of the CoC and attends all meetings. A VA representative was recently elected to the board as well. The VA uses our Coordinated Intake and Assessment system and refers veterans through the Single Point of Entry. All veterans are referred automatically to the VA for screening for a VASH voucher. We do not have a SSVF provider in our area. In addition, as part of sustaining functional zero for veteran homelessness we meet every other month with all veteran agencies to update on various statuses as well as streamline any needed coordination. The VA and our other partners in ending veteran homelessness continue to provide us with immediate information on any newly identified homeless veterans as well as updating us as needed on change in status of any housed veterans.

3B-3.3. Compare the total number of homeless Veterans in the CoC and the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2016 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	42	13	-69.05%
Unsheltered Count of homeless veterans:	8	7	-12.50%

3B-3.4. Indicate from the dropdown whether Yes you are on target to end Veteran homelessness by the end of 2016.

This question will not be scored.

3B-3.4a. If "Yes", what are the strategies being used to maximize your current resources to meet this goal? If "No" what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2016? (limit 1000 characters)

We met both the Mayor's Challenge to End Veteran Homelessness as well as reached functional zero by December, 2015. At this time we are in the sustainability phase and are maintaining functional zero.

FY2016 CoC Application	Page 49	08/14/2019
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4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Does the CoC systematically provide Yes information to provider staff about mainstream benefits, including up-to-date resources on eligibility and program changes that can affect homeless clients?

> 4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	18
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	11
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	61%

4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)

Crusaders Health Care for the Homeless Program provides regularly scheduled services and health care enrollment at satellite clinics where persons who are homeless frequently congregate. Crusader staff assist client's to access medical, dental, mental health, substance abuse, housing, and entitlement resources. Various Medicaid Managed Care Companies assist with enrolling members on site multiple times a year at Shelter Care Ministries Jubilee day drop in center for homeless mentally ill. Carpenter's Place case managers accompany homeless persons to his/her health care enrollment appointment to

FY2016 CoC Application	Page 50	08/14/2019
------------------------	---------	------------

provide support and advocacy. Rosecrance has a certified Benefit Specialist on staff that has been trained on Social Security Income/ Social Security Disability Income Outreach, Access and Recovery (SOAR). The Benefit Specialist assists with denials and appeals. The Benefit Specialist works directly with homeless individuals in obtaining their Social Security and Medicaid benefits.

4A-4. What are the primary ways the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available to them?

Educational materials:	X
In-Person Trainings:	X
Transportation to medical appointments:	X
On site health services	X
Health Outreach to homeless	X
Not Applicable or None:	

FY2016 CoC Application	Page 51	08/14/2019
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4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4B-1. Based on the CoCs FY 2016 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH), and SSO (non-Coordinated Entry) projects in the CoC are low barrier?

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	16
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	14
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	88%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	16
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	14
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	88%

4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

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FY2016 CoC Application	Page 52	08/14/2019
------------------------	---------	------------

Use of phone or internet-based services like 211:	X
Marketing in languages commonly spoken in the community:	X
Making physical and virtual locations accessible to those with disabilities:	X
PSLS Fair Housing Outreach	X
Not applicable:	

4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	0	8	8

4B-5. Are any new proposed project No applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?

4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135?

(limit 1000 characters)

4B-7. Is the CoC requesting to designate one No or more of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes?

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must

FY2016 CoC Application	Page 53	08/14/2019
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include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

4B-8. Has the project been affected by a No major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistanct Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition?

4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD.

(limit 1500 characters)

4B-9. Did the CoC or any of its CoC program No recipients/subrecipients request technical assistance from HUD since the submission of the FY 2015 application? This response does not affect the scoring of this application.

4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.

This response does not affect the scoring of this application.

CoC Governance:	
CoC Systems Performance Measurement:	
Coordinated Entry:	
Data reporting and data analysis:	
HMIS:	
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	
Maximizing the use of mainstream resources:	

FY2016 CoC Application	Page 54	08/14/2019
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Retooling transitional housing:	
Rapid re-housing:	
Under-performing program recipient, subrecipient or project:	
Not applicable:	

4B-9b. Indicate the type(s) of Technical Aassistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance

FY2016 CoC Application	Page 55	08/14/2019
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4C. Attachments

Instructions:

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

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

FY2016 CoC Application	Page 56	08/14/2019
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Attachment Details

Document Description: CoC Communication to Rejected Participants

Attachment Details

Document Description: CoC NOFA Public Posting

Attachment Details

Document Description: CoC Rating and Review Procedure

Attachment Details

Document Description: CoC Ranking and Review Public Notice

Attachment Details

Document Description: CoC Reallocation Process

Attachment Details

Document Description: CoC Governance

FY2016 CoC Application	Page 57	08/14/2019
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Attachment Details

Document Description: HMIS Policies and documents

Attachment Details

Document Description: Con Plan Docs

Attachment Details

Document Description: PHA ACOP

Attachment Details

Document Description: CoC HMIS MOU

Attachment Details

Document Description: CoC Priority

Attachment Details

FY2016 CoC Application Page 58	08/14/2019
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Document Description:

Attachment Details

Document Description: System Performance Measures

Attachment Details

Document Description: CoC Policy on involuntary seperation of Families

Attachment Details

Document Description: Community Solutions Case Study on IL 501 Achieving Veteran Functional Zero

FY2016 CoC Application	Page 59	08/14/2019
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Submission Summary

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

Page	Last Up	odated
1A. Identification	09/12/	/2016
1B. CoC Engagement	09/13/	/2016
1C. Coordination	09/13/	/2016
FY2016 CoC Application	Page 60	08/14/2019

1D. CoC Discharge Planning	08/11/2016
1E. Coordinated Assessment	09/13/2016
1F. Project Review	09/13/2016
1G. Addressing Project Capacity	08/24/2016
2A. HMIS Implementation	09/12/2016
2B. HMIS Funding Sources	09/12/2016
2C. HMIS Beds	08/25/2016
2D. HMIS Data Quality	08/25/2016
2E. Sheltered PIT	08/25/2016
2F. Sheltered Data - Methods	08/25/2016
2G. Sheltered Data - Quality	08/25/2016
2H. Unsheltered PIT	09/09/2016
2I. Unsheltered Data - Methods	08/25/2016
2J. Unsheltered Data - Quality	08/25/2016
3A. System Performance	09/13/2016
3B. Objective 1	09/09/2016
3B. Objective 2	09/13/2016
3B. Objective 3	09/13/2016
4A. Benefits	09/13/2016
4B. Additional Policies	09/12/2016
4C. Attachments	09/14/2016
Submission Summary	No Input Required

FY2016 CoC Application	Page 61	08/14/2019
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Human Services Department Community Services Division A Community Action Agency

September 13, 2016

This is to confirm that there were no rejected applications in the Rockford/Boone and Winnebago Counties' request for proposals for the FY2016 Continuum of Care Program Competition.

Administration

Community Action Board

Community & Neighborhood Programs

Head Start

Fiscal Reports

612 North Church Street, Rockford, IL 61103

(779) 348-7170

Cooling Centers

Fax: (815) 987-5762

E-mail: <u>Human Services</u> <u>Department</u>

PUBLIC NOTICE-2016 HUD Continuum of Care Funding Application

In our community's collaborative effort to end homelessness, we operate a Continuum of Care (Rockford/Boone/Winnebago CoC), which is a local planning body that coordinates housing and services for homeless families and individuals. The U.S. Department of Housing and Urban Development (HUD) works with CoCs to provide funding for homeless assistance programs. The City of Rockford Human Services Department (RHSD) serves as the Collaborative Applicant and administers the annual application process for HUD funding.

"We are the Community Action Agency serving Boone and Winnebago

As a Community Action Agency, the Human Services Department provides services to individuals, families and neighborhoods in Rockford as well as in greater Winnebago and Boone Countles. This is

accomplished by addressing systemic, community and individual factors. Key strategies include provision of direct services, partnering, collaborations and advocacy. Services are administered under two Divisions with input from a Community Action Board and the Head Start Policy Council.

Head Start including Early Head Start services for children prenatal to age three years old and

their families, and services for children age three to five years old and their families. Community Services including Community Health & Prevention, Housing Programs,

Application for New CoC Project 2016 HUD CoC Program Competition Permanent Housing Bonus Funding

Community Action Programs, Energy Programs

2016/2017 LIHEAP Information Continnum of Care Project Rankings

Counties, Engaging All Citizens In Building Stronger Communities"

HUD CoC Notice of Funding Availability (NOFA) Update On Wednesday, June 29th the <u>HUD CoC Notice of Funding Availability</u> (NOFA) was posted. Please refer below under the FY2016 HUD CoC Program Competition for updates and next steps.

HUD Funding Source

MISSION STATEMENT

HUD's Continuum of Care (CoC) homeless assistance programs serve as the largest single source of funding for homeless services in Boone and Winnebago Counties. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

Each year, on behalf of the Rockford/Boone/Winnebago CoC, RHSD submits a lengthy application to HUD for the CoC program funding. Included in this application is the priority list for distributing the annual CoC funding. In order for a program to receive CoC funding, it must appear on the CoC priority list.

For agencies applying for HUD CoC funding in Rockford/Boone/Winnebago, the CoC Program Competition process has two parts - the local evaluation process and the submission of the HUD Project Application:

Part 1: The Evaluation Process

The Rockford/Boone/Winnebago CoC, performs its own evaluation of renewal and new projects through two simultaneous processes. These processes are established by the Rockford/Boone/Winnebago CoC Board of Directors and managed by the Collaborative Applicant.

Renewal Projects: For renewal projects, agencies complete and submit the evaluation instrument, which is a tool used to evaluate each program. Evaluation instruments are then reviewed to ensure the project is operating in compliance with HUD and local standards. This certifies the agency to apply for renewal funds.

New Projects: For new projects, agencies complete a separate application process consisting of an application and certification of capacity. The Collaborative Applicant will certify the new projects if the project meets eligibility standards (as established by HUD) as a new project.

Part 2: Submission of HUD Application

Once HUD releases the CoC Program Competition NOFA and opens Esnaps, agencies that meet certification are required to submit a Program Application for each program, through HIID's electronic application system e-snaps

HUD CoC Program Competition Process

FY2016 HUD CoC Funding Calendar

Each year, there is a timeline established for the NOFA process. Please see the dates below. Please note that some dates are tentative and subject to change based on the timing of HUD releasing Esnaps.

FY2016 HUD CoC Funding Ca	lendar		
Public Hearing on priorities	July 20, 2016	11:00 AM	Shelter Care
Ministries 218 7 th Street			
NOFA Application posted	July 21, 2016	www.help4t	hehomeless.org
www.rockfordil.gov			
NOFA Applications Due	August 5, 2016	555 N Court,	Suite #301 or
Mary.Runestad@rockfordil.g	OV		

FY2016 HUD CoC Program Competition

In April 2016, notification of the FY2016 HUD CoC Program Registration was released. RHSD completed and submitted the CoC Application Registration on behalf of the CoC. HUD released the FY2016 Grants Inventory Worksheet (GIW) on May 13, 2016 which is needed to ensure the FY2016 Annual Renewal Demand (ARD) is calculated accurately. As the Collaborative Applicant, RHSD is required to submit the final GIW to HUD. Before submission, HUD CoC Program Providers confirmed the GIW information via email.

HUD has released the <u>Notice of Funding Availability (NOFA) for the FY2016 CoC</u> <u>Programs Competition</u> on June 29, 2016. RHSD sent an email communication to the HUD CoC funded programs recipients of the FY2016 CoC Program Funding Process regarding the NOFA release. HUD Exchange includes trainings, resources, and instructional guides related to the FY2016 CoC Program Competition.

FY2016 Project Application Training - In Person

Target Audience: This training will provide a detailed overview of the FY2016 Project Application for the HUD CoC Competition. This training is geared for individuals who have not submitted a CoC Project Application in the past or who are unfamiliar with HUD's e-snaps, grant management application system. To schedule, call 779-348-7578.

RHSD will announce the FY2016 Rockford/Boone/Winnebago CoC Ranking Policies. Please check back soon for the links below for additional information. FY16 Rockford/Boone/Winnebago CoC Project Evaluation tool for ranking - Coming Soon

FY16 Rockford/Boone/Winnebago CoC Ranking Policies & Final Project Ranking Listing - Coming Soon

FY16 Rockford/Boone/Winnebago CoC: Project Ranking Committee Minutes - Coming Soon

Please check back at <u>www.help4thehomeless.org</u>, <u>www.rockfordil.gov</u> or Facebook- Rock River Homeless Coalition.

Permits | Report a Problem | Employment | Contact Us

Special thanks to Jason Rotello and Tamika Jones for contributing images for the City of Rockford website.

PUBLIC NOTICE-2016 HUD Continuum of Care Funding Application

In our community's collaborative effort to end homelessness, we operate a Continuum of Care (Rockford/Boone/Winnebago CoC), which is a local planning body that coordinates housing and services for homeless families and individuals. The U.S. Department of Housing and Urban Development (HUD) works with CoCs to provide funding for homeless assistance programs. The City of Rockford Human Services Department (RHSD) serves as the Collaborative Applicant and administers the annual application process for HUD funding.

HUD CoC Notice of Funding Availablity (NOFA) Update

On Wednesday, June 29th the HUD CoC Notice of Funding Availability (NOFA) was posted. Please refer below under the FY2016 HUD CoC Program Competition for updates and next steps.

HUD Funding Source

HUD's Continuum of Care (CoC) homeless assistance programs serve as the largest single source of funding for homeless services in Boone and Winnebago Counties. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

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Renewal Projects: For renewal projects, agencies complete and submit the evaluation instrument, which is a tool used to evaluate each program. Evaluation instruments are then reviewed to ensure the project is operating in compliance with HUD and local standards. This certifies the agency to apply for renewal funds.

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Part 2: Submission of HUD Application

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HUD CoC Program Competition Process

FY2016 HUD CoC Funding Calendar

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FY2016 HUD CoC Funding Calendar

Public Hearing on prioritiesJuly 20, 201611:00 AMShelter Care Ministries 218 7th StreetNOFA Application postedJuly 21, 2016www.help4thehomeless.orgwww.rockfordil.govNOFA Applications DueAugust 5, 2016 555 N Court, Suite #301 orMary.Runestad@rockfordil.gov

FY2016 HUD CoC Program Competition

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FY2016 Project Application Training - In Person

Target Audience: This training will provide a detailed overview of the FY2016 Project

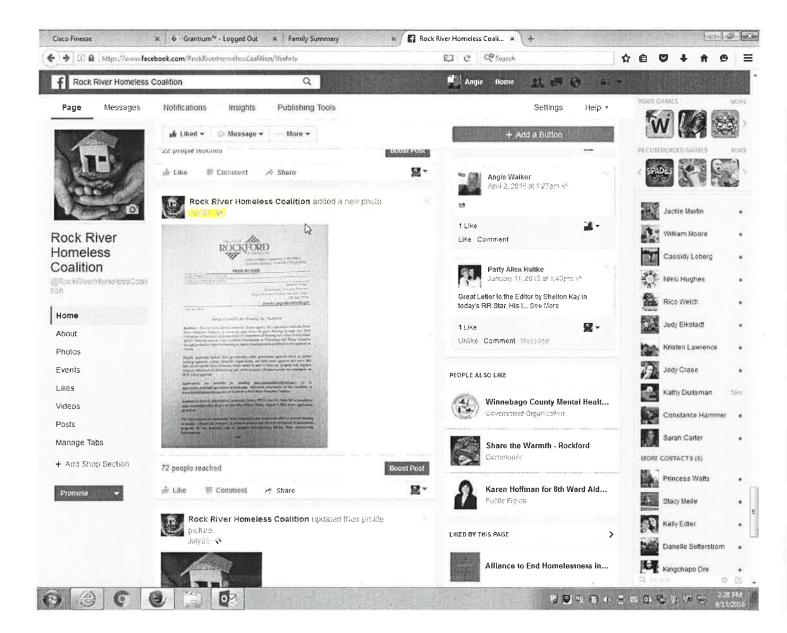
Application for the HUD CoC Competition. This training is geared for individuals who have not submitted a CoC Project Application in the past or who are unfamiliar with HUD's e-snaps, grant management application system. To schedule, call 779-348-7578.

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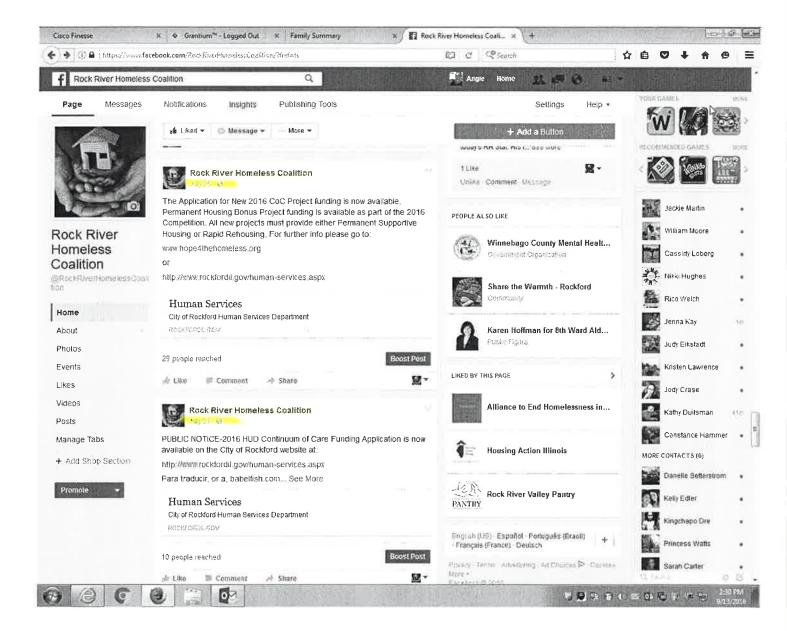
FY16 Rockford/Boone/Winnebago CoC Project Evaluation tool for ranking - Coming Soon FY16 Rockford/Boone/Winnebago CoC Ranking Policies & Final Project Ranking Listing - Coming Soon

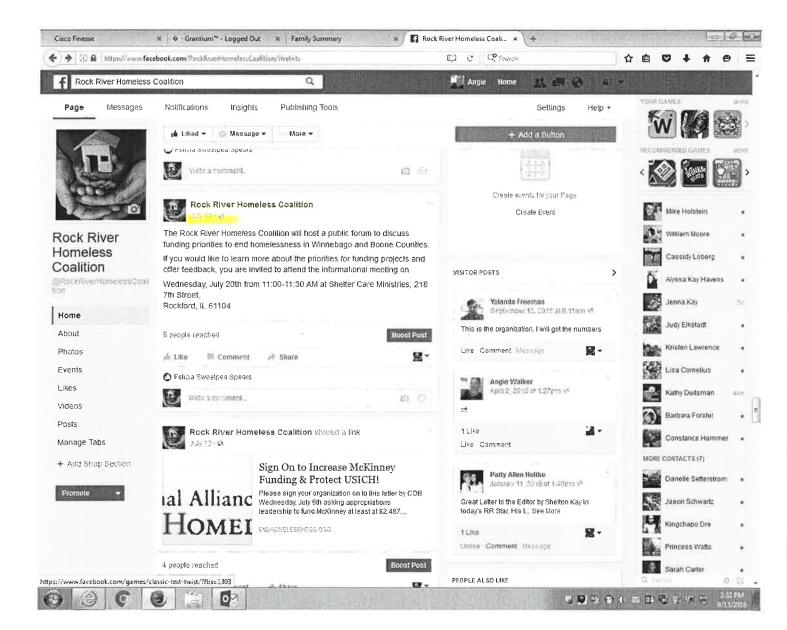
FY16 Rockford/Boone/Winnebago CoC: Project Ranking Committee Minutes - Coming Soon

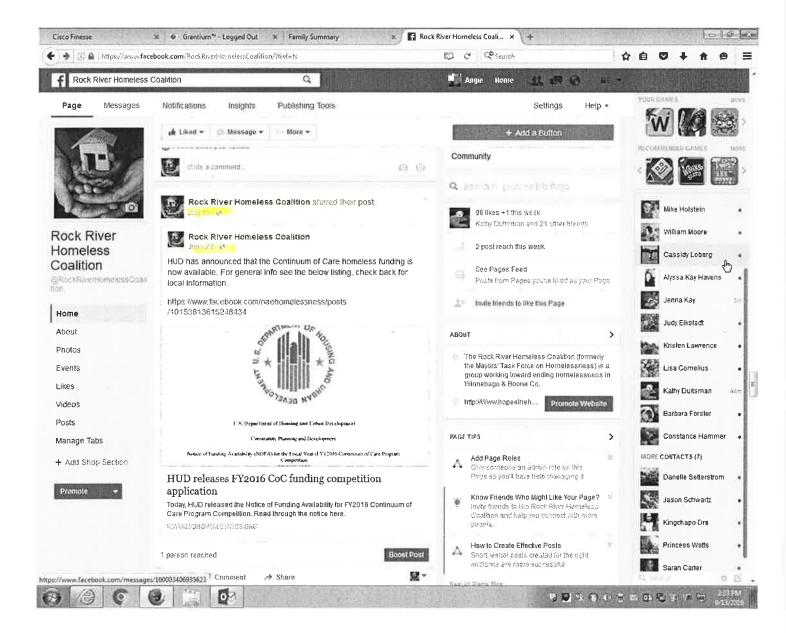
Please check back at <u>www.help4thehomeless.org</u>, <u>www.rockfordil.gov</u> or Facebook- Rock River Homeless Coalition.



RO	CKFORD
1	Office of Mayor Lawrence I. Morrissey
	LEADING BOLDLY, WORKING TOGETHER
	PRESS RELEASE
FOR IMMEDIATE RELEASE	
CONTACT INFORMATION:	Jennifer Jacger
	Community Services Director
	City of Rockford Human Services Dept.
	779-348-7578
	Jennifer, jæger@rockfordil.gov
July 26, 2016	
Funds Avail	able for Housing the Homeless
River Homeless Coalition, is accept Continuum of Care (CoC) program of (HT/D). Funding must be used to a	ommonity Action Agency, in collaboration with the Rock pting applications for grant funding through the 2016 (the U.S. Department of Housing and Urban Development address homelessness in Winnebago and Boone Counties ing or rapid re-housing projects as defined by the application
River Homeless Coalition, is accept Continuum of Care (CoC) program of (HUD). Funding must be used to a through permanent supportive housin criteria. Eligible applicants include local go housing agencies), private nonprofi 501(c)3 non-profit status (however, religious attendance or adherence as	pting applications for grant funding through the 2016 of the U.S. Department of Housing and Utban Development address homelessness in Winnebago and Boone Counties
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River Homeless Coalition, is accept Continuum of Care (CoC) program of (H(U)). Funding must be used to a through permanent supportive housin criteria. Eligible applicants include local go housing agencies), private nonprofi 501(c)3 non-profit status (however, religious attendance or adherence as HUD's final approval. Applications are available by http://www.rockfordil.gov/human.es www.help4thehumeless.org and on it Are-ligibles must be submitted to Co	pting applications for grant funding through the 2016 (the U.S. Department of Housing and Urban Development address homelessness in Winnebago and Boone Counties ag or rapid re-housing projects as defined by the application overnments, other government agencies (such as public it organizations, and faith-based agencies that have IRS funds cannot be used to fund any program that requires a part of the program.) All grant awards are contingent on any emailing mary,runestad@rockfordil.gov, or as ervices.asps. Additional information is also available at







2015 Rockford/Boone/Winnebago Continuum of Care Program Performance Evaluation Process & Methodology

For Continuum of Care (CoC) Program renewal projects in IL 501 Continuum of Care

Overview

The CoC Program Interim Rule requires local Continuums of Care to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and take action against poor performers. (24 CFR 578.7a.6) As the collaborative applicant for IL 501 CoC, City of Rockford has established an annual performance evaluation for CoC Program renewal projects to align with performance measurement and funding priorities that are scored as part of the annual CoC Program Consolidated Application (SuperNOFA). Results of the evaluation are then used to inform performance targets and promote continuous quality improvement. This annual cycle of performance appraisal is not only required by HUD, but it also enables the II 501 Continuum of Care to work towards locally defined housing stability and client self-determination goals for all CoC projects. The evaluation design and methodological approach considers the diversity of projects across the CoC and accommodates these differences by establishing measurements that provide as much equity and transparency as possible.

Evaluation Data Sources

The data used to conduct the performance evaluation is derived from project-level Annual Performance Reports (APRs) submitted to HUD for operating years ending July 1, 2013 - June 30, 2014. If these are not submitted into Esnaps due to the current Esnaps issues, an APR run from HMIS will be used. Supplemental data may be gathered from past CoC applications, fiscal records, and the the Homeless Management Information System (HMIS).

New projects that have not yet filed an APR during the review period are exempt from this evaluation. Renewal projects that have recently changed project type (e.g. supportive services projects that reclassified as housing projects) and have not filed an APR under the updated project component are exempt from this evaluation.

Dissemination of Results

Each individual CoC project will receive a report of the project's score. Agencies will then have five business days following the release of individual project scores to appeal the results. After the appeals process is completed the final results of this evaluation will be released in the following manner:

- Each CoC grantee will receive their final individual score report.
- A complete listing of detailed project scores will be presented to the Rock River Homeless Coalition.

Overall project scores will be used to inform the 2015 CoC Program Priority Ranking.

Points available;

General Section: 40 points

Permanent Housing: 100 points

Transitional Housing: 100 points

The Maximum number of points available for ranking is 140 points. All renewal projects will be scored using this methodology unless they are transitioning (such as moving from TH to RR) in which case they will be reviewed as a new project. THESE SCORES DETERMINE RANKING ORDER FOR THE NOFA APPLICATION.

Scoring Methodology – All Projects

Scoring Area	Description	Points Possible	Scoring Rubric	Source
Priority	Measures if project	10	10 points for any	APR
Population	identifies one of the		one of the target	
	following for targeted		population (10	
	population; chronic,		points maximum)	
	veterans, those			
	fleeing domestic			
	violence,			
	unaccompanied		1	
	youth or families.			
Housing First	Measures if agency	10	10 points meets	Project
	meets NOFA criteria		HUD definition of	Application
	for Housing First		Housing First	
Participates in	Measures if agency	10	10 points for all	HMIS number of
Coordinated	accepts all		new placements	new admissions
Assessment and	placements through		from SPOE since	by program
Intake and all	single point of entry.		1/1/15, 5 points if	compared to
entries into	.If placement is		more than 80%	SPOE placements.
housing are from	inappropriate the		new placements	
the Single Point of	SPOE is notified		from SPOE	
Entry.			1/1/15.	

Scoring Methodology by Project Type Permanent Supportive Housing

Scoring Area	Description	Points Possible	Scoring Rubric	Source
HMIS	Measures if project	10	5 points for	HMIS Records,
Participation	participates in HMIS		participation	APR Q7
	and the		5 points for	
	completeness of		missing data rate	
	HUD-required data		<10%	

Bed Utilization	Measures occupancy rates beds/units supported by the project	10	90%> 10 points 80-89% 5 points <80% 0 points	APR Q8-10 HMIS data
Spend down	Measures percent of available funds that are utilized by the project	10	90%> 10 points	APR Q31a4 HMIS
Dedication of Turnover to Chronically Homeless Households	Measures the percentage of new program participants (or households) who are chronically homeless	20	Proportional (Sliding Scale): 50% <= 0 pts 50%-65% 5 points 65%-80% 10 pts 81%-95% 15 pts 96%-100% = 20 pts	HMIS
Housing Stability	Measures the percentage of project participants who remain housed or move on to other permanent housing	30	Proportional (Sliding Scale): <70% = 0 pts 71-80%=10 pts 81-90%=20 pts 91% >= 30 pts	APR Q27-29 HMIS
Minimize Negative Turnover (Returns to Homelessness)	Measures the percentage of persons who leave the program for reasons other than permanent housing (excludes deceased)	10	Proportional (Sliding Scale): 0% = 10 pts 1-9%=5% >10%= 0 pts	APR Q29 HMIS
Maintain or Increase Income	Measures the percentage of adults participant who maintain or increase their income level over the program year	10	Proportional (Sliding Scale): 50% >= 10 pts 21-49%= 5 pts 20% <= 0 pts	APR Q24b3 HMIS

Transitional Housing

Scoring Area	Description	Points Possible	Scoring Rubric	Source
HMIS	Measures	10	5 points for	HMIS Records,
Participation	whether the		participation	APR Q7
	project		5 points for missing	
	participates in		data rate <10%	
	HMIS and the			

	completeness of HUD-required data			
Bed Utilization	Measures occupancy rates beds/units supported by the project	10	90%> 10 points 80-89% 5 points <80% 0 points	APR Q8-10 HMIS data
Spend down	Measures percent of available funds that are utilized by the project	10	90%> 10 points	APR Q31a4 HMIS
Median Length of Stay	Measures median length of time participants remain in the project	10	Proportional (Sliding Scale): 400days<= 10 pt 401-449 days = 5 pts 450 days >= 0 pts	APR Q24b3
Exits to Permanent Housing	Measures the percentage of project participants who exit to permanent housing	40	Proportional (Sliding Scale): 80% >= 40pts 70-79% = 20 pts >69% = 0 pts	APR Q29 HMIS
Maintain or Increase Earned Income	Measures the percentage of adults participant who increase their earned income level over the program year	10	Proportional (Sliding Scale): 10% >= 10 pts 3-9% = 5 pts 0-3%= 0 pts	APR Q24b3 HMIS
Increase Income Overall	Measures the percentage of adults participant who increase their overall income level over the program year	10	Proportional (Sliding Scale): 40% >= 10 pts 25%-39% = 5 pts 0%-24% = 0 pts	APR Q24b3

Application for New CoC Project 2016 HUD CoC Program Competition Permanent Housing Bonus Funding

Background:

Permanent Housing Bonus Project funding is available as part of the 2016 Competition. All new projects must provide either Permanent Supportive Housing or Rapid Rehousing.

Detailed Information:

Amount of funding available: \$421,648 – This is an approximate amount which will be finalized when HUD releases each CoCs FPRN.

Agencies may apply for all or part of the funding.

If the requests for new funding exceeds the amount available, the CoC Board will decide which applications to include based upon local CoC priorities. If the requests for new funding do not exceed the amount available then all projects that meet all requirements and regulations of the Interim CoC Program Rule:

https://www.onecpd.info/resources/documents/CoCProgramInterimRule_FormattedVersi on.pdf

AND

all requirements and regulations of the 2016 CoC Program NOFA: <u>https://www.hudexchange.info/resources/documents/FY-2016-CoC-Program-NOFA.pdf</u> will be included in the ranking and application process.

Permanent Housing Bonus funding can be utilized to create one of the following two new project types:

- Permanent Supportive Housing (PSH) serving 100% chronically homeless individuals and/or families
- Rapid Rehousing (RRH) serving individuals and/or families coming directly from the streets or emergency shelter, as well as persons fleeing domestic violence situations

This Bonus Project funding cannot be combined with renewal funding at this time. (If awarded this grant might be able to consolidate with an existing grant of the same component in the future.)

The project must provide permanent housing following a housing first model:

- A housing first model is defined by HUD as: "Any project that indicates that it follows a Housing First model cannot place preconditions or eligibility requirements—beyond HUD's eligibility requirements—on persons entering housing, nor can it require program participants to participate in supportive service activities or make other rules, such as sobriety, a condition of housing. Recipients may offer and encourage program participants to participate in services, but there may be no time limit as to when he/she must do so." A program can require regular meetings with a case manager.For RRH:
- According to 2016 HUD regulations RRH may serve families and/or singles, providing time limited rental assistance, case management and optional supportive services. The program can provide short-term (up to 3 months) or medium-term (3 to 24 months) assistance and can provide ongoing case management for six months after

financial assistance has ended. Best practices have determined the average length of rental assistance should be 6 months. The program can only serve clients directly from shelter or the streets, or those fleeing domestic violence; in addition there should be no barriers to entry including work or income requirements. It is required by HUD that the rental model be tenant based rental assistance. Therefore the lease must be exclusively in the client's name and their portion of the rent must be paid directly to the landlord. Grantee agencies do not receive any Rental/Program income to fund additional services in the program. In addition, the entire RRH budget must be matched by a 25% cash or in-kind agency contribution. The match must be used for items that are eligible expenses according to HUD regulations. The philosophy of a RRH program is to exit the client from the program as soon as possible and to provide as little assistance as necessary to solve the client's housing crisis, including utilizing a progressive engagement model.

For PSH:

 According to HUD regulations PSH must serve 100% chronically homeless, providing non-time limited housing and appropriate supportive services. Funding from HUD for housing assistance can be leasing or rental assistance. Agencies must provide a 25% cash or in-kind match for all funding including rental assistance, excluding leasing. As our CoC does not have many chronically homeless families and does have many chronically homeless singles, any new PSH project must primarily target the single population but could serve a limited number of families as well.

The project must commit to accept all clients through the CoC's Coordinated System.

Important Information:

Contact Jennifer Jaeger for technical assistance as needed -

779-348-7565 or Jennifer.jaeger@rockfordil.gov

Applications are accepted via email (<u>mary.runestad@rockfordil.gov</u>) or in person to 555 North Court Street, Rockford, IL 61103 and are due by Friday, August 5 prior to 4:00 p.m.

Request a delivery and read confirmation for email entries to ensure successful receipt.

Application should include the following items and be limited to a maximum of four pages:

- Name of agency
- Point of contact and contact information
- Project Name
- Overall description of proposed project, including project model, number to be served, housing type and quantity, services that will be provided
- Community need for proposed program
- Experience with operating similar programs
- If applicable, experience with administering rental assistance
- Experience with managing federal funding
- Projected staffing plan for new project
- Simple budget including how the HUD CoC Program funds will be divided between rental assistance, leasing, supportive services, operating and administrative funds and basic description of line items, as well as the sources and amount of cash and in-kind match and leveraging

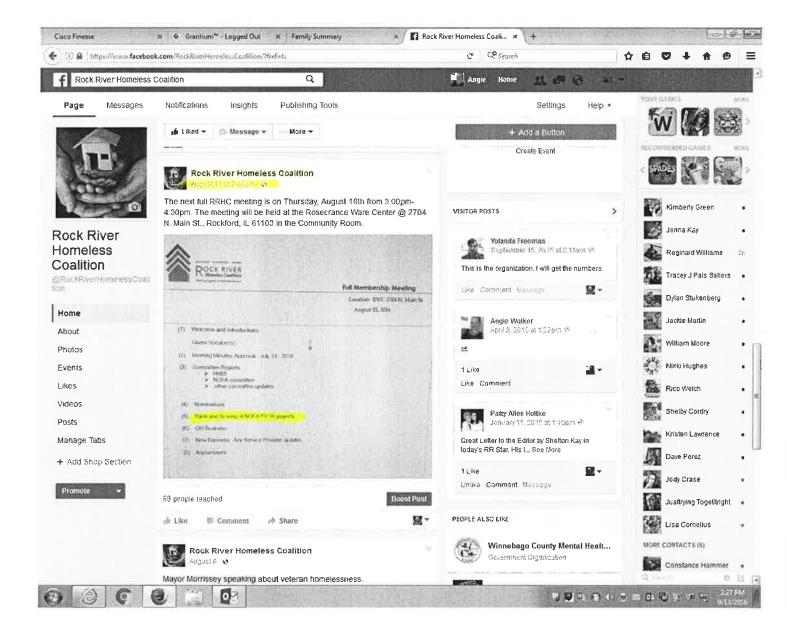
Criteria for Evaluation of Applications:

The CoC Board will consider the following factors in selecting an project to be included in the CoC application to HUD:

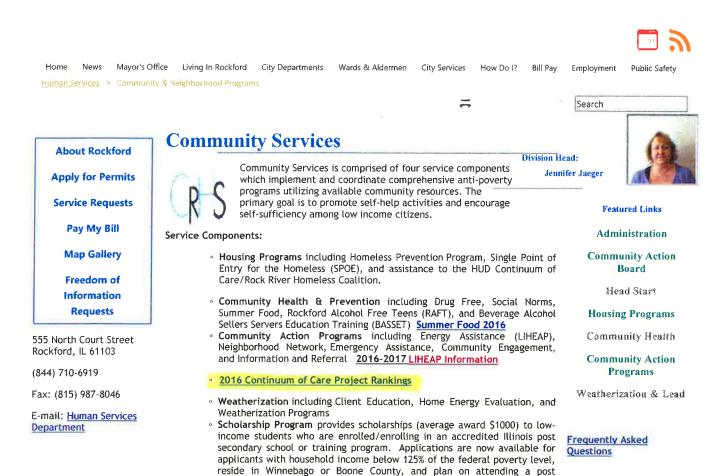
- Need in the community addressed by the project
- Overall quality of the application
- Number of homeless persons the project will serve
- Range and depth of the services that will be provided to them
- Fidelity to a housing first approach
- Commitment to the CoC's Coordinated System
- Whether the project addresses on of the following target populations; chronic, veteran, fleeing domestic violence, unaccompanied youth or families.
- Whether the project identifies in the application that they have or will commit to a policy that allows families to self-identify who is in their family as well as commits to housing families intact.
- If PSH, commitment to serving those with the longest time homeless and greatest barriers
- Capacity of organization to implement and operate new program
- Demonstrated experience of the organization in successfully implementing similar projects
- Amount of match and leveraging resources that will be brought to the project aside from HUD funding

Procedure following submission of applications:

- Applicants will be notified if further information is required.
- Applicants will be notified if they are or are not chosen to submit an application to HUD as part of the 2016 HUD CoC Program competition.
- The applicant(s) selected will be required to fill out a new project application in e-snaps as part of the competition. Technical assistance will be provided
- Following the completion of the application in e-snaps the project will be ranked as part of the CoC-wide ranking process. It will be considered under the new project category.
- Inclusion of the project application in the Collaborative Application does not guarantee funding.
- Decision on funding of all projects will be announced by HUD at a later date.









semester. 2016 Scholarship Flyer 2016 Scholarship Application

secondary accredited school or training program located in Illinois for fall

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Special thanks to Jason Rotello and Tamika Jones for contributing images for the City of Rockford website.

IL501 Project Ranking Discussion Aug. 2016 For Questions Call Jennifer Jaeger at 779-348-7565

Agency	Project	Score								
1 Shelter Care	Veterans		80	\$	60,312.00	Α				
2 Rosecrance	2007 S+C		80	\$	29,631.00	B	PPRN	\$1	,837,412.00	
3 Shelter Care	RR Reallocated		76.66	\$	41,752.00	Α	ARD	\$1	,415,764.00	
4 Shelter Care	RR New		76.65	\$	73,881.00	B	Balance	\$	421,648.00	
5 Rosecrance	2011 S+C		76.5	\$	29,631.00		Of which	\$	91,871.00	is considered a Permanent Housing Bonus
6 Shelter Care	Chronic		75	\$	33,890.00	Α	and	\$	329,777.00	is considered "eligible funds" based on
7 Shelter Care	Disabled		75	\$	50,608.00	В				PPRN minus ARD
							93% of ARD is in			
8 MELD	тн		70	\$	52,871.00	Α	Tier One	\$1	,316,661.00	
9 Rosecrance	2013 S+C		70	\$	2 9 ,630.00	В				
10 Carpenters Place	PH1		65	\$	108,705.00	Α				
11 Rosecrance	2003 S+C		65	\$	133,339.00	в				
12 Carpenters Place	PH2		60	\$	31, 9 72.00					
13 ICA	HMIS 2			\$	83,670.00					
14 Rosecrance	1998 S+C		60	\$	622,248.00			Proj	ects	
15 YSN/MELD	RR 1			\$	91,871.00					
16 ICA	HMIS 1			\$	33,764.00					
17 YSN/MELD	RR2			\$	164,818.00					
18 Remedies	RR			\$	164,819.00					
									1837412	
		TOTAL		\$1	1,837,412.00				1507775	
			93.00%	\$1	L,316,661.00			\$	329,637.00	\$ 164,818.50
		Balance		\$	520,751.00					
				\$	33,764.00					
				\$	486,987.00					

\$ 99,243.00 Falls below into Tier two of renewals

	UNRANKED RENEWALS CoC Planning	\$ 55,122.00	
	NEW APPLICATIONS		
1	YSN MELD Rapid Rehousing 1 (10)		
2	YSN MELD Rapid Rehousing 2 (36)	\$ 325,100.00	
3	Remedies Rapid Rehousing (30)	\$ 234,379.00	





Reallocations of Continuum of Care Funds

The Rock River Homeless Coalition and the Collaborative Applicant will review all CoC Projects for performance. If those projects are shown to be poor performers, they could be subject to reallocation of funds. Types of programs looked at for reallocation will be Supportive Service only (SSO) grants and Transitional Housing (TH) per HUD guidance. Agencies may also volunteer to reallocate grants to repurpose them into permanent housing projects.

Effective: 8/20/2015

BY-LAWS OF Rock River Homeless Coalition

Article 1. <u>Name</u>

The name of this organization is the Rock River Homeless Coalition (RRHC).

In the event that this organization opts to become a legal corporate entity, the following shall apply:

The name of this Not-for-Profit Corporation is the Rock River Homeless Coalition.

Article 2. <u>Mission, Vision and Purpose</u>

The mission of the Rock River Homeless Coalition is to develop, sustain and coordinate a comprehensive Continuum of Care for Winnebago/Boone Counties in order to move the homeless population toward self-sufficiency and ultimately to eliminate homelessness.

The vision of the Rock River Homeless Coalition is that individuals and families facing homelessness in Winnebago/Boone Counties should have access to safe, decent, affordable housing and the resources and supports needed to sustain it.

The purpose and scope of the Rock River Homeless Coalition is to break the cycle of homelessness in Winnebago/Boone Counties by assisting homeless individuals and families to move into permanent housing and become self-sufficient.

To achieve this purpose the Rock River Homeless Coalition will seek to:

- A. Provide knowledge to and engage the general population of Winnebago/Boone Counties to understand the at-risk population facing homelessness and to promote community-wide commitment to the goal of ending homelessness.
- B. End homelessness in Winnebago/Boone Counties and optimize self-sufficiency among individuals and families experiencing homelessness.
- C. Enhance the knowledge of the service providers to address the housing needs.
- D. Identify housing needs of homeless and low-income persons in Winnebago/Boone Counties on an ongoing basis.
- E. Support planning and development of services to meet prioritized needs within Winnebago/Boone Counties and promote access to and effective use of mainstream programs by homeless individuals and families.
- F. Obtain and sustain permanent housing solutions.
- G. Be a united coalition of community systems and individuals representing a wide array of community constituents, including, but not limited to, current/formerly homeless individuals.
- H. Assist the homeless and those who are at risk of homelessness to obtain housing, economic stability, and an enhanced quality of life through comprehensive and collaborative services.

- I. Provide substantive input into the Annual Action Plan for Winnebago/Boone Counties.
- J. To participate in a Homeless Management Information System to effectively identify needs and outcomes, streamline services, and avoid duplication of efforts.
- K. Secure funding for efforts by nonprofit providers, States, and local governments to rehouse homeless individuals and families rapidly while minimizing the trauma and dislocation caused to individuals, families, and communities as a consequence of homelessness.

The Rock River Homeless Coalition coordinates a broad array of services and include but is not limited to:

Outreach

Gaps Analysis

Permanent Housing

- Prevention of Homelessness Transitional Housing
- Emergency Shelter/Services Support Services
- Day Services
- Point In Time Count
- Coordinated Entry

Article 3. Membership

Section 1.

Membership must be comprised of individuals and agencies concerned with the development and coordination of homeless assistance programs.

Membership is open and must include but will not be limited to:

- Must include one homeless or formerly homeless individual or family
- Housing developers and landlord organizations
- Neighborhood groups
- Migrant worker groups
- HIV/AIDS County Services
- Non-profit organizations representing veterans and individuals with disabilities
- Representatives of business and financial institutions
- Representatives of organized labor
- Representatives of private foundations and funding organizations
- Social service providers
- Domestic violence and Sexual Assault service providers
- State and local government agencies
- Faith-based organizations
- Volunteer Individuals
- Current or former clients of program services of member agencies

Section 2.

Voting members or alternate members are entitled to:

- Have voting rights (One vote per agency unless individual member)
- Receive letters of support for grants indicating length of membership and level of participation
- Receive information and updates via mailing list
- Serve on committees

Non-voting members are entitled to:

- Receive letters of support for grants indicating length of membership and level of participation
- Receive information and updates via mailing list
- Serve on committees

Section 3.

Membership shall be updated monthly. Memorandums of Understanding shall be signed and updated annually. The Secretary will record attendance of voting and alternate voting members. The secretary will note a member as "present" when a non-voting member is sent in place of the voting member and alternate voting member. An "Inactive member" shall be defined as an individual or organization where the voting member, alternate voting member and non-voting member have missed three consecutive regular CoC meetings or have attended fewer than 75% of the regular CoC meetings that occurred within the last 12 months. Inactive members will not be allowed to vote. Inactive members may be removed from the membership through a CoC simple majority vote at any time after the member has been determined to be an inactive member. The CoC members may opt through a simple majority vote to waive these provisions and to reinstate membership and voting privileges for inactive members who have missed meetings due to illness, crisis situations, or other compelling and unavoidable circumstances.

Funded agencies will also be held to the standard in Article 13, Section 5.

Section 4.

Upon ratification of these bylaws, the existing membership shall be "grandfathered" into existence under the terms of these bylaws. New membership and retention of membership shall occur as follows:

Rock River Homeless Coalition

Memorandum of Understanding for Continuum Membership

Guidelines:

Prospective members shall complete an application for membership. This application shall be called a Memorandum of Understanding. The Memorandum of Understanding is effective for a period of the time of application to the following January, when it can be renewed. Entities or individuals that wish to renew membership may do so annually at the December meeting. Applications shall be submitted to the Vice-Chair of the Rock River Homeless Coalition.

The Memorandum of Understanding for Membership will identify requirements of admission standard for Continuum membership. When submitting the Memorandum of Understanding, applicants are required to complete all the portions of the application pages for processing to occur.

Article 4 Dues

Any corporation, organization or individual who is interested in membership and meets the requirements defined in Article 3 shall pay membership dues by January 31st of each calendar year. Scholarships will be made available for corporations, organizations, or individuals who lack the financial resources to pay the dues with scholarship awards being determined by the Rock River Homeless Coalition Board/Executive Committee. Failure to pay annual dues will result in suspension. Membership dues and renewals will be set by the Board in July each year for the following year.

Article 5 <u>Voting</u>

Section 1.

Each member shall have one vote upon any motion. A member is defined as follows:

- 1. Member agency, faith-based group or organization: Each agency, faith-based group or organization shall have one designated individual as a member and one designated individual as an alternate member as defined in the application for membership mentioned in Article 3, Section 4. The "member" is the individual who is entitled to vote; the alternate member will vote in the alternate when the designated member is not present. Voting member must be identified at the time of the vote.
- 2. Each individual member who is not representative of a designated organization shall be considered a voting member.
- 3. An organization or individual may have up to one voting member and one alternate voting member with voting privileges. Additional individuals will be non-voting members who shall be counted as "present" during a vote occurring when the voting member or alternate voting member is not available.

Section 2.

No member shall vote on any issue where there could be a conflict of interest. (Refer to Article 10 for definition of "conflict of interest.")

Article 6 Officers

Section 1.

The Officers of the Continuum (defined as the Executive Committee Members) shall be the following:

- Chairperson of the Board
- Vice-Chair
- Secretary
- Treasurer

The Executive Committee Members shall meet at least once monthly with the Rock River Homeless Coalition Board and full continuum.

These individuals shall perform the duties that usually pertain to their respective offices including:

- A. **Chairperson of the Board:** The Chair shall call, preside over all meetings, and set agendas for all Continuum meetings. The chair can call special meetings of the Continuum. The chair may appoint a Nominating Committee of no fewer than three members.
- B. Vice-Chair: The Vice-Chair shall assume all duties of the Chair in the event of his/her absence. The Vice Chair (s) will be responsible for membership and such other duties as assigned by the Chair.
- C. Secretary: The Secretary shall be responsible for all correspondence and prepare reports as required. The Secretary shall be responsible for the minutes of the meetings of the Continuum and for their mailing or e-mailing distribution. The secretary is responsible for tracking Continuum meeting attendance through sign-in sheets.
- D. **Treasurer:** The Treasurer shall be responsible for all monies received and disbursed. Any financial transaction shall require the authorization of any two officers of the Continuum. The Treasurer shall also review the Budget for the yearly HUD Application.

Section 2.

The officers shall be nominated by the Nominations Committee or CoC Membership at the August Meeting and elected to a two-year term in the following manner beginning with the 2016 election:

- a. In EVEN-numbered years, the CoC will elect the positions of Chair and Treasurer.
- b. In ODD-numbered years, the CoC will elect the positions of Secretary and Vice-Chair.

Section 3.

Officers may serve two consecutive terms in their respective offices and may be subject to removal at any time by a two-thirds affirmative vote of the total membership.

Section 4.

Any vacancy of officers occurring during the year shall be filled upon the recommendation of the Executive Committee and shall be ratified by 60% of the members present at the Continuum meeting.

Section 5.

Of the Chair and Vice-Chair positions, only one can be represented by an organization which solicits approval of the CoC for funding beginning with the August 2016 vote.

Article 7 <u>Rock River Homeless Coalition Board</u>

Section 1.

The Rock River Homeless Coalition Board will be nominated by the Nominations Committee or CoC Membership and elected to a two-year term by the full Rock River Homeless Coalition continuum at the July meeting.

The Rock River Homeless Coalition Board shall include 10 -12 elected members representing the following categories:

- 1) At least one homeless or formerly homeless individual
- 2) Represent the relevant organizations and projects serving homeless subpopulations, such as persons with substance use disorders; persons with HIV/AIDS; veterans; the chronically homeless; families with children; unaccompanied youth; persons with mental illness; and victims of domestic violence, dating violence, sexual assault, and stalking.
- A representative from the collaborative applicant, the lead HMIS agency, and any Continuum of Care direct grantee are deemed members of the Rock River Homeless Coalition Board. They do not need to be nominated or elected; their position fulfils a HUD requirement.

One board member may represent the interests of more than one homeless subpopulation, and the board must represent all subpopulations within the Rock River Homeless Coalition to the extent that someone is available and willing to represent that subpopulation on the board.

Section 2.

The terms of the Rock River Homeless Coalition Board member will be two years with $\frac{1}{2}$ of the board elected each year.

Section 3.

Rock River Homeless Coalition Board member responsibilities include, but are not limited to, attendance to at least four Rock River Homeless Coalition Board meetings per calendar year and participation in a minimum of one Rock River Homeless Coalition committee. Member responsibilities include, but are not limited to:

Board

• Leadership team responsible for Rock River Homeless Coalition's Continuum of Care in Operating; Planning; Designating & Operating an HMIS; and Preparing an Application for Rock River Homeless Coalition funds for the Rock River Homeless Coalition's Continuum of Care

Rock River Homeless Coalition Board

- Required to monitor performance of the RRHC and ESG recipients.
- Evaluate outcomes of projects funded under ESG and RRHC programs.
- Take action against RRHC projects that perform poorly
- Report the outcomes of ESG and RRHC projects to HUD annually
- Establish written standards
- Establish performance targets

Rock River Homeless Coalition Members

- Participate and attend all Continuum Meetings
- Active participation in a minimum of one committee

Section 4.

A) The Rock River Homeless Coalition Board may propose the removal of a Rock River Homeless Coalition Board member whenever a member has failed to attend more than four of the regularly scheduled meetings in any calendar year. The RRHC Board will notify the member of that fact via mail/email service; removal shall occur only at a properly called meeting of the RRHC Board, after at least thirty days' notice to the member to be removed, and a vote by the RRHC Continuum Board. Section 5.

A Rock River Homeless Coalition member in good standing nominated by the Chair and approved by the RRHC Board will fill any vacancies created by resignation or removal from the RRHC Board.

Section 6.

A) The Rock River Homeless Coalition Board and Executive Committee shall meet as defined in Article 6. The dates of the regular meetings shall be determined at the beginning of each fiscal year and a written schedule shall be provided to each RRHC Board member. The Chair may call for a special meeting of the RRHC Board by providing an agenda to all the members of the RRHC Board prior to any such meeting via mail/email service at least five working days prior to the meeting.

B) A quorum of the RRHC Board shall exist if two thirds or more of the total number of members are present; unless two (2) are from the same agency. However a quorum shall be assumed to be present provided no member objects. A present member may request a quorum call at which time the presiding officer must determine if quorum is present.

C) Meetings of the RRHC Board shall be governed by these bylaws and where not in conflict with the same the RRHC Board shall be bound by the provisions of Robert's Rules of Order, newly revised (2000).

D) All meetings of the RRHC Board are subject to the Open Meetings Act and all provisions thereof.

Article 8 <u>Nominating Committee</u>

Section 1.

A Nominating Committee of at least three members of the Continuum shall be appointed by the Board Chairperson.

Section 2.

The Nominating Committee shall present nominations for the Board members as needed during the **July meeting of the full Continuum for discussion**, or at any other time necessary. Once the nominating committee presents their slate, nominations from the floor will be accepted followed by a vote of the RRHC members present. Those nominated from the floor must be eligible and agree to serve if elected.

After the July Board elections, the nominating committee will accept nominations for officers from the floor, provided the person nominated is an elected Board member of the Continuum and has agreed to serve if elected. The Nominating Committee will also solicit nominations through a process made public. From those duly elected to the Board, the Nominating Committee shall present nominations for the Officers as needed during the August meeting of the full Continuum for discussion and vote, or at any other time necessary. The board and officers shall assume their duties and responsibilities at the conclusion of the August meeting.

Article 9 <u>Committees</u>

Section 1.

An Executive Committee comprised of the officers of the Continuum and shall be established to serve as the administrative arm of the Rock River Homeless Coalition. The Committee provides planning for the Continuum, ensures the cooperation of members, preparation of reports, evaluation of systems and the development of necessary procedures to implement policies ratified by the Continuum. The Executive Committee evaluates and updates the Plan to End Homelessness and coordinates efforts to ensure that the Plan to End Homelessness action steps are implemented. The Executive Committee shall meet monthly, quarterly, by phone or electronically and minimally semi-annually in person. The Executive Committee may appoint members of committees as needed.

Section 2.

A Strategic Planning Committee comprised of:

A representative assigned by each funded agency of the Continuum.

- 1. One person from an organization that either funds or carries out activities on behalf of the homeless in Winnebago/Boone Counties.
- 2. At least one homeless or formerly homeless person, if available.

shall be established to take such action as well as facilitate service delivery through formal or informal collaboration and the creation of linkages between members. The Strategic Planning Committee shall meet monthly. The Strategic Planning Committee shall foster the development of outside funding and can name a sub-committee to complete this task (i.e. grant writing).

Section 3.

The Evaluation and Project Ranking Committee shall be responsible for creation of a template to be utilized for annual project ranking. This committee will evaluate HUD guidelines and foster an appropriate ranking tool that is timely and consistent with planning and development of the Continuum. The responsibilities of the Evaluation Committee shall be to review proposals and organizations, as appropriate, and prioritize proposals according to funding and other guidelines and/or plans of the Continuum; as well as evaluate existing programs endorsed by the Continuum. The Evaluation and Project Ranking Committee will also determine the procedure for any appeals of its decisions. The Evaluation and Project Ranking Committee shall arrange for impartial volunteers to review projects and create final ranking scores for each funded program.

The Evaluation and Ranking Committee shall remain aware of "Emergency Solutions Grant" (ESG) funding, if available, which is directed by the Illinois Department of Human Services. The Ranking Committee will apply a procedure to manage the competition process for ESG as it relates to funding for community shelters.

The Ranking Committee shall remain aware of additional resources that require a CoC decision and implement strategies to review projects according to funding guidelines set forth.

The Committee shall review each project and evaluate it following current funding criteria and local needs.

Section 4.

The NOFA Committee shall plan for and review the Exhibit 1 application information; this group shall ultimately complete the Exhibit 1 application in addition to the following:

- 1. Review final recommendations for funding (based on feedback from the Evaluation and Project Ranking Committee).
- 2. Review Point-In-Time survey instruments and provide feedback to HMIS committee.
- 3. Plans for annual or bi-annual homeless count in the community.
- 4. Any additional assignments, such as interpretation of ESG funding guidelines that may be presented to the Continuum for decision-making purposes.
- 5. Support and encourage the ongoing development of all services related to the homeless through advocacy and public education.
- 6. Facilitate joint discussions with the Evaluation and Project Ranking Committee to ensure accord with proposed HUD strategic plans, goals and outcomes.

Section 5.

The HMIS Advisory Committee provides input (provider, community stakeholders, and homeless consumer) on an ongoing basis and guides the planning and implementation of the HMIS. The Advisory Committee provides policy, technical, and organizational assistance to the HMIS and oversees implementation and ongoing operations by addressing the key issues that follow. The responsibilities of the HMIS Advisory Committee shall include, but not be limited to, conducting surveys, needs assessments, the gathering of facts, participating in the Point-In-Time Count in January (or as designated) and such other activities as to identify needed new services or the expansion of existing services and for implementation of the HMIS Project. The committee reports to the Executive Committee and the full Continuum and may, from time to time, propose policies and other actions to the Continuum for its consideration.

The Strategic Planning Committee shall monitor the reports of the PCN and provide input as to effective means by which to ensure accurate results are effectively conveyed.

A Member of each funded agency will serve on the HMIS Committee, in addition to any other volunteers, with 75 % attendance requirement.

Section 6.

The Membership, Education and Public Relations Committee

- Education
 - □ Survey RRHC membership for training needs
 - □ Plan, hold and evaluate training
 - □ Coordinate with relevant statewide training opportunities
- Public Relations and Communications
 Create unified PR and communication plan
 Maintain relationships and share communication with area legislators and elected officials.
 - □ Establish media contacts
 - □ Organize and host events to promote RRHC in the community, as needed
- Membership
 - Publicize recruitment of RRHC members in accordance with HUD guidelines;
 Target HUD-identified sub-populations

Section 7.

Other Ad Hoc Committees as needed

Article 10. Conflicts of Interest

Section 1.

All individuals and representatives of organizations who have, are seeking, or considering to seek funds under the endorsement of the Continuum shall adhere to the following:

A. He or she shall disclose to the Continuum any conflict or appearance of conflict of interest which may or could be reasonably known to exist.

B. He or she shall not vote on any item that would create a conflict of interest or appearance of conflict of interest.

C. He or she shall not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

D. He or she shall not lobby or seek information from any other member of the Continuum if such action would create a conflict of interest or the appearance of a conflict of interest.

Article 11. Appeals Process

Section 1.

Unresolved differences, such as attendance, removal from the Continuum, concerns or matters arising from Ranking, or other matters requiring resolution should be addressed through the appeals process. A member (or former member after having been removed), may appeal the decision or offending matter within seven calendar days of occurrence, in writing, to the Executive Committee of the Rock River Homeless Coalition. Within seven calendar days from the date of the written request, the Executive Committee will devise a written response, with its decision being final.

Article 12. <u>Ouorum</u>

Section 1.

For general business, a quorum of the Rock River Homeless Coalition shall constitute those members who are present and at least one week's notice has been given. For matters concerning projects, funding recommendations, government or other grants, a quorum shall constitute at least seven voting members. A motion shall carry with a vote of the majority of the voting members present at a meeting. The exception to this is the decision to hire an Executive Director as outlined in Article 9, Section 2.

Article 13. Meetings and Attendance

Section 1.

The full Continuum shall meet monthly, and in compliance with the Open Meetings

Act. Section 2.

Any materials or articles for review by the full Continuum, especially those that may be brought to the attention of the full Continuum for a vote, shall be provided no later than 48 hours prior to the scheduled meeting time.

Section 3.

Each member is privileged to invite guests to all meetings except for closed meetings, and consistent with the Open Meetings Act.

Section 4.

A majority of Officers may call a special meeting at any time. A minimum of 48 hours of notice to the community shall be provided.

Section 5.

Attendance will be recorded by the Secretary at all Continuum of Care meetings. Funded agencies are expected to have at least a 75% attendance rate at all meetings, determined on an annual basis at the July meeting and measuring attendance from preceding July to preceding June. Each member of the HMIS Committee must meet the 75% attendance requirement.

Section 6.

Upon a request, in writing, by at least five members of the Continuum, a special meeting can be called by the Chair at any time. A minimum of 48 hours of notice to the community shall be provided.

Article 14. Amendments to Bylaws

Section 1.

These Bylaws may be amended by a majority vote at a meeting of the Continuum provided that the proposed amendment(s) shall have been submitted in writing to each member at least 14 calendar days before action is taken by the Continuum.

Article 15. Non-Discrimination

Section 1.

The members, officers, and persons served by the Continuum shall be selected entirely on a non- discriminatory basis with respect to age, sex, race, ethnicity, religion, sexual orientation, disability, and national origin in accordance with all state and federal regulations.

Article 16. Homeless Management Information System

Section 1.

Recognizing that a Homeless Management Information System (HMIS) is the information system designated by the CoC to comply with the requirements of the CoC Program interim rule at 24 CFR 578, other requirements established by HUD, including the 2014 HMIS Data Standards, and any local requirements, the Winnebago/Boone Counties CoC will designate an eligible applicant, to be known as the HMIS Lead, to manage its HMIS. The HMIS Lead, in consultation with the CoC, Collaborative Applicant and HMIS Advisory Committee, will also be responsible for developing all the policies and procedures necessary for compliance with the CoC Program interim rule, the 2014 HMIS Data Standards, and any local requirements. The Rock River Homeless Coalition will follow all HUD subsequent revisions to the data standards. These policies and procedures will be incorporated into the Winnebago/Boone Counties CoC governance charter by reference, will be available upon request, and will include

the following provisions:

- is updated annually;
- includes all policies and procedures necessary to comply with the HMIS requirements in the CoC Program interim rule, the 2014 HMIS Data Standards, and any local HMIS requirements;
- clearly outlines the roles and responsibilities of the CoC and HMIS Lead, and;
- includes the following plans:

Privacy Plan: A plan that at the minimum includes data collection limitations; purpose and use limitations; allowable uses and disclosures; access and correction standards; and protections for victims of domestic violence, dating violence, sexual assault, and stalking
 Security Plan: A plan that ensures the confidentiality, integrity, and availability of all HMIS information; protects against any reasonably anticipated threats or hazards to security, and ensure compliance by end users.

o Data Quality Plan: A plan that ensures completeness, accuracy, and consistency of the data in the HMIS.

Article 17. <u>Coordinated Assessment Plan</u>

Section 1.

Recognizing that the development of written standards of prioritizing services to homeless individuals and families is paramount, the Continuum of Care shall develop and follow a system of care that defines:

- * Program access points;
- * Prioritization of services to the client(s) who need them;
- * The use of best practices and standards of service and steps to implement them;

* The means by which stakeholders in the Continuum of Care can work to codify and effectively coordinate services.

Section 2.

The Coordinated Assessment Plan shall be reviewed annually by the Strategic Planning Committee to determine:

- * What community populations should be targeted for upcoming funding opportunities;
- * Which practices are working and which could be reviewed for greater efficiency;

* If there are any new standards that needed to be implemented in the Coordinated Assessment Plan.

Article 18. Organizational Responsibility for Receipt of CoC-Oriented Funding

Section 1.

Each agency receiving funding from CoC-oriented programs, including but not limited

to: HUD Continuum of Care Funding, The Emergency Solutions Grant Program The Illinois Department of Human Services-Prevention Program Funding,

Shall have on file written standards and guidelines for providing assistance to clients pursuant to the current directives and guidance of the funding originator (i.e. but not limited to HUD or DHS).

Section 2.

From time to time, such opportunities shall change names, funding schemes or initiatives and that said organizations shall comply with documented guidelines in effect at the time of granting or contracting of services with said incumbent.

Date Approved August 18, 2016 Date Created July 2016

Rock River Homeless Coalition HMIS Policies and Procedures

Rock River Homeless Coalition And Institute for Community Alliances 2016

Contents

1	. Introduction	3
	1.1 HMIS BENEFITS	3
2	. Requirements for Participation	5
	2.1 RESPONSIBILITIES OF HMIS USERS	5
	2.2 PARTNER AGENCY REQUIREMENTS	5
	2.4 USER TRAINING REQUIREMENTS	7
	2.5 HMIS USER LEVFI S	8
	2.6 HMIS VENDOR REQUIREMENTS	. 10
	2.7 MINIMUM TECHNICAL STANDARDS	. 10
	2.8 HMIS LICENSE FEES	. 11
	2.9 HMIS OPERATING POLICIES VIOLATION	11
3.	Privacy and Security	. 13
	3.1 DATA ASSESSMENT AND ACCESS	. 13
	3.2 DATA REPORTING PARAMETERS AND GUIDELINES	14
	3.3 RELEASE OF DATA FOR GRANT FUNDERS	15
	3.4 BASELINE PRIVACY POLICY	15
	3.5 USE OF A COMPARABLE DATABASE BY VICTIM SERVICE PROVIDERS	18
	3.6 USER CONFLICT OF INTEREST	19
	3.7 SECURITY PROCEDURE TRAINING FOR USERS	19
	3.8 VIOLATION OF SECURITY PROCEDURES	19
	3.9 PROCEDURE FOR REPORTING SECURITY INCIDENTS	19
	3.10 DISASTER RECOVERY PLAN	20
4.	Data Requirements	22
	4.1 MINIMUM DATA COLLECTION STANDARD	22
	4.2 PROVIDER NAMING CONVENTION	22
	4.3 DATA QUALITY PLAN	22
	4.4 XML IMPORTS	22
	4.5 HMIS DATA PROTECTION	23
5.	Glossary	24
6.	Appendices	26
	6.1 DATA DICTIONARY AND DATA MANUAL	

1

1. Introduction

The Rock River Homeless Management Information System (HMIS) is the designated database of the Rock River Homeless Coalition. HMIS is an internet-based database that is used by homeless service organizations in the Rock River Homeless Coalition to record and store clientlevel information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness. Bowman Systems, LLC, administers the central server and HMIS software, and ICA administers user and agency licensing, training and compliance.

HMIS enables service providers to measure the effectiveness of their interventions and facilitate longitudinal analysis of service needs and gaps within the Continuum of Care. Information that is gathered from consumers via interviews conducted by service providers is analyzed for an unduplicated count, aggregated (void of any identifying client level information) and made available to policy makers, service providers, advocates, and consumer representatives. Data aggregated from HMIS about the extent and nature of homelessness in the Rock River Homeless Coalition is used to inform public policy decisions aimed at addressing and ending homelessness at local, state and federal levels.

Guidance for the implementation of Rock River Homeless Coalition's HMIS is provided by the coalition's HMIS governance board that is committed to understanding the gaps in services to consumers of the human service delivery system in an attempt to end homelessness.

This document provides the policies, procedures, guidelines and standards that govern HMIS operations, as well as the responsibilities for Agency Administrators and end users.

1.1 HMIS BENEFITS

Use of HMIS provides numerous benefits for service providers, homeless persons, and the Rock River Homeless Coalition.

Benefits for service providers

- Provides online real-time information about client needs and the services available for homeless persons.
- Assures confidentiality by providing information in a secured system.
- Decreases duplicative client intakes and assessments.
- Tracks client outcomes and provides a client history.
- Generates data reports for local use and for state and federal reporting requirements.
- Facilitates the coordination of services within an organization and with other agencies and programs.
- Provides access to a statewide database of service providers, allowing agency staff to easily select a referral agency.
- Increased ability to define and understand the extent of homelessness throughout Rock River Homeless Coalition.
- Increased ability to focus staff and financial resources where services for homeless
 persons are needed the most.

• Increased ability to evaluate the effectiveness of specific interventions and programs, and services provided.

Benefits for homeless persons

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- Intake information and needs assessments are maintained historically, reducing the number of times homeless persons must repeat their stories to multiple service providers.
- The opportunity to provide intake and life history one time demonstrates that service providers consider the homeless person's time valuable, and restores some of the consumer's dignity.
- Multiple services can be easily coordinated and referrals streamlined.
- Increased data collection may increase area funding, producing increased service availability to clients

2. Requirements for Participation

2.1 RESPONSIBILITIES OF HMIS USERS

Agency Administrators

- 1. Edit and update agency information in HMIS.
- 2. Ensure that the participating agency obtains a unique user license for each user at the agency.
- 3. Establish the standard report for each specific program created.
- Maintain a minimum standard of data quality by ensuring the Universal Data Elements are complete and accurate for every individual served by the agency and entered into HMIS.
- 5. Maintain the required universal data elements and program specific data elements for each program in accordance with the updated 2015 HMIS Data Standards, and maintain data elements required by the HMIS Governance board and/or the CoC in which the program operates.
- 6. Ensure agency staff persons receive required HMIS training, and review the Rock River HMIS Policies and Procedures, the Agency Partnership Agreement and any agency policies which impact the security and integrity of client information.
- Ensure that HMIS access is granted only to staff members that have received training, have completed the Rock River HMIS User Agreement and are authorized to use HMIS.
- 8. Notify all users at their agency of interruptions in service.
- 9. Provide a single point of communication between users and HMIS staff at the Institute for Community Alliances.
- 10. Administer and monitor data security policies and standards, including:
 - User access control;
 - The backup and recovery of data; and
 - Detecting and responding to violations of the policies and procedures or agency procedures.

Users

- 1. Take appropriate measures to prevent unauthorized data disclosure.
- 2. Report any security violations.
- 3. Comply with relevant policies and procedures.
- 4. Input required data fields in a current and timely manner.
- 5. Ensure a minimum standard of data quality by accurately answering the Universal Data Elements and required program specific data elements for every individual entered into HMIS.
- 6. Inform clients about the agency's use of HMIS.
- 7. Take responsibility for any actions undertaken with one's username and password.
- 8. Complete required training.
- 9. Read any communications from the coalition or HMIS lead pertaining to HMIS information.

2.2 PARTNER AGENCY REQUIREMENTS

Participation Agreement Documents

Partner Agencies must complete the following documents:

- 1. **Partnership Agreements** must be signed by each participating agency's executive director. The Institute for Community Alliances will retain the original document. The participation agreement states the agency's commitment to adhere to the policies and procedures for effective use of HMIS.
- 2. Rock River HMIS User Agreements list user policies and responsibilities and are electronically signed by each authorized user. An electronic or hard copy of the original document must be kept by the originating agency.
- 3. **Coordinated Services Agreements** allow the specifically named HMIS user to enter client data as, or on behalf of, another specifically named Participating Agency and/or to report on behalf the specifically named Participating Agency. The signed agreement will be maintained by the HMIS Lead Agency, the Institute for Community Alliances.

User Access to the System

The Agency Administrator will determine user access for users at or below the Case Manager III access level and assign users to the appropriate agency provider. The System Administrator will generate usernames and passwords within the administrative function of the software.

The Agency Administrator and all users must complete training before access to the system is granted by ICA. All users must undergo a criminal background check as detailed in the Agency Partnership Agreement.

User Requirements

Users must be paid staff or official volunteers of a Partner Agency. An official volunteer must complete a volunteer application with the Partner Agency, undergo agency training, pass a criminal background check, and record volunteer hours with the agency. Individuals who are solely contracting with a Partner Agency are prohibited from receiving a user license. All users must be at least 18 years old.

Users who are also Clients Listed in HMIS

In order to prevent users from editing their own file or files of immediate family members, all users will agree to a conflict of interest statement that is part of the User Agreement. Users must disclose any potential conflict of interest to their Agency Administrator. Users will be prohibited from making changes to the information in their own file or the files of their immediate family members. If a user is suspected of violating this agreement, the System Administrator will run the audit trail report to determine if there was an infraction.

Passwords

- Creation: Passwords are automatically generated from the system when a user is created. The Agency Administrator will communicate the system-generated password to the user.
- Use: The user will be required to change the password the first time they log onto the system. The password must be at least 8 characters and alphanumeric. Passwords should not be able to be easily guessed or found in a dictionary. Passwords are the

individual's responsibility and users cannot share passwords. Users shall not keep written copies of their password in a publicly accessible location.

- Storage: Any passwords that are written down are to be stored securely and must be inaccessible to other persons. Users are not to store passwords on a personal computer for easier log on.
- Expiration: Passwords expire every 45 days. Users may not use the same password consecutively. Passwords cannot be re-used until two password selections have expired.
- Unsuccessful logon: If a user unsuccessfully attempts to log-on three times, the User ID will be "locked out," and access permission will be revoked rendering the user unable to gain access until his/her password is reset.

Inputting Data

Agencies participating in the HMIS must meet the minimum data entry requirements established by the updated 2015 HMIS Data Standards.

Tracking of Unauthorized Access

Any suspicion of unauthorized activity should be reported to the Institute for Community Alliances HMIS staff.

Agency Administrator

The Agency Administrator will be responsible for resetting passwords, and monitoring HMIS access by users at their agency. This person will also be responsible for ensuring new agency staff persons are trained on how to use the HMIS by the System Administrators and for ensuring that new staff are aware of any agency or program specific data entry requirements.

The Agency Administrator must identify the assessments and requirements for each program, and work with the System Administrators to properly set up each program in the HMIS.

Client Consent Forms

In addition to posting the HMIS Consumer Notice, agencies shall require clients to sign a client consent form. The form requires clients to authorize the electronic sharing of their personal information with other agencies that participate in HMIS when data sharing is appropriate for client service.

Data Protocols

Agencies may collect information for data elements in addition to the minimally required data elements established by the HMIS governance board in accordance with HUD. Agencies must maintain consistency with data collection and entry within each program.

2.4 USER TRAINING REQUIREMENTS

New User Training Requirements

All users are required to attend new user training with ICA prior to receiving access to the system. If ICA determines that data entered by a current end user does not meet minimum data quality standards, users may be required to repeat this training.

Once a new user begins the HMIS new user training series, the user has 15 days to complete the training series and all required assignments. ICA staff will review the user's homework and determine if corrections are needed. Users will have an additional 15 days to make all

corrections. If the user fails to complete all requirements within 30 days, the user will need to retake the training series. ICA staff may determine that a new user failed to grasp the necessary data entry concepts based on the quality of the user's homework. ICA staff may use their discretion to require new users to repeat new user training. It a new user fails to successfully complete the homework requirements for data entry after repeated attempts, ICA staff may use their discretion to determine that the new user is not capable of accurate and complete data entry, and may refuse to issue the new user a Rock River HMIS user license.

New users may request permission from ICA to take the new user training series over two consecutive months if new users are unable to attend all trainings during one month. ICA must receive the request in writing prior to the start of the new user training series.

ICA has sole discretion to waive the requirement to attend new user training regarding persons with previous HMIS experience. ICA will consider the user's familiarity with the HMIS and the need for the user to learn about potential system updates and changes during new user training when making its decision to waive the new user training requirement.

Users are expected to fully participate in all trainings attended. If a user misses more than ten minutes or ten percent (whichever is greater) of a training, the user will not receive credit for completing the training.

Ongoing User Training Requirements

All users are required to attend annual security training to retain their user license.

2.5 HMIS USER LEVELS

HMIS user roles are listed on the ICA website.

Resource Specialist I

Users at this level may access only the ResourcePoint module. Users may search the database of area agencies and programs, and view the agency or program detail screens. A Resource Specialist I cannot modify or delete data, and does not have access to client or service records or other modules and screens.

Resource Specialist II

Users may access only the ResourcePoint module. Users may search the database of area agencies and programs, and view the agency or program detail screens. At this level, the user does not have access to client or service records or other modules and screens. A Resource Specialist II is an agency-level "Information & Referral (I&R) specialist" who may update their own agency and program information.

Resource Specialist III

Users at this level may access only the ResourcePoint module. Users may search the database of area agencies and programs and view the agency or program detail screens. A Resource Specialist III may add or remove resource groups, including Global (which they get by default). Access to client or service records and other modules and screens is not given. A Resource Specialist III may edit the system-wide news feature.

Volunteer

Users may access ResourcePoint, and have limited access to ClientPoint and service records. A volunteer may view or edit basic demographic information about clients (the profile screen), but is restricted from all other screens in ClientPoint. A volunteer may also enter new clients, make referrals, and check clients in/out from a shelter. A volunteer does not have access to the "Services Provided" tab. This access level is designed to allow a volunteer to perform basic intake steps with a new client and then refer the client to an agency staff member or case manager.

Agency Staff

Users may access ResourcePoint, have full access to service records, and limited access to ClientPoint. Agency staff may access most functions in ServicePoint, however, they may only access basic demographic data on clients (profile screen). All other screens are restricted including Reports. Agency Staff can add news items to the newswire feature.

Case Manager I

Users may access all screens and modules except "Administration." A Case Manager I may access all screens within ClientPoint, except the medical screen for confidentiality reasons. Users may access Reports.

Case Manager II

Users may access all screens and modules except "Administration." A Case Manager II may access all screens within ClientPoint, including the medical screen. Users may access Reports.

Case Manager III

This role has the same actions available as the Case Manager II with the added ability to see program data for all providers on their provider tree, like an Agency Administrator.

Agency Administrator

Users may access all ServicePoint screens and modules. Agency Administrators may add/remove users and edit agency and program data for all providers on their provider tree.

Executive Director

Users have the same access rights as an Agency Administrator, but rank above the Agency Administrator.

System Operator

Users may only access Administration screens. System operators can create new agency providers, add new users, reset passwords, and access other system-level options. Users may order additional user licenses and modify the allocation of licenses. They maintain the system, but may not access any client or service records.

System Administrator I

Users have the same access rights to client information as Agency Administrators, but for all agencies in the system. System Administrators also have full access to administrative functions.

System Administrator II

There are no system restrictions on users. They have full HMIS access.

2.6 HMIS VENDOR REQUIREMENTS

Physical Security

Access to areas containing HMIS equipment, data and software will be secured.

Firewall Protection

The vendor will secure the perimeter of its network using technology from firewall vendors. Company system administrators monitor firewall logs to determine unusual patterns and possible system vulnerabilities.

User Authentication

Users may only access HMIS with a valid username and password combination that is encrypted via SSL for internet transmission to prevent theft. If a user enters an invalid password three consecutive times, they are automatically shut out of that HMIS session. For added security, the session key is automatically scrambled and re-established in the background at regular intervals.

Application Security

HMIS users will be assigned a system access level that restricts their access to appropriate data.

Database Security

Wherever possible, all database access is controlled at the operating system and database connection level for additional security. Access to production databases is limited to a minimal number of points; as with production servers, production databases do not share a master password database.

Technical Support

The vendor will assist ICA HMIS staff to resolve software problems, make necessary modifications for special programming, and will explain system functionality to ICA.

Technical Performance

The vendor maintains the system, including data backup, data retrieval and server functionality/operation. Upgrades to the system software will be continuously developed and implemented.

Hardware Disposal

Data stored on broken equipment or equipment intended for disposal will be destroyed using industry standard procedures.

2.7 MINIMUM TECHNICAL STANDARDS

Minimum Computer Requirements

- A PC with a 2 Gigahertz or higher processor, 40GB hard drive, 512 MB RAM, and Microsoft Windows 7 or 8
- The most recent version of Google Chrome, Safari or Firefox. No additional plug-in is required.

It is recommended that your browser have a 128 cipher / encryption strength installed. The browser's cache should be set to "Check for new version of the stored pages: Every visit to page."

- A broadband Internet connection or LAN connection. Dial-up modem connections are not sufficient.
- Virus protection updates
- The only mobile device that is officially supported by Bowman Systems is the Apple iPad running the latest version of IOS.

Additional Recommendations

Memory

• Windows 7: 4Gig recommended (2 Gig minimum)

Monitor

• Screen Display: 1024x768 (XGA) or higher; 1280x768 strongly advised Processor

• A Dual-Core processor is recommended

2.8 HMIS LICENSE FEES

Annual Rock River HMIS License Fees

Agencies may purchase HMIS licenses at any time. License fees are determined based upon the amount per license charged by Bowman Systems.

Billing for licenses will occur once annually in July, covering the Bowman contract period of April through March. The annual fee will cover the subsequent calendar year and must be paid within 60 days following the date of the invoice. If a Partner Agency fails to pay their license fees by the stated due date, the agency's user licenses will be suspended until ICA receives the payment.

Reporting Licenses

The reporting license is available for HMIS users to facilitate data reporting. The additional amount charged for these licenses will reflect the actual cost of the license charged to the HMIS Lead Agency under the HMIS software contract.

2.9 HMIS OPERATING POLICIES VIOLATION

HMIS users and Partner Agencies must abide by all HMIS operational policies and procedures found in the HMIS Policies and Procedures manual, the Rock River HMIS User Agreement, and the Partner Agency Agreement. Repercussion for any violation will be assessed in a tiered manner. Each user or Partner Agency violation will face successive consequences – the violations do not need to be of the same type in order to be considered second or third violations. User violations do not expire. No regard is given to the duration of time that occurs between successive violations of the HMIS operation policies and procedures as it relates to corrective action.

• First Violation – the user and Partner Agency will be notified of the violation in writing by ICA. The user's license will be suspended for 30 days, or until the Partner Agency notifies ICA of action taken to remedy the violation. ICA will provide necessary training to

the user and/or Partner Agency to ensure the violation does not continue. ICA will notify the HMIS governance board of the violation during the next scheduled Governance board meeting following the violation.

- Second Violation the user and Partner Agency will be notified of the violation in writing by ICA. The user's license will be suspended for 30 days. The user and/or Partner Agency must take action to remedy the violation; however, this action will not shorten the length of the license suspension. If the violation has not been remedied by the end of the 30-day user license suspension, the suspension will continue until the Partner Agency notifies ICA of the action taken to remedy the violation. ICA will provide necessary training to the user and/or Partner Agency to ensure the violation does not continue. ICA will notify the HMIS governance board of the violation during the next scheduled governance board meeting following the violation.
- Third Violation the user and Partner Agency will be notified of the violation in writing by ICA. ICA will notify the HMIS governance board of the violation and convene a review panel made up of Governance board members who will determine if the user's license should be terminated. The user's license will be suspended for a minimum of 30 days, or until the governance board review panel notifies ICA of their determination, whichever occurs later. If the governance board determines the user should retain their user license, ICA will provide necessary training to the user and/or Partner Agency to ensure the violation does not continue. If users who retain their license after their third violation have an additional violation, that violation will be reviewed by the governance board review panel.

Any user or other fees paid by the Partner Agency will not be returned if a user's or Partner Agency's access to HMIS is revoked.

Notifying the HMIS Lead Agency of a Violation

It is the responsibility of the Agency Administrator or general User at Partner Agencies that do not have an agency administrator to notify the HMIS Lead Agency when they suspect that a User or Partner Agency has violated any HMIS operational agreement, policy or procedure. A complaint about a potential violation must include the User and Partner Agency name, and a description of the violation, including the date or timeframe of the suspected violation. Complaints should be sent in writing to the HMIS Lead Agency (ICA) at rrhmis@icalliances.org. The name of the person making the complaint will not be released from the HMIS Lead Agency if the individual wishes to remain anonymous.

Violations of Local, State or Federal Law

Any Partner Agency or user violation of local, state or federal law will immediately be subject to the consequences listed under the Third Violation above.

Multiple Violations within a 12-Month Timeframe

During a 12 month calendar year, if there are multiple users (3 or more) with multiple violations (2 or more) from one Partner Agency, the Partner Agency as a whole will be subject to the consequences listed under the Third Violation above.

3. Privacy and Security

The importance of the integrity and security of HMIS cannot be overstated. Given this importance, HMIS must be administered and operated under high standards of data privacy and security. The Institute for Community Alliances and Partner Agencies are jointly responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission and destruction of data, comply with the HMIS privacy, security and confidentiality policies and procedures. When a privacy or security standard conflicts with other Federal, state and local laws to which the Partner Agency must adhere, the Partner Agency must contact ICA to collaboratively update the applicable policies for the partner agency to accurately reflect the additional protections.

3.1 DATA ASSESSMENT AND ACCESS

All HMIS data will be handled according to the following major classifications: Shared or Closed Data. HMIS staff will assess all data, and implement appropriate controls to ensure that data classified as shared or closed are handled according to the following procedures.

Shared Data

Shared data is unrestricted information that has been entered by one provider and is visible to other providers using HMIS. Rock River Homeless Coalition's HMIS is designed as an open system that defaults to allow shared data. Providers have the option of changing their program settings to keep client data closed.

Closed Data

Information entered by one provider that is not visible to other providers using HMIS. Programs that serve victims of domestic violence, individuals with HIV/AIDS, provide youth services, or legal services must enter closed data. Further, programs that provide youth services and legal services may enter clients as "unnamed." Individual client records can be closed at the client's request.

Procedures for transmission and storage of data

- Open Data: This is data that does not contain personal identifying information. The data should be handled discretely, unless it is further classified as Public Data. The data must be stored out of site, and may be transmitted via internal or first-class mail until it is considered public data.
- Confidential Data at the Agency Level: Confidential data contains personal identifying information. Each agency shall develop rules governing the access of confidential data in HMIS to ensure that those staff needing confidential data access will have access, and access is otherwise restricted. The agency rules shall also cover the destruction of paper and electronic data in a manner that will ensure that privacy is maintained and that proper controls are in place for any hard copy and electronic data that is based on HMIS data.

Whenever confidential data is accessed:

- Hard copies shall be shredded when disposal is appropriate. Hard copies shall be stored in a secure environment that is inaccessible to the general public or staff not requiring access.
- Hard copies shall not be left out in the open or unattended.

- Electronic copies shall be stored only where the employee can access the data.
- Electronic copies shall be stored where a password is required to access the data if on shared server space.

All public data must be classified as aggregated public or unpublished restricted access data.

Aggregated Public Data

Information published according to the "Reporting Parameters and Guidelines" (HMIS Policies and Procedures Section 3.2).

Unpublished Restricted Access Data

Information scheduled, but not yet approved, for publication. Examples include draft reports, fragments of data sets, and data without context or data that have not been analyzed.

Procedures for Transmission and Storage of Data

- Aggregated Public Data: Security controls are not required.
- Unpublished Restricted Access Data:
 - Draft or Fragmented Data Accessible only to authorized HMIS staff and agency personnel. Requires auditing of access and must be stored in a secure out-ofsight location. Data can be transmitted via e-mail, internal departmental or first class mail. If mailed, data must be labeled confidential.
 - 2. Confidential Data: Requires encryption at all times. Must be magnetically overwritten and destroyed. Hard copies of data must be stored in an out-of-sight secure location.

3.2 DATA REPORTING PARAMETERS AND GUIDELINES

All open data will be handled according to the following classifications - *Public Data*, *Internal Data*, *and Restricted Data* - and should be handled according to the following procedures.

Principles for Release of Data

- Only de-identified aggregated data will be released except as specified below.
- No identified client data may be released without informed consent unless otherwise specified by Illinois State and Federal confidentiality laws. All requests for such information must be addressed to the owner/participating agency where the data was collected.
- Program specific information used for annual grant program reports and program specific information included in grant applications is classified as public information. No other program specific information will be released without written consent.
- There will be full access to aggregate data included in published reports.
- Reports of aggregate data may be made directly available to the public.
- The parameters of the aggregated data, that is, where the data comes from and what it includes will be presented with each report.
- Data will be mined for agencies requesting reports on a case-by-case basis.
- Requests must be written with a description of specific data to be included and for what duration of time. Requests are to be submitted at least 30 days prior to the date the report is needed. Exceptions to the 30-day notice may be made.
- ICA reserves the right to deny any request for aggregated data.

3.3 RELEASE OF DATA FOR GRANT FUNDERS

Entities providing funding to agencies or programs required to use HMIS will not have automatic access to HMIS. Access to HMIS will only be granted by ICA when there is a voluntary written agreement In place between the funding entity and the agency or program. Funding for any agency or program using HMIS cannot be contingent upon establishing a voluntary written agreement allowing the funder HMIS access.

3.4 BASELINE PRIVACY POLICY

Collection of Personal Information

Personal information will be collected for HMIS only when it is needed to provide services, when it is needed for another specific purpose of the agency where a client is receiving services, or when it is required by law. Personal information may be collected for these purposes:

- To provide or coordinate services for clients
- To find programs that may provide additional client assistance
- To comply with government and grant reporting obligations
- To assess the state of homelessness in the community, and to assess the condition and availability of affordable housing to better target services and resources

Only lawful and fair means are used to collect personal information.

Personal information is collected with the knowledge and consent of clients. It is assumed that clients consent to the collection their personal information as described in this notice when they seek assistance from an agency using HMIS and provide the agency with their personal information.

If an agency reasonably believes that a client is a victim of abuse, neglect or domestic violence, or if a client reports that he/she is a victim of abuse, neglect or domestic violence, explicit permission is required to enter and share the client's information in HMIS.

Personal information may also be collected from:

- Additional individuals seeking services with a client
- Other private organizations that provide services and participate in HMIS

Upon request, clients must be able to access the *Use and Disclosure of Personal Information* policy found below.

Use and Disclosure of Personal Information

These policies explain why an agency collects personal information from clients. Personal information may be used or disclosed for activities described in this part of the notice. Client consent to the use or disclosure of personal information for the purposes described in this notice, and for reasons that are compatible with purposes described in this notice but not listed, is assumed. Clients must give consent before their personal information is used or disclosed for any purpose not described here.

Personal information may be used or disclosed for the following purposes:

1. To provide or coordinate services to individuals. Client records are shared with other organizations that may have separate privacy policies and that may allow different uses and disclosures of the information. If clients access services at one of these other

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organizations, they will be notified of the agency's privacy and sharing policy. {OPTIONAL}

- 2. To carry out administrative functions such as legal audits, personnel, oversight, and management functions.
- 3. For research and statistical purposes. Personal information released for research and statistical purposes will be de-identified.
- 4. For academic research conducted by an individual or institution that has a formal relationship with the Institute for Community Alliances. The research must be conducted by an individual employed by or affiliated with the organization or institution. All research projects must be conducted under a written research agreement approved in writing by the designated agency administrator or executive director. The written research agreement must:
 - Establish the rules and limitations for processing personal information and providing security for personal information in the course of the research.
 - Provide for the return or proper disposal of all personal information at the conclusion of the research.
 - Restrict additional use or disclosure of personal information, except where required by law.
 - Require that the recipient of the personal information formally agree to comply with all terms and conditions of the written research agreement, and
 - Be substituted, when appropriate, by Institutional Review Board, Privacy Board or other applicable human subjects' protection institution approval.
- 5. When required by law. Personal information will be released to the extent that use or disclosure complies with the requirements of the law.
- 6. To avert a serious threat to health or safety if:
 - the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public, and
 - the use or disclosure is made to a person reasonably able to prevent or lessen the threat, including the target of the threat.
- 7. To report to a governmental authority (including a social service or protective services agency) authorized by law to receive reports of abuse, neglect or domestic violence, information about an individual reasonably believed to be a victim of abuse, neglect or domestic violence. When the personal information of a victim of abuse, neglect or domestic violence is disclosed, the individual whose information has been released will promptly be informed, except if:
 - it is believed that informing the individual would place the individual at risk of serious harm, or
 - a personal representative (such as a family member or friend) who is responsible for the abuse, neglect or other injury is the individual who would be informed, and it is believed that informing the personal representative would not be in the best interest of the individual as determined in the exercise of professional judgment.
- 8. For a law enforcement purpose (if consistent with applicable law and standards of ethical conduct) under any of these circumstances:

- In response to a lawful court order, court-ordered warrant, subpoena or summons
 issued by a judicial officer or a grand jury subpoena, if the court ordered disclosure
 goes through the Institute for Community Alliances and is reviewed by the Executive
 Director for any additional action or comment.
- If the law enforcement official makes a written request for personal information. The written request must meet the following requirements:
 - i. Be signed by a supervisory official of the law enforcement agency seeking the personal information.
 - ii. State how the information is relevant and material to a legitimate law enforcement investigation.
 - iii. Identify the personal information sought.
 - iv. Be specific and limited in scope to the purpose for which the information is sought, and
 - v. Be approved for release by the Institute for Community Alliances legal counsel after a review period of seven to fourteen days.
- If it is believed that the personal information constitutes evidence of criminal conduct that occurred at the agency where the client receives services.
- If the official is an authorized federal official seeking personal information for the provision of protective services to the President or other persons authorized by 18 U.S.C. 3056, or to a foreign heads of state or other persons authorized by 22 U.S.C. 2709(a)(3), or for the conduct of investigations authorized by 18 U.S.C. 871 (threats against the President and others), and the information requested is specific and limited in scope to the extent reasonably practicable in light of the purpose for which the information is sought.
- 9. For law enforcement or another public official authorized to receive a client's personal information to conduct an immediate enforcement activity that depends upon the disclosure. Personal information may be disclosed when a client is incapacitated and unable to agree to the disclosure if waiting until the individual is able to agree to the disclosure would materially and adversely affect the enforcement activity. In this case, the disclosure will only be made if it is not intended to be used against the individual.
- 10. To comply with government reporting obligations for homeless management information systems and for oversight of compliance with homeless management information system requirements.

Inspection and Correction of Personal Information

Clients may inspect and receive a copy of their person information maintained in HMIS. The agency where the client receives services will offer to explain any information that a client may not understand.

If the information listed in HMIS is believed to be inaccurate or incomplete, a client may submit a verbal or written request to have his/her information corrected. Inaccurate or incomplete data may be deleted, or marked as inaccurate or incomplete and supplemented with additional information.

A request to inspect or copy one's personal information may be denied if:

The information was compiled in reasonable anticipation of litigation or comparable proceedings

- The information was obtained under a promise or confidentiality and if the disclosure would reveal the source of the information, or
- The life or physical safety of any individual would be reasonably endangered by disclosure of the personal information.

If a request for inspection access or personal information correction is denied, the agency where the client receives services will explain the reason for the denial. The client's request and the reason for the denial will be included in the client's record.

Requests for inspection access or personal information correction may be denied if they are made in a repeated and/or harassing manner.

Limits on Collection of Personal Information

Only personal information relevant for the purpose(s) for which it will be used will be collected. Personal information must be accurate and complete.

Client files not used in seven years may be made inactive in HMIS. ICA will check with agencies before making client files inactive. Personal information may be retained for a longer period if required by statute, regulation, contract or another obligation.

Limits on Partner Agency Use of HMIS Client Information

The Rock River HMIS is a shared data system. This system allows Partner Agencies to share client information in order to coordinate services for clients. However, Partner Agencies may not limit client service or refuse to provide service in a way that discriminates against clients based on information the Partner Agency obtained from HMIS. Partner Agencies may not penalize a client based on historical data contained in HMIS.

Youth providers serving clients under the age of 18 must maintain closed HMIS client files. Youth under the age of 18 may not provide either written or verbal consent to the release of their personally identifying information in HMIS.

Complaints and Accountability

Questions or complaints about the privacy and security policies and practices may be submitted to the agency where the client receives services. Complaints specific to HMIS should be submitted to the HMIS agency administrator and program director. If no resolution can be found, the complaint will be forwarded to the System Administrators, and the agency's executive director. If there is no resolution, the Rock River HMIS Governance board will oversee final arbitration. All other complaints will follow the agency's grievance procedure as outlined in the agency's handbook.

All HMIS users (including employees, volunteers, affiliates, contractors and associates) are required to comply with this privacy notice. Users must receive and acknowledge receipt of a copy of this privacy notice.

3.5 USE OF A COMPARABLE DATABASE BY VICTIM SERVICE PROVIDERS

Victim service providers, private nonprofit agencies whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking, must not

directly enter or provide data into HMIS if they are legally prohibited from participating in HMIS. Victim service providers that are recipients of funds requiring participation in HMIS, but are prohibited from entering data in HMIS, must use a comparable database to enter client information. A comparable database is a database that can be used to collect client-level data over time and generate unduplicated aggregated reports based on the client information entered into the database. The reports generated by a comparable database must be accurate and provide the same information as the reports generated by HMIS.

3.6 USER CONFLICT OF INTEREST

Users who are also clients with files in HMIS are prohibited from entering or editing information in their own file. All users are also prohibited from entering or editing information in files of immediate family members. All users must sign the Rock River HMIS User Agreement, which includes a statement describing this limitation, and report any potential conflict of interest to their Agency Administrator. The System Administrator may run the audit trail report to determine if there has been a violation of the conflict of Interest agreement.

3.7 SECURITY PROCEDURE TRAINING FOR USERS

All users must receive security training prior to being given access to HMIS. Security training will be covered during the new user training for all new users. All users must receive ongoing annual training on security procedures from the Institute for Community Alliances.

3.8 VIOLATION OF SECURITY PROCEDURES

All potential violations of any security protocols will be investigated and any user found to be in violation of security protocols will be sanctioned accordingly. Sanctions may include but are not limited to: a formal letter of reprimand, suspension of system privileges, revocation of system privileges and criminal prosecution.

If possible, all confirmed security violations will be communicated in writing to the affected client within 14 days, unless the client cannot be located. If the client cannot be located, a written description of the violation and efforts to locate the client will be prepared by the System Administrator at the Institute for Community Alliances, and placed in the client's file at the Agency that originated the client's record.

Any agency that is found to have consistently and/or flagrantly violated security procedures may have their access privileges suspended or revoked. All sanctions are imposed by the ICA HMIS staff. All sanctions may be appealed to the HMIS Governance Board.

3.9 PROCEDURE FOR REPORTING SECURITY INCIDENTS

Users and Agency Administrators should report all unlawful access of HMIS and unlawful attempted access of HMIS. This includes theft of usernames and passwords. Security incidents should be reported to the ICA System Administrator. The ICA System Administrator will use the HMIS user audit trail report to determine the extent of the breach of security.

3.10 DISASTER RECOVERY PLAN

Bowman Systems Disaster Recovery Plan

Rock River Homeless Coalition's HMIS is covered under Bowman Systems Disaster Recovery Plan. Due to the nature of technology, unforeseen service outages may occur. In order to assure service reliability, Bowman Systems provides the following disaster recovery plan. Plan highlights include:

- Database tape backups occur nightly.
- Tape backups are stored offsite.
- Seven day backup history is stored locally on instantly accessible Raid 10 storage.
- One month backup history is stored off site.
- Access to Bowman Systems emergency line to provide assistance related to "outages" or "downtime" 24 hours a day.
- Data is backed up locally on instantly-accessible disk storage every 24 hours.
- The application server is backed up offsite, out-of-state, on a different Internet provider and on a separate electrical grid via secured Virtual Private Network (VPN) connection.
- Backups of the application site are near-instantaneous (no files older than 5 minutes).
- The database is replicated nightly at an offsite location in case of a primary data center failure.
- Priority level response (ensures downtime will not exceed 4 hours).

Standard Data Recovery

Rock River Homeless Coalition's HMIS database is stored online, and is readily accessible for approximately 24 hours a day. Tape backups of the database are kept for approximately one month. Upon recognition of a system failure, HMIS can be copied to a standby server. The database can be restored, and the site recreated within three to four hours if online backups are accessible. As a rule, a tape restoration can be made within six to eight hours. On-site backups are made once daily. A restore of this backup may incur some data loss between when the backup was made and when the system failure occurred.

All internal servers are configured in hot-swappable hard drive RAID configurations. All systems are configured with hot-swappable redundant power supply units. Our Internet connectivity is comprised of a primary and secondary connection with separate internet service providers to ensure redundancy in the event of an ISP connectivity outage. The primary Core routers are configured with redundant power supplies, and are configured in tandem so that if one core router fails the secondary router will continue operation with little to no interruption in service. All servers, network devices, and related hardware are powered via APC Battery Backup units that are connected in turn to electrical circuits, which are connected to a building generator.

All client data is backed-up online and stored on a central file server repository for 24 hours. Each night a tape backup is made of the client database and secured in a bank vault.

Historical data can be restored from tape as long as the data requested is newer than 30 days old. As a rule, the data can be restored to a standby server within four hours without affecting the current live site. Data can then be selectively queried and/or restored to the live site.

For power outage, HMIS is backed up via APC battery back-up units, which are connected via generator-backed up electrical circuits. For a system crash, a system restore will take four hours. There is potential for some small data loss (data that was entered between the last backup and when the failure occurred) if a tape restore is necessary. If the failure is not hard

drive related, the data restore time will possibly be shorter as the drives themselves can be repopulated into a standby server.

All major outages are immediately brought to the attention of executive management. Bowman Systems support staff helps manage communication or messaging to the System Administrator as progress is made to address the service outage.

Rock River HMIS Disaster Recovery Plan

The Institute for Community Alliances operates a regional approach to administering the Rock River HMIS. The ICA Rock River HMIS office is currently in Madison, Wisconsin. In the event of a localized emergency or disaster, ICA will shift responsibility for administering the HMIS and managing day-to-day operations of the system to an unaffected site.

4. Data Requirements

4.1 MINIMUM DATA COLLECTION STANDARD

Partner Agencles are responsible for asking all clients a minimum set of questions for use in aggregate analysis. These questions are included in custom assessments that are created by HMIS System Administrators. The required data elements depend on the program. The mandatory data elements in each assessment are displayed in *red* text and/or specific text indicating that the field is required.

The Agency Administrator must identify the assessments and requirements for each program. ICA will consult with the Agency Administrator to properly set up each program in HMIS.

Guidelines clearly articulating the minimum expectations for data entry for all programs entering data in HMIS will be sent to Agency Administrators and posted on the Institute for Community Alliances' Rock River HMIS webpage. Agency Administrators must ensure that the minimum data elements are fulfilled for every program.

4.2 PROVIDER NAMING CONVENTION

All providers within HMIS must be named so that they accurately reflect the type of service carried out by the corresponding Partner Agency program.

4.3 DATA QUALITY PLAN

Partner Agencies are responsible for the overall quality, accuracy and completeness of data entered by their staff for their clients. HMIS staff will monitor data collection of the HMIS Universal Data Elements and required program specific data elements monthly and hold participating agencies accountable for not entering required data.

ICA will submit a report to each CoC annually that identifies the degree to which all agencies within the CoC are meeting the minimum data entry standards.

Programs that do not adhere to the minimum data entry standards will be notified of their deficiencies and given appropriate training on how to correctly enter data. Partner Agencies and/or users who do not meet minimum data entry standards following additional training from ICA will be considered in violation of the HMIS operating agreements, and will be subject to the repercussions listed in Section 2.9 of the HMIS Policies and Procedures Manual.

4.4 XML IMPORTS

While HMIS databases are required to have the capacity to accept XML imports, The Rock River Homeless Coalition reserves the right to not allow XML imports into the HMIS. Allowing XML imports will impact data integrity, create issues for coordinated entry, and increase the likelihood of duplication of client files in the system.

4.5 HMIS DATA PROTECTION

As the HMIS Lead Agency, it is the responsibility of ICA to maintain the HMIS, including protecting the data contained in HMIS. In the case where ICA is made aware through data contained in HMIS that Partner Agency program funds were used for an ineligible service, ICA will notify the Partner Agency about the misuse of funds. If the Partner Agency fails to rectify the misuse of funds in a timely fashion, ICA will notify the appropriate funding body.

5. Glossary

- Agency Administrator the individual responsible for HMIS use at each partner agency that has ten or more HMIS users.
- Aggregated Public Data data that is published and available publicly. This type of data does not identify clients listed in the HMIS.
- **Closed Data** information entered by one provider that is not visible to other providers using HMIS.
- Confidential Data contains personal identifying information.
- ICA the Institute for Community Alliances, which is the HMIS Lead Agency.
- HMIS Homeless Management Information System an internet-based database that is used by homeless service organizations across Rock River Homeless Coalition to record and store client-level information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness.
- **HMIS Governance board** the group of HMIS users who are responsible for approving and implementing the HMIS Policies and Procedures, and for working to make improvements to Rock River Homeless Coalition's HMIS.
- **HMIS License Fee** the annual fee paid by partner agencies to allow each HMIS user at their agency continued access to the database.
- HMIS User Level HMIS users are assigned a specific user level that limits the data the user is able to access in the database.
- HMIS Vendor the Rock River HMIS software vendor is Bowman Systems. The HMIS vendor designs the HMIS and provides ongoing support to the System Administrators.
- Minimum Data Entry Standards a minimum set of questions that must be completed for each client to provide data for use in aggregate analysis.
- Open Data does not contain personal identifying information.
- Partner Agencies the homeless service organizations that use HMIS.
- System Administrators staff at ICA who are responsible for overseeing HMIS users and use in Rock River Homeless Coalition. The System Administrators allow users HMIS access and provide training; ensure user compliance with HMIS policies and procedures; and make policy recommendations to the Steering Committee.
- Shared Data unrestricted information that has been entered by one provider and is visible to other providers using HMIS.

- **Unpublished Restricted Access Data** information scheduled, but not yet approved, for publication.
- Victim Service Provider a nonprofit agency with a primary mission to provide services to victims of domestic violence, dating violence, sexual assault, or stalking.

6. Appendices

6.1 DATA DICTIONARY AND DATA MANUAL

The <u>HMIS Data Standards Manual</u> is intended to serve as a reference and provide basic guidance on HMIS data elements for CoCs, HMIS Lead Agencies, HMIS System Administrators, and users. The companion document to the HMIS Data Manual is the <u>HMIS Data Dictionary</u>.

The HMIS Data Dictionary is designed for HMIS vendors, HMIS Lead Agencies, and HMIS system administrators to understand all of the data elements required in an HMIS, data collection and function of each required element and the specific use of each element by the appropriate federal partner. The HMIS Data Dictionary should be the source for HMIS software programming.

HMIS systems must be able to collect all of the data elements defined in the HMIS Data Dictionary, support system logic identified in this document, and ensure that data collection and the visibility of data elements is appropriate to the project type and federal funding source for any given project.

Agency Partnership Agreement

For the Rock River Homeless Coalition Homeless Management Information System (HMIS)

The Rock River Homeless Coalition Homeless Management Information System (HMIS/Product name Bowman Systems ServicePoint) is an internet-based database that is used by homeless service organizations within Winnebago and Boone County Illinois to record and store client-level information about the numbers, characteristics, and needs of homeless persons and those at-risk of homelessness.

The implementation of the Rock River HMIS is administered by the Institute for Community Alliances (ICA) and Bowman Internet Systems (Bowman). Bowman administers the central server and ICA administers user and agency licensing, training, and compliance. In this Agreement, ICA is the "System Administrator," "Partner Agency" is an Agency Participating in HMIS, "Client" is a consumer of services, and "Agency" is the Agency named in this Agreement.

The signature of the Executive Director of the Partner Agency indicates agreement with the terms set forth before a HMIS account can be established for the Agency.

I. Confidentiality

A. The Agency shall uphold relevant federal and state confidentiality regulations and laws that protect Client records, and the Agency shall only release client records in accordance with this Agreement and the Rock River Homeless Coalition HMIS Policies and Procedures.

- 1. The Agency shall abide specifically by federal confidentiality regulations as contained in the Code of Federal Regulations, 42 CFR Part 2 regarding disclosure of alcohol and/or drug abuse records. In general terms, the federal rules prohibit the disclosure of alcohol and/or drug abuse records unless disclosure is expressly permitted by written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information <u>is not</u> sufficient for this purpose. The Agency understands that federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patients.
- 2. The Agency shall abide specifically, when applicable, with the provisions of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and corresponding regulations passed by the Federal Department of Health and Human Services.

B. The Agency **shall not** solicit or input information from Clients into the HMIS database unless it is essential to provide services, to develop reports and provide data, or to conduct evaluation or research. Furthermore,

- 1. The Agency shall provide its Clients a verbal explanation of the HMIS database and the terms of consent, and shall arrange for a qualified interpreter or translator in the event that an individual is not literate in English or has difficulty understanding the consent form.
- 2. The Agency shall maintain appropriate documentation of Client consent to participate in the HMIS database, as required by the Rock River Homeless Coalition HMIS Policies and Procedures.
- 3. The Agency agrees not to release any confidential information received from the HMIS database to any organization or individual without proper Client consent.
- 4. If a Client withdraws consent for release of information, the Agency remains responsible to ensure that the Client's information is made unavailable to all other Partner Agencies.

5. ICA does not require or imply that services must be contingent upon a Client's participation in the HMIS database. Services should be provided to Clients regardless of HMIS participation, provided the Clients would otherwise be eligible for the services.

C. The Agency is responsible for ensuring that its users comply with the requirement for informed consent and client confidentiality.

- 1. The Agency shall ensure that all staff and volunteers issued a User ID and password for HMIS will comply with the following:
 - a. Read and abide by this Partnership Agreement
 - b. Read and abide by the Rock River Homeless Coalition HMIS Policies and Procedures
 - c. Read and sign the Rock River Homeless Coalition HMIS User Agreement form
 - d. Participate in new user privacy and security training or on-going security training on an annual basis
 - e. Participate in additional trainings as required by the Rock River Homeless Coalition HMIS Policies and Procedures
 - f. Create a unique User ID and password, and will not share or reveal that information to anyone by written or verbal means
 - g. Read all communications related to the Rock River HMIS in a timely manner.

D. The Agency may conduct criminal background checks on all staff and volunteers before requiring potential users to attend New User Training led by ICA. No individuals with a history of fraud or identity theft shall be permitted a user license.

E. The Agency understands that the file server will contain all Client information. The agency understands that all client information will be encrypted on a file server physically located in a locked office with controlled access, at the office of Bowman Systems, LLC located at 333 Texas Street, Suite 300, Shreveport, Louisiana 71101.

1. The Agency shall not be denied access to Client data entered by the Agency. Partner Agencies are bound by all restrictions placed upon the data by the client of any Partner Agency. The Agency shall diligently record in the HMIS all restrictions requested. The Agency shall not knowingly enter false or misleading data under any circumstances.

F. Display of Notice: Pursuant to the notice published by the Department of Housing and Urban Development ("HUD") on July 30, 2004, the Agency will prominently display at each intake desk (or comparable location) the HMIS Baseline Privacy Policy provided by ICA that explains generally the reasons for collecting identified information in the HMIS and the Client rights associated with providing Agency staff with identified data. Agency will ensure Clients' understanding of their rights. Additionally, if Agency maintains a public webpage, the current version of the HMIS Baseline Privacy Policy must be posted on the webpage. The current form of HMIS Baseline Privacy Policy, which may be modified from time to time at the HMIS Advisory Board's discretion, is available from ICA on its website, www.icalliances.org.

G. If this Agreement is terminated, ICA and remaining Partner Agencies shall maintain their right to the use of all Client data previously entered by the terminating Partner Agency; this use is subject to any restrictions requested by the Client.

II. HMIS Use and Data Entry

A. The Agency shall follow, comply with, and enforce the Rock River Homeless Coalition User Agreement and the Rock River Homeless Coalition HMIS Policies and Procedures (located at www.icalliances.org).

Modifications to the User Agreement and Policies and Procedures needed for the purpose of smooth and efficient operation of the HMIS, and to meet U.S Department of Housing and Urban Development requirements, shall be established in consultation with the HMIS Advisory Board. ICA will announce approved modifications in a timely manner via Rock River HMIS email communications.

- 1. The Agency shall only enter individuals in the HMIS database that exist as Clients under the Agency's jurisdiction. The Agency shall not misrepresent its Client base in the HMIS database by knowingly entering inaccurate information.
- 2. The Agency shall use Client information in the HMIS database, as provided to the Agency or Partner Agencies, to assist the Agency in providing adequate and appropriate services to the Client.

B. The Agency shall consistently enter information into the HMIS database and will strive for real-time, or close to real-time data entry. Real-time or close to real-time is defined by either immediate data entry upon seeing a Client or data entry into the HMIS database within five business days.

C. The Agency will not alter information in the HMIS database that is entered by another Agency with inaccurate information (i.e. Agency will not purposefully enter inaccurate information to over-ride information entered by another Agency).

D. The Agency shall not include profanity or offensive language in the HMIS database. This does not apply to the input of direct quotes by the Client if the Agency believes that it is essential to enter these comments for assessment, service, and treatment purposes.

E. The Agency shall utilize the HMIS database for business purposes only.

F. ICA will provide initial training and periodic updates to that training to Agency Staff on the use of the HMIS software.

G. The ICA HelpDesk (RRHMIS@icalliances.org) should be utilized for technical assistance within reason.

H. The transmission of material in violation of any federal or state regulations is prohibited. This includes, but is not limited to, copyright material, material legally judged to be threatening or obscene, and material considered protected by trade secrets.

1. The Agency shall not use the HMIS database with intent to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity.

J. The Agency must be an active participant in their local Continuum of Care.

K. An Agency may establish a Coordinated Services Agreement with another Partner Agency so that a licensed user at that Partner Agency may enter data on its behalf. The Agreement must be approved by the HMIS Lead Agency and signed by the Executive Directors or the immediate supervisors of the employees responsible for HMIS activities at both agencies, and the licensed user who will have privileges to access the Partner Agency's data. An Agency may not establish an Agreement with an individual contracting with their agency.

L. Agencies with users who do not access their HMIS account at least once every 90 days will be assessed a Non-Use Fee. For each user who does not meet the access requirement, the agency will be charged \$250 at the time of annual license renewal. Participating Agencies are responsible for monitoring staff use of the HMIS to ensure that their agency is not charged a Non-Use Fee.

III. Reports

A. The Agency shall retain access to identifying and statistical data on the Clients it serves.

B. The Agency's access to reports containing data on Clients it does not serve shall be limited to nonidentifying and statistical data.

C. The Agency may make aggregate data available to other entities for funding or planning purposes pertaining to providing services to homeless persons. The aggregate data shall not directly identify individual Clients.

D. ICA and/or the CoC will use only unidentified, aggregate HMIS data for homeless policy and planning decisions, in preparing federal, state or local applications for homeless funding, to demonstrate the need for and effectiveness of programs, and to obtain a system-wide view of program utilization in the locality.

E. Once a report containing confidential client information is downloaded from HMIS, it is the responsibility of the Agency to protect all confidential information.

F. An agency may distribute a report containing personally identifying information for the express purpose of referring its own clients to a community housing program or other service intended to benefit its clients.

G. An Agency may establish a Memorandum of Understanding with another Partner Agency so that a licensed user at that Partner Agency may enter data on its behalf. The MOU must be approved by the HMIS Lead Agency and signed by the Executive Directors or the immediate supervisors of the employees responsible for HMIS activities at both agencies, and the licensed user who will have privileges to access the Partner Agency's data. An Agency may not establish an MOU with an individual contracting with their agency.

IV. Proprietary Rights

A. The Agency shall not give or share assigned usernames and passwords of the HMIS database with any other Agency, business or individual.

B. The Agency shall not cause in any manner, or way, corruption of the HMIS database.

V. Terms and Conditions

A. Neither ICA nor the CoC shall transfer or assign any rights or obligations without the written consent of the other party.

B. This Agreement shall be in force until revoked in writing by either party, provided funding is available.

C. This Agreement may be terminated with 30 days of written notice.

VI. Partner Agency Signature

By signing this Agreement, I understand and agree with the terms within. Failure of any or all users to comply may result in suspension or termination of access to the HMIS database.

Governance Charter for the Rock River Coalition Homeless Management Information System

A. Purpose and Scope

The purpose of this Governance Charter is to confirm agreements between the Continuum of Care and the Institute for Community Alliances (hereinafter HMIS Lead Agency). As such, the Governance Charter sets forth the general understandings, and specific responsibilities of each party relating to key aspects of the governance and operation of the Homeless Management Information System (HMIS.) This Governance Charter is effective upon execution by the Rock River Homeless Coalition and the Institute for Community Alliances.

B. Background

The HMIS is a collaborative project of the Rock River Homeless Coalition, the HMIS Lead Agency, and participating Partner Agencies. HMIS is an internet-based data collection application designed to capture information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness over time. Use of HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care, Emergency Solutions Grant, and by the U.S. Department of Veterans Affairs for agencies receiving Grant and Per Diem funds.

The continuum of care is a community-wide initiative that work to provide a range of housing and services for the homeless. The continuum of care system includes homelessness prevention assistance, emergency shelter, transitional housing, permanent affordable and permanent supportive housing, supportive services, specialized programs and outreach for designated homeless subpopulations, and integration with mainstream programs. HMIS enables homeless service providers to collect uniform client information over time. HMIS is essential to efforts to streamline client services and inform public policy decisions aimed at addressing and ending homelessness at local, state and federal levels. Through HMIS, homeless people benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation, and advocacy. The parties to this Governance Charter share a common interest in collaborating to end homelessness and successfully implementing and operating the HMIS.

C. General Understandings

1. Continuum of Care Governance

The Rock River Homeless Coalition (CoC) is responsible for governance of the HMIS. The CoC is the leadplanning groups for efforts to end homelessness and for implementing and operating homeless service delivery systems in Winnebago and Boone Counties, Illinois. As such and under HUD policy (24 CFR part 580), the CoC is responsible for HMIS oversight and implementation, including planning, software selection, HMIS Lead Agency designation and setting up and managing the HMIS in compliance with HUD's national HMIS Standards. The CoC's oversight and governance responsibilities are carried out by the HMIS Governance Board (described below), which reviews and approves all HMIS policies and procedures.

2. HMIS Lead Agency Designation

The CoC designates the HMIS Lead Agency to manage HMIS operations on its behalf, and to provide HMIS administrative functions at the direction of the CoC through the CoC Board and the HMIS Governance Board.

3. Homeless Management Information System Governance Board

The CoC members and HMIS Partner Agencies actively participate with the HMIS Lead Agency through the HMIS Governance Board in the management of the HMIS. The HMIS Governance Board is responsible for establishing policies, procedures, and protocols for functions essential to the viability and success of the HMIS, including, but not limited to, data privacy, data quality, analysis, reporting, data sharing protocols. All CoC HMIS participating agencies will be represented on the HMIS Governance Board to ensure shared responsibility and accountability.

3.1 Governance Board Requirements

- a. <u>Meetings</u> Board meetings will be held annually. Important HMIS policy items that emerge in between meetings will be handled by the Board via email, conference call, or an online meeting.
- b. <u>Attendance</u> Governance Board members are required to attend all meetings. A majority of the Governance Board is one half plus one of the members present at the meeting when the vote is taking place.
- c. <u>Accessibility</u> Board members will be publicly identified and available for contact by HMIS users and agencies throughout the state.
- d. <u>Policies and Procedures</u> Approval of policy, procedures and HMIS protocols will be attempted through consensus and conversation, but will ultimately be decided by simple majority.
- e. <u>Voluntary Board Membership</u> Governance Board members are volunteers and are not compensated for their participation.

4. Funding

Funding for the software and operations of the HMIS shall be provided by a HUD Continuum of Care program HMIS grant and other funding from the CoC. Partner Agencies may be required to pay user fees for the HMIS software and reporting licenses assigned to their agency. In the event there is a shortfall in funding for the software or operation of the HMIS, the HMIS Governance Board will explore options to increase revenue.

5. Software and Hosting

The CoC has selected a single software product to serve as the sole HMIS software application, in this case Bowman Systems ServicePoint. All Partner Agencies agree to use the product as configured for the CoC.

6. Compliance with Homeless Management Information System Standards

The HMIS is operated in compliance with the HMIS Data and Technical Standards and any other applicable laws. The parties anticipate that HUD will release revised HMIS Standards periodically. The parties agree to make changes to this Governance Charter, the HMIS Policies and Procedures, and other HMIS operational documents, to comply with the revised standards within the HUD specified timeframe for such changes.

7. Operational Policies and Agreements

The HMIS operates within the framework of agreements, policies, and procedures that have been developed and approved over time by the HMIS Lead Agency and the CoC through the HMIS Governance Board. These agreements, policies and procedures include but are not limited to the Policies and Procedures Manual, Privacy Policies and the Consumer Notice, Partner Agency Agreements, and User Agreements. All operational agreements and policies and procedures are reviewed annually by the HMIS Lead Agency, the HMIS Governance Board, and the CoC to comply with the HMIS Standards or otherwise improve HMIS operations.

8. Data Ownership

The data entered into the HMIS is owned by the Partner Agency responsible for entering the client-level information. The HMIS Lead Agency and Partner Agencies are jointly responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission and destruction of data, comply with the HMIS privacy, security and confidentiality policies and procedures. The Partner Agencies have the final authority to approve or disapprove the use of the data that is contained in the HMIS.

D. Specific Responsibilities of the Parties

1. Rock River Homeless Coalition Continuum of Care

Responsible for oversight, project direction, formalizing policy setting, and guidance for the HMIS project. It is the responsibility of the CoC to:

- a. Designate the HMIS Lead Agency, the software to be used for HMIS, and approve any changes to the HMIS Lead Agency or software.
- b. Request revision to any HMIS operational agreement, policy or procedure developed by the HMIS Lead Agency, and approved by the HMIS Governance Board.
- c. Conduct outreach to homeless assistance agencies not using HMIS, and encourage these agencies and other mainstream programs serving homeless people to participate in HMIS.
- d. Work to inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.
- e. Promote the effective use of HMIS data, including its use to measure the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs.
- f. Provide all local information as necessary for compilation of the Continuum of Care Housing Inventory Count, and support the HMIS Lead Agency in preparing the Annual Homeless Assessment Report (AHAR) and HUD System Performance Measures (SPM).

2. HMIS Governance Board

The CoC exercises the following responsibilities for HMIS governance through the HMIS Governance Board.

- a. Implement and continuously improve the HMIS.
- b. Ensure the HMIS scope aligns with the requirements of agencies, HUD and other federal partners, and other stakeholder groups.
- c. Address any issue that has major implications for the HMIS, such as HMIS Data Standards revisions released by HUD, or HMIS Vendor performance problems.
- d. Review, revise and approve all HMIS operational policies developed by the HMIS Lead Agency and submit all approved operational documents to each CoC Board of Directors or equivalent CoC governing body.
- e. Ensure agency and user compliance with the federal HMIS Standards, and all HMIS operational agreements, policies and procedures.
- f. Provide guidance and oversight of HMIS related user and agency compliance monitoring undertaken by the HMIS Lead Agency.
- g. Approve HMIS Lead Agency recommendations to terminate a user license or restrict the HMIS participation of a Partner Agency.

3. HMIS Lead Agency

The Institute for Community Alliances presently serves as the lead agency for the Rock River Homeless Coalition HMIS project, managing and administering all HMIS operations and activities. The HMIS Lead Agency exercises these responsibilities at the direction of the HMIS Governance Board. These responsibilities are contingent on receipt of the appropriate funding from participating CoCs and Partner Agencies. The responsibilities of the HMIS Lead Agency include:

I. General

- a. Obtain and maintain the contract with the selected software vendor.
- b. Determine the parameters of the HMIS as it relates to continuity of service, ability to limit access to the data, hosting responsibilities, general security and maintenance issues, data storage, back-up and recovery, customization, compliance with HUD Data standards, reporting needs, training and technical support.
- c. Provide overall staffing for the operation of the HMIS.
- d. Develop and maintain all HMIS operational agreements, policies and procedures, including a written privacy notice.
- e. Obtain signed Partner Agency Agreements and User Agreements.
- f. Invoice Partner Agencies and jurisdictions for HMIS fees approved by the HMIS Governance Board.
- g. Monitor Partner Agencies and users to ensure compliance with HMIS operational agreements, policies and procedures on behalf of, and at the direction of, the HMIS Governance Board.
- h. Convene a meeting of the HMIS Governance Board annually.
- i. Participate as a voting or non-voting member of the CoC's Board of Directors or equivalent decision making body.
- J. Attend the HMIS and Data Committee meetings of the CoC.
- k. Provide and maintain the HMIS website.

- I. Comply with federal HMIS Standards (including anticipated changes to the HMIS Standards) and all other applicable laws.
- m. Apply as the project applicant for all HUD CoC Program HMIS Projects within the CoC.
- n. Serve as the liaison with HUD regarding HUD HMIS grants.

II. Administer the software, including:

- a. Ensure the software vendor complies with the responsibilities designated below in Section D.4.
- b. Report any concerns with the software vendor to the HMIS Governance Board.
- c. Inform CoCs and agencies how each software release will change or impact current workflow and operations.
- d. Protect confidential data (in compliance with federal HMIS Standards, local privacy policies, and other applicable law), and abide by any restrictions clients have placed on their own data.
- e. In accordance with and by all HUD regulations and policies

III. Administer HMIS end users, including:

- a. Provide and manage end user licenses, including authorizing usage and the level of access to HMIS for all users.
- b. Add and remove partner agency administrators.
- c. Provide all training and user guidance needed to ensure appropriate system use, data entry, data reporting, and data security and confidentiality.
- d. Provide specific training for agency administrators and end users.
- e. Establish the training requirements for users and agency administrators.
- f. Maintain documentation of user training completion.
- g. Outreach to Partner Agencies to provide end user support.
- h. Develop and maintain a how-to manual that provides data entry guidance for users.
- i. Maintain an email helpdesk for user support.
- j. Communicate at least monthly with users through an e-newsletter. The e-newsletter will provide information on upcoming regulatory changes, software upgrades, current HMIS news, grants, training, etc.

IV. Ensure Data Quality

- a. Ensure all client and homeless program data are collected in adherence to the HUD HMIS Data Standards, the HMIS Policies and Procedures, and local additional requirements.
- b. Customize the HMIS application to meet local data requirements (within reason and within constraints of budget and other duties).
- c. Develop and implement a data quality plan.
- d. Monitor data quality and generate data quality reports under the data quality plan.
- e. Assist Partner Agencies and users to rectify data quality concerns.
- f. Carry out aggregate data extraction and reporting under the guidance of the HMIS Governance Board.
- g. Assist Partner Agencies with agency-specific data collection and reporting needs, such as the Annual Progress Report and other program reports (within reason and within constraints of budget and other duties).

h. Develop HMIS data entry workflow and requirements for HMIS data and reporting to meet Partner Agency reporting requirements.

V. Reporting

- a. Complete, or provide assistance for the completion of the Annual Homeless Assessment Report, HUD CoC Program Notice of Funding Availability, Consolidated Annual Performance Evaluation Report, CoC 10 Year Plans, Partner Agency Annual Performance Reports, and other reports to funders from agencies federally mandated to use HMIS.
- b. Ensure the HMIS policies and procedures and recommend data entry workflow align with collecting the data necessary to complete the reports listed above in Section D.3.IV.a.
- c. Construct, run and publish all necessary system-wide reports to meet federal and local reporting compliance.
- d. Provide aggregate reports to groups or stakeholders requesting HMIS information within the constraints detailed in the HMIS Policies and Procedures Manual.

VI. Satisfactory Assurances Regarding Confidentiality and Security:

It is understood that the HMIS will contain client information that may be subject to the privacy and security protections and requirements of federal HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. The HMIS Lead Agency hereby agrees that it will use protected client information only for purposes permitted by agreement with Partner Agencies and as permitted by the applicable law and Standards. Further, the HMIS Lead Agency agrees it will make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

- a. Develop and implement security and confidentiality plans required by the HUD HMIS Standards.
- b. Assist Partner Agencies to rectify agency data security and privacy concerns.

4. Software Vendor

The selected software vendor and HMIS database must meet all HUD regulations and policies, and the following requirements:

- a. Ensure the HMIS design meets the federal HMIS Data Standards.
- b. Develop a codebook and provide other documentation of programs created.
- c. Provide ongoing support to the HMIS Lead pertaining to the needs of end users to mine the database, generate reports and other interface needs.
- d. Administer the product servers, including web and database servers.
- e. Monitor access to HMIS through auditing.
- f. Monitor functionality, speed and database backup procedures.
- e. Provide backup and recovery of internal and external networks.
- f. Maintain the system twenty-four hours a day, seven days a week.
- g. Communicate any planned or unplanned interruption of service to the HMIS Lead Agency.
- h. Take all steps needed to secure the system against breaches of security and system crashes.

E. Period of Agreement and Modification/Termination

1. Period of Operation and Termination

This Governance Charter shall remain in effect until terminated by the partles. Each party shall have the right to terminate this agreement as to Itself only upon 30 days prior written notice to the HMIS Governance Board in care of the HMIS Lead Agency. Violation of any component may be grounds for immediate termination of this Agreement.

2. Amendments

Amendments, including additions, deletions, or modifications to this Governance Charter must be agreed to by all parties to this Agreement.

2

Rock River Homeless Coalition HMIS User Agreement

The Rock River Homeless Coalition Homeless Management Information System (HMIS) is a collaborative project of the participating homeless service organizations in Winnebago and Boone Counties. HMIS is an internet-based data collection application designed to capture information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness over time.

USER RESPONSIBILITIES

The specific responsibilities of Rock River Homeless Coalition HMIS users are listed in Section 2.1 of the HMIS Policies and Procedures Manual. Additionally, users must abide by all other provisions of the HMIS Policies and Procedures Manual. This manual and its attachments document HMIS privacy, security and data standards, and requirements for data entry. If a user has a client account in the HMIS, the user is prohibited from editing their own file. Users are prohibited from editing the HMIS accounts of their immediate family members.

USER CODE OF ETHICS

Users must ensure that their clients are made aware that their personally identifying information will be entered into the Rock River Homeless Coalition HMIS. Partner Agencies may require clients to provide explicit or implicit client consent. Users must follow the consent requirements of their Partner Agency. Users must allow their clients to decide what personally identifying information, if any, can be entered into the HMIS and shared with Partner Agencies. Client consent may be revoked by that client at any time by a written notice.

-No client may be denied services for failure to provide consent to share HMIS data. -Clients have a right to inspect, copy and request changes in their HMIS records.

HMIS USER RESOURCES

-Institute for Community Alliances HMIS website - http://www.icalliances.org/ -Rock River Homeless Coalition HMIS HelpDesk – rrhmis@icalliances.org -HUD OneCPD Resource Exchange https://www.hudexchange.info/hmis/

AFFIRM THE FOLLOWING

1. I have read and will abide by all policies and procedures in Rock River Homeless Coalition HMIS Policies and Procedures Manual.

2. I have received training from the HMIS Lead Agency on how to use the HMIS.

3. Lagree to the training requirements listed in the HMIS Policies and Procedures Manual.

4. I will only collect, enter and extract data in the HMIS relevant to the delivery of services for the clients with whom I work.

5. I agree to use the data within HMIS only for the purposes of service delivery

6. I understand that my User ID and Password are for my use only and must not be shared with anyone.

7. I agree to keep my HMIS user log-in and password secure.

8. I agree to refrain from leaving my computer unattended while logged into the system and further agree to log out of the system before leaving my work area.

9. Lagree not to use the HMIS at a publicly accessible workstation.

10. Lagree to properly protect and store in a secure location client-specific hardcopy information printed from HMIS.

11. I agree to notify my Agency Administrator, or HMIS System Administrator if my agency does not have an Agency Administrator, in the event I suspect that HMIS security has been compromised.

12. I agree to notify my Agency Administrator, or HMIS System Administrator if my agency does not have an Agency Administrator, if I leave my current position.13. I agree to enter and maintain accurate information into the HMIS.

Typing your information below is your electronic signature. This means by typing in the following information and clicking on the subscribe button, you acknowledge you have read and understand the above information.

.....

CITY OF ROCKFORD, ILLINOIS 2015 - 2019 CONSOLIDATED PLAN 2015 ANNUAL PLAN

Submitted to U.S. Department of HUD April 15, 2015





1

Development Department

Contact for Information:

Community and Economic

426 E State Street Rockford, IL 61104

Office 815 987 5600

 Consolidated Plan
 Substantial Amendment 12/8/15
 ROCKFORD

 OMB Control No: 2506-0117 (exp. 07/31/2015)
 07/31/2015)
 07/31/2015

1

PR-10 Consultation - 91.100, 91.200(b), 91.215(l)

1. Introduction

The City of Rockford works with a wide variety of agencies, organizations, and service providers in an effort to bring various viewpoints to bear in the identification of local housing and service needs. Ongoing relationships focused on specific needs and targeted meetings designed to bring public input into the Consolidated Plan process are two of the ways that the City utilizes outside organizations in the consultation process.

Provide a concise summary of the jurisdiction's activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health and service agencies (91.215(I)).

The City has ongoing relationships with several housing providers (former CHDOs) working on housing development activities. The CHDO system provides a forum for assisting these agencies grow and meet their own targeted clientele. Providers who have served as CHDOs for the City in the past will be recertified for future participation in the program as opportunities are developed. The City also works closely with the Housing Authority of Rockford which organizes resources from the federal government to address the housing needs of the City's lowest income households. Through the Continuum of Care process, the City maintains relationships with mental health providers, homeless shelter and services providers, and other governmental agencies with specific responsibilities for homeless individuals and families. The City also participates in a variety of other coalitions that seek to address other issues that relate to housing and service needs.

Describe coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness

City staff works actively with the Rockford/Winnebago/Boone Continuum of Care, the local umbrella for the development of the Continuum of Care. Staff participate in regularly scheduled meetings and pointin-time surveys. In the past, the City has provided administrative support to supplement Continuum of Care initiatives and distributes Emergency Solutions Grant funding to the various agencies that make up the membership of the Rockford/Winnebago/Boone Continuum of Care.

Describe consultation with the Continuum(s) of Care that serves the jurisdiction's area in determining how to allocate ESG funds, develop performance standards and evaluate outcomes, and develop funding, policies and procedures for the administration of HMIS

Staff from the City of Rockford participates in the development of the Continuum of Care, working with area service providers to include City resources, to the extent possible, in the provision of services to homeless individuals and families in Rockford.

2. Describe Agencies, groups, organizations and others who participated in the process and describe the jurisdictions consultations with housing, social service agencies and other entities

1	Agency/Group/Organization	Shelter Care Ministries
	Agency/Group/Organization Type	Services-homeless
	What section of the Plan was addressed by Consultation?	Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
2	Agency/Group/Organization	ZION DEVELOPMENT CORPORATION
	Agency/Group/Organization Type	Housing
	What section of the Plan was addressed by Consultation?	Housing Need Assessment Market Analysis
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
3	Agency/Group/Organization	NORTHWEST COMMUNITY CENTER
	Agency/Group/Organization Type	Services-Children Services-Education Services-Employment
	What section of the Plan was addressed by Consultation?	Economic Development Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
4	Agency/Group/Organization	BOOKER WASHINGTON CENTER
	Agency/Group/Organization Type	Services-Children Services-Education

lable 2 – Agencies, groups, organizations who participate	 Agencies, groups, organizations who participate 	pated
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Consolidated Plan

Substantial Amendment 12/8/15

ROCKFORD

OMB Control No: 2506-0117 (exp. 07/31/2015)

	What section of the Plan was addressed by Consultation?	Economic Development Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
5	Agency/Group/Organization	ROCKFORD HOUSING AUTHORITY
	Agency/Group/Organization Type	РНА
	What section of the Plan was addressed by Consultation?	Housing Need Assessment Public Housing Needs Market Analysis Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
6	Agency/Group/Organization	REGIONAL ACCESSIBILITY MOBILIZATION PROJECT
	Agency/Group/Organization Type	Services-Persons with Disabilities
	What section of the Plan was addressed by Consultation?	Non-Homeless Special Needs
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
7	Agency/Group/Organization	REMEDIES RENEWING LIVES
	Agency/Group/Organization Type	Services-Victims of Domestic Violence Services-Health
	What section of the Plan was addressed by Consultation?	Housing Need Assessment Homeless Needs - Families with children
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.

Substantial Amendment 12/8/15 OMB Control No: 2506-0117 (exp. 07/31/2015)

ROCKFORD

8	Agency/Group/Organization	CARPENTERS PLACE
	Agency/Group/Organization Type	Services-homeless Services-Health Services-Employment
	What section of the Plan was addressed by Consultation?	Housing Need Assessment Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for improved coordination?	Invited to participate in the Consolidated Plan community forums.
9	Agency/Group/Organization	WINNEBAGO COUNTY HEALTH DEPARTMENT
	Agency/Group/Organization Type	Services-Health Other government - County
	What section of the Plan was addressed by Consultation?	Homelessness Strategy Homeless Needs - Chronically homeless Homeless Needs - Families with children Homelessness Needs - Veterans Homelessness Needs - Unaccompanied youth Non-Homeless Special Needs
	How was the Agency/Group/Organization consulted and what are the anticipated outcomes of the consultation or areas for	Invited to participate in the Consolidated Plan community
	improved coordination?	forums.

-		Y
10	Agency/Group/Organization	ROCKFORD MELD
	Agency/Group/Organization Type	Services-homeless
		Services-Education
		Services-Employment
	What section of the Plan was addressed by Consultation?	Homelessness Strategy
		Homeless Needs - Families
		with children
		Anti-poverty Strategy
	How was the Agency/Group/Organization consulted and what	Invited to participate in the
	are the anticipated outcomes of the consultation or areas for	Consolidated Plan community
	improved coordination?	forums.
11	Agency/Group/Organization	ROCKFORD AREA ARTS
		COUNCIL
	Agency/Group/Organization Type	Services-Education
		Regional organization
	What section of the Plan was addressed by Consultation?	Economic Development
	How was the Agency/Group/Organization consulted and what	Invited to participate in the
	are the anticipated outcomes of the consultation or areas for	Consolidated Plan community
	improved coordination?	forums.

Identify any Agency Types not consulted and provide rationale for not consulting

No specific organizations were intentionally left out of the public participation process.

Other local/regional/state/federal planning efforts considered when preparing the Plan

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Continuum of	Rockford/Winnebago/Boone	The Strategic Plan provides a set of goals for
Care	Continuum of Care	addressing homelessness, with are supported by the
		Rockford/Winnebago/Boone Continuum of Care and
		its participating agencies.
PHA 5-Year	Rockford Housing Authority	The 5-Year Plan addresses specific maintenance and
Plan		planning needs of the Rockford Housing Authority,
		which has a major role in addressing the housing
		needs of Rockford.

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Fair Housing	Rockford Metropolitan Agency	The Regional Analysis of Impediments to Fair
Equity	for Planning	Housing was used as a resource to identify housing
Assessment		needs and some strategies address impediments
		identified in the assessment.

Table 3 – Other local / regional / federal planning efforts

Describe cooperation and coordination with other public entities, including the State and any adjacent units of general local government, in the implementation of the Consolidated Plan (91.215(I))

The City of Rockford works closely with the Rockford Housing Authority and departments of the Winnebago County government in the provision of programs to address local issues covered by the Consolidated Plan.

Narrative (optional):

The development of the Consolidated Plan and the component Strategic Plan and Annual Action Plan require the help of the local non-profit community and other organizations. Specific priorities are identified and ranked through that participation utilizing focus group sessions, forums, and surveys. The City relies on its ongoing relationships to ensure that these opinions and observations are incorporated into the Plan.

Describe the number and type of single person households in need of housing assistance.

According to the 2008-2012 American Community Survey, there were 19,774 single person households in Rockford (33.3% of all Rockford households), over 30 percent of which were elderly (age 65+). Fortyfour percent of single person households were homeowners, with 56 percent renters. Seventeen percent of single person renter households lived in single-family housing units, compared to 88 percent of owner households. The median household income of single person households was \$22,465, approximately 60 percent of the median income for all households in Rockford. As shown in Table 4 above, almost 30 percent of "Other" renter households and 21 percent of "Other" owner households experienced severe cost burden. Most of the "Other" category will be made up of single person households.

Estimate the number and type of families in need of housing assistance who are disabled or victims of domestic violence, dating violence, sexual assault and stalking.

Data from the 2008-2012 American Community Survey show that 13.5 percent of the population of Rockford reports some form of disability. Disabilities reported increase with age. Those below the age of 5 are reported to include 1.1 percent with disabilities. In the 5 to 17 year age group, 5.2 percent are reported to have disabilities. In the 18 to 64 year age group, 12.5 percent report disabilities, with 6.7 percent reporting ambulatory difficulties, 2.8 percent with self-care difficulties, and 5.0 percent with independent living difficulties. The 65 year and older age group reported 37.2 percent with disabilities, including 24.0 percent with ambulatory difficulties, 8.7 percent with self-care difficulties, and 17.5 percent with independent living difficulties. The ACS data also show that 4.3 percent of the population of Rockford reports a disability and living in poverty.

In CY2012, Remedies Renewing Lives, a local service provider for victims of domestic violence, sheltered 489 of a total of 1,541 victims served by the agency. Of that number, 280 were adults and 209 were children. In 2013, Remedies assisted 901 victims with orders of protection in Winnebago County, up from 884 in 2012. The agency provided 12,191 shelter nights to their domestic violence clients.

What are the most common housing problems?

By far, the most common housing problem in Rockford is cost burden. According to the CHAS data in Table 4 above, over 72 percent of households in the 0-30% AMI income category (including renters and owners) had a cost burden of over 30%, with over 66 percent having a cost burden of over 50%. A 30% cost burden means that a household is spending more than 30% of their gross income on housing expenses, including utilities. Over 70 percent of households in the 30-50% AMI income category had a 30% cost burden, with 29.7 percent having a 50% cost burden. The numbers fall off somewhat for the next highest income category where 45 percent of households in the 50-80% AMI category had a 30% cost burden, with only 8.9 percent having a 50% cost burden.

Looking at cost burden and severe cost burden by tenure, 55 percent of renter households and 71 percent of owner households earning less than 30% of the area median income (AMI) paying more than 50% of their income on housing expenses. For rental households, severe cost burden is the most common housing problem with 30 percent of all renter households earning below 100% of the AMI paying more than 50% of their income on housing expenses, while cost burden is the most common for owner households where 30.9 percent of all owner households earning below 100% of the AMI paying more than 30% of their income on housing expenses, with severe cost burden not far behind with 22 percent paying more than 50% of their income on housing expenses.

By comparison, the numbers for overcrowding and incomplete kitchen or plumbing facilities were low, with four percent of the lowest income category living in overcrowded conditions and two percent living without complete kitchen or plumbing facilities.

Are any populations/household types more affected than others by these problems?

Cost burden and extreme cost burden affect all household types in the lower income categories. In simple numerical terms, it would appear that "Small Related" households bear much of the brunt of severe cost burden, with over 44 percent of the total number of below 30% AMI rental households experiencing severe cost burden and 32 percent of owner households in the same income category experiencing severe cost burden. For ownership households, "Elderly" households in the 0-30% AMI group made up 33 percent of the total experiencing severe cost burden in the income group for owner households. Large related households comprised the smallest portion of those experiencing severe cost burden for all but one income category, presumably because they are the smallest of the household types.

Describe the characteristics and needs of Low-income individuals and families with children (especially extremely low-income) who are currently housed but are at imminent risk of either residing in shelters or becoming unsheltered 91.205(c)/91.305(c)). Also discuss the needs of formerly homeless families and individuals who are receiving rapid re-housing assistance and are nearing the termination of that assistance

Low-income individuals and families who are currently housed but are at risk of either residing in shelters or becoming unsheltered are living paycheck to paycheck, just making ends meet. They are often one paycheck away from being homeless in the event of a sudden loss of employment or medical emergency which redirects financial resources. These households span all types, including individuals living alone, small families, large families, and the elderly. Some households have relatives or friends with whom they can double-up, thus avoiding homelessness, at least in technical terms, but these accommodations are not long-term solutions to their needs. These households, particularly extremely

Consolidated Plan Substantial Amendment 12/8/15 ROCKFORD OMB Control No: 2506-0117 (exp. 07/31/2015) low-income households, need a wide variety of assistance to help them meet those emergency needs that occasionally crop up in everyone's lives. This assistance could include job training to help them transition into better paying professions, mortgage/rental assistance, medical clinics that provide low or no cost care, rent subsidies, and other services that help absorb the costs that might redirect funds dedicated to housing.

Formerly homeless families and individuals also need these services to reduce the prospect of returning to homelessness. Transitional housing units, permanent supportive housing, and rent subsidies help meet the housing expenses of households returning from homelessness, while job training programs help with job prospects. Other social services are needed on occasion as circumstances demand.

If a jurisdiction provides estimates of the at-risk population(s), it should also include a description of the operational definition of the at-risk group and the methodology used to generate the estimates:

N/A

Specify particular housing characteristics that have been linked with instability and an increased risk of homelessness

Severe cost burden is linked with housing instability and an increased risk of homelessness. When a household is paying too large a portion of their income on housing expenses, sudden and unexpected financial demands can tip the scales, forcing them from their homes. These demands might include illnesses requiring hospital stays or time away from their job, automotive problems requiring repairs or loss of work due to lack of transportation, and legal problems that might require payments to lawyers or time away from their job. Lower income households are particularly susceptible to these financial impacts because they are less likely to have savings that can cover these expenses and buffer the effects of monetary demands in covering unexpected events.

Discussion

Cost burden and extreme cost burden are the most common housing problem across all lower income households in Rockford, both renter and owner. The lower the income of the household, the more extreme the cost burden. Overcrowding is also a common problem in many lower income households, though the numbers are much lower than those of cost burden. There is some concern with lack of complete plumbing and kitchen facilities, but these conditions are not widespread. As a proxy for housing condition, lack of complete kitchen or plumbing facilities does not tell the entire story. Many units with complete kitchen and plumbing facilities may not be habitable.

Consolidated PlanSubstantial Amendment 12/8/15ROCKFORDOMB Control No: 2506-0117 (exp. 07/31/2015)

NA-40 Homeless Needs Assessment – 91.205(c)

Introduction:

The following table provides an estimate of homeless individuals and families within several categories. These numbers are taken from the 2013 number of homeless persons each year, becoming homeless each year, number exiting homeless each year, and duration of homelessness have Point-in-time count. To date, Rockford has not provided a separate count of homeless individuals or families in rural areas. Estimates for the not been developed, as yet.

ssessment
Needs As
Homeless

Population	Estimate the	Estimate the # of persons	Estimate the #	Estimate the #	Estimate the #	Estimate the #
	experiencing	experiencing homelessness	experiencing	becoming	exiting	of days persons
			nomelessness each year	nomeless each year	nomelessness each year	experience homelessness
	Sheltered	Unsheltered			•	
Persons in Households with Adult(s)						
and Child(ren)	65	41	0	0	0	0
Persons in Households with Only						
Children	10	15	0	0	0	0
Persons in Households with Only						
Adults	284	95	0	0	0	0
Chronically Homeless Individuals	121	63	0	0	0	0
Chronically Homeless Families	32	52	0	0	0	0
Veterans	32	13	0	0	0	0
Unaccompanied Child	10	0	0	0	0	0
Persons with HIV	4	0	0	0	0	0
	Ta	Table 26 - Homeless Nords Associate	Norde Account			

Table 26 - Homeless Needs Assessment

49

ROCKFORD

Substantial Amendment 12/8/15

OMB Control No: 2506-0117 (exp. 07/31/2015)

Consolidated Plan

Data Source Comments: IL-501 Rockford/Winnebago, Boone Counties CoC Point-in-Time Date: 1/23/2013

Indicate if the homeless population is: Has No Rural Homeless

days that persons experience homelessness," describe these categories for each homeless population type (including chronically If data is not available for the categories "number of persons becoming and exiting homelessness each year," and "number of homeless individuals and families, families with children, veterans and their families, and unaccompanied youth):

To be discussed in consultation with homeless service providers.

OMB Control No: 2506-0117 (exp. 07/31/2015)

Consolidated Plan

Substantial Amendment 12/8/15 ROCKFORD

50

Nature and Extent of Homelessness: (Optional)

Race:	Sheltered:		Unsheltered (optional)	
White		0		0
Black or African American		0		0
Asian	×.	0		0
American Indian or Alaska				
Native		0		0
Pacific Islander		0		0
Ethnicity:	Sheltered:		Unsheltered (optional)	
Hispanic		0		0
Not Hispanic		0		0

Comments:

Estimate the number and type of families in need of housing assistance for families with children and the families of veterans.

According to the 2013 Point-in-Time survey, 65 sheltered and 41 unsheltered persons were in families with at least one adult and one child. While the data do not provide any insight into the familial status of veterans, the data do show that there were 32 sheltered and 13 unsheltered veterans.

Describe the Nature and Extent of Homelessness by Racial and Ethnic Group.

The 2013 survey data do not provide details about the distribution of homeless individuals or families by race. When the 2014 data are available, these sections will be updated.

Describe the Nature and Extent of Unsheltered and Sheltered Homelessness.

The 2013 Point-in-time survey did not provide details that distinguished between sheltered and unsheltered homeless individuals. It is generally assumed by service providers in Rockford that the majority of unsheltered homeless persons are unsheltered by choice, perferring to live uncontrolled by service providers. These individuals are primarily single, chronic homeless persons, many with substance and/or mental problems.

Discussion:

The results of the 2013 Point-in-time survey showed a total population of 221 persons who were in emergency shelters, 280 in transitional housing, and 287 who were unsheltered, totaling 788. Over 48

 Consolidated Plan
 Substantial Amendment 12/8/15
 ROCKFORD

 OMB Control No: 2506-0117 (exp. 07/31/2015)
 Control No: 2506-0117 (exp. 07/31/2015)
 Control No: 2506-0117 (exp. 07/31/2015)

percent of the total were in families with at least one adult and one child. Thirty-four percent were considered chronic homeless, including 84 families. Almost six percent were veterans and 10 percent were victims of domestic violence.

Rockful PHA

4-III.B. 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.

Local Preferences [24 CFR 960.206]

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 prioritics that can be documented by generally accepted data sources [24 CFR 960.206(a)].

PHA Policy

The PHA will use the following local preferences:

Families whose head of household is working at least 10 hours a week

Families whose head of household is enrolled in licensed or certified education or training

Families whose head of household is enrolled in Economic Self Sufficiency (definition from law)

Families whose head, spouse or co-head is Elderly/Disabled

Families whose head, spouse or co-head is a veteran and was discharged from the military under any circumstances other than dishonorable

Families who have been displaced by local, state or federal declared disaster

Families whose head, spouse or co-head is near elderly

Families who meet HUDs definition of homeless

Families whose head spouse or co-head is a resident of or works within the City of . Rockford

Families whose head, spouse, or co-head is participating in the Rock River Homeless Coalition

The PHA will offer a preference to an applicant who was in the custody of the child $_{\odot}$ welfare system on or before his/her 18th birthday who has not yet reached the age of 24 $^{\circ}$

State Operated Development Class (SODC) members may be referred to the waiting list through the State of Illinois Statewide Referral Network (SRN) with the terms of the Olmstead consent decrees or referrals for class members from: WILLIAMS v. QUINN, LIGAS v. HAMOS, and/or COLBERT v. QUINN, etc.

Each preference will be given one point. Applicants will be placed in order by preference points and date and time of the application.

In order to bring higher income families into public housing, the PHA will establish a preference for "working" families, where the head, spouse, cohead, or sole member is

Boone and Winnebago County PHA

4-III.B. SELECTION METHOD

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PHA Policy

The PHA will use the following local preference:

1 Point – The PHA will offer a preference to an applicant who lives in Winnebago County for the immediate and consecutive past ninety calendar days

10 Points – The PHA will offer a preference to an applicant whose head or spouse is age 62 or older, or an applicant who head or spouse meet the HUD/Social Security definitions of disabled

1 Point – The PHA will offer a preference to an applicant for being a veteran or surviving spouse of a veteran

1 Point – The PHA will offer a preference to an applicant for "working", where the head, spouse, co-head, or sole member is employed at least 20 hours per week. As required by HUD, families where the head and spouse, or sole member is a person age 62 or older, or is a person with disabilities, will also be given the benefit of the working preference [24 CFR 960.206(b)(2)]. This included applicants who are graduates of or participants in education and training programs designed to prepare the individual for the job market

1 Point – The PHA will offer a preference to an applicant for victims of the Violence Against Women's Act of 2013, as defined within this policy (See Chapter 3-III.F.)

T Point — The PHA will offer a preference to an applicant who was in the custody of the child welfare system on or before his/her 18^{th} birthday who has not yet reached the age of 24

I Point – The PHA will offer a preference to Nursing Home Residents who have resided in a state-licensed nursing home for the immediate and consecutive past ninety calendar days and have been determined by the state-licensed nursing home as eligible for discharge.

Point – The PHA will offer a preference to an applicant if they were involuntarily displaced for the following reason:

Federally Declared Disaster (e.g. flood, fire, and earthquake)

Memorandum of Understanding Between the Rockford, Boone/Winnebago Continuum of Care and The Institute for Community Alliances

A. Purpose and Scope

The purpose of this Memorandum of Understanding is to confirm agreements between the Rockford, Boone/Winnebago Continuum of Care and the Institute for Community Alliances in connection with the Homeless Management Information System. As such, the Memorandum of Understanding sets forth the general understandings, and specific responsibilities of each party relating to key aspects of the governance and operation of the State of Iowa's Homeless Management Information System. This agreement is effective from December 1, 2015 and through June 30, 2016.

B. Background

The Homeless Management Information System (HMIS) is a collaborative project of the Rockford, Boone/Winnebago Continuum of Care and the Institute for Community Alliances (ICA), and participating partner agencies. HMIS is a computerized data collection application designed to capture information about persons experiencing homelessness and homeless programs over time. HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care (CoC) homeless assistance funds and Emergency Solutions Grant (ESG) funds. HMIS is essential to efforts to streamline client services and inform public policy. Through HMIS, people experiencing homelessness benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in Rockford, Boone/Winnebago Counties, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation. and advocacy. The parties to this Memorandum of Understanding (MOU) share a common interest in collaborating to end homelessness and successfully implementing and operating HMIS in Rockford, Boone/Winnebago Counties.

The Rockford, Boone/Winnebago Continuum of Care (CoC) is a communitywide collaborative that works to provide a range of homeless housing and services. The continuum of care system components includes prevention, emergency shelter, transitional housing, permanent affordable / permanent supportive housing, supportive services, and

**Receiped Bonner, Wisheberge Leether Other Record a Manager University date outreach services for each homeless subpopulations, and integration with "mainstream" programs.

HMIS enables homeless service providers to collect uniform client information over time. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of the homeless population; these data are necessary to service and systems planning, and advocacy.

C. General Understandings

1. Rockford, Boone/Winnebago CoC Governance

The Rockford, Boone/Winnebago Continuum of Care (CoC) is the lead-planning group for efforts to end homelessness and for implementing and operating a homeless CoC system in Rockford, Boone/Winnebago Counties. As such and under HUD policy, the CoC is responsible for oversight of the HMIS implementation and assurance that the HMIS is in compliance with HUD's national HMIS Standards. The CoC will carry out oversight and governance responsibilities and also review and approve all local HMIS policies and procedures.

2. Lead Agency Designation

The Rockford, Boone/Winnebago Continuum of Care designates the Institute for Community Alliances as the HMIS Lead Agency to manage HMIS operations on its behalf and to provide all HMIS administrative functions.

3. Funding

3a. HUD Grant

HMIS activities are covered by a HUD CoC grant and HUD-required local match funds. This grant will be transferred to ICA as quickly as possible during the current grant year. The terms and uses of HUD funds are governed by the HUD CoC grant agreement and applicable rules.

3b. Local Jurisdiction and Partner Agency Cash Match

The HUD CoC grant comes with a 25% cash match requirement that is the responsibility of the grantee and will shift to ICA when the grant is transferred from RRH. Match funding for the HMIS effort will come primarily from available annual financing from local jurisdictions and Partner Agencies for HMIS related expenses, such as user fees, or other vendor expenses. In the event there is a shortfall in the cash match ICA will consult with the Rockford, Boone/Winnebago CoC to identify additional sources of local matching funds. 4. Software and Hosting

The Rockford, Boone/Winnebago Continuum of Care has selected ServicePoint[™]—to serve as the sole HMIS software application for the CoC. All Partner Agencies agree to use ServicePoint[™] as configured for the CoC in consultation with the HMIS/Data subcommittee of the CoC.

5. Compliance with Homeless Management Information System Standards

2 | Rocklord, Boone, Winnelseje CoC/ICA Blass Memoriandum et Understanding The HMIS will be operated in compliance with HUD HMIS Data and Technical Standards and other applicable laws. The parties agree to make changes to this MOU, other HMIS operational documents, and HMIS practices and procedures to comply with any and all revisions of these Data and Technical Standards within the HUD-specified timeframe for such changes.

6. Local Operational Policies and Agreements

The HMIS will operate within the framework of agreements, policies, and procedures that have been or will be developed and approved over time by Rocktord, Boone/Winnebago CoC. These agreements, policies and procedures include but are not limited to the HMIS Policies and Procedures Manual, Privacy Policies and Notices, Client Release of Information (ROI) Forms and Procedures, Standardized Information Collection Forms (Intake and Exit), Partner Agency Agreements, and User Agreements. Changes to the policies and procedures may be made from time to time by the applicable parties to comply with the HMIS Standards or otherwise improve HMIS operations.

D. Specific Responsibilities of the Parties

1. Rockford, Boone/Winnebago Continuum of Care Board Responsibilities The Rockford, Boone/Winnebago CoC serves as the lead HMIS governance body, providing oversight, project direction, policy setting, and guidance for the HMIS project. These responsibilities include:

a. Responsibility for ensuring and monitoring compliance with the HUD HMIS Standards.

b. Designating the HMIS Lead Agency and the software to be used for HMIS, and approving any changes to the HMIS Lead Agency or software.

c. Conducting outreach to and encouraging participation by all homeless assistance programs and other mainstream programs serving homeless people.

d. Reviewing and approving all HMIS operational agreements, policies, and procedures.

e. Working to inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.

f. Guiding data quality and reporting.

g. Promoting the effective use of HMIS data, including measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs.

h. Provide all local information as necessary for compilation of the Continuum of Care Bed Inventory, Point in Time Street Count, and support ICA in preparing the Annual Homeless Assessment Report (AHAR).

2. Institute for Community Alliances Responsibilities

Institute for Community Alliances serves as the lead agency for the HMIS project, managing and administering all HMIS operations and activities. These responsibilities are contingent

on receipt of the appropriate HUD grant funding and local match dollars from participating jurisdictions and Partner Agencies and include:

General Responsibilities:

a. Serving as the liaison with HUD regarding the HUD HMIS grant.

b. Serving as the liaison with the software vendor.

c. Attending all applicable Rockford, Boone/Winnebago CoC meetings.

d. Providing overall staffing for the project.

e. Participating in the success of HMIS.

f. Complying with HUD HMIS Standards (including any and all anticipated changes to the HMIS Standards) and all other applicable laws.

g. Maintaining the HUD McKinney-Vento CoC project grant, applying for renewal funds each year, and administering the HUD HMIS grant.

h. ICA shall be responsible for securing all required cash or in kind match funding.

i. Annually prepare the HUD McKinney-Vento CoC NOFA application sections related to HMIS and Point in Time activities, as well as the HMIS project application

Project Management and System Administration:

a. Selecting and procuring server hardware or Server hosting arrangements.

b. Arranging hosting and executing the hosting facility agreement, if necessary.

c. Procuring server software and licenses.

d. Providing and managing end user licenses (per terms of grant agreement with HUD).

e. Creating project forms and documentation.

f. Preparing/updating HMIS project policies and procedures and work with the Rockford, Boonc/Winnebago CoC to monitor and ensure compliance with these policies and procedures.

g. Prepare and execute all software vendor contract and licensing, security arrangements, Partner Agency MOUs, and contractor agreements.

h. Obtaining and maintaining signed Partner Agency MOU's.

Administering HMIS end users, including:

a. Add and remove partner agency end users

b. Manage user licenses

Training:

Provide all training and user guidance needed to ensure appropriate system use, data entry, data reporting, and data security and confidentiality, including:

a. Training documentation

b. Confidentiality and Intake/Exit Forms training

c. Application training for agency administrators and end users

d. Outreach to users/end user support

e. Training timetable

f. Helpdesk

4 Rockford BoonerWinnebagn Cuc/ICA BiNIS Memorandum of Understanding

Data Quality:

a. Ensuring all client and homeless program data are collected in adherence to the HUD HMIS Data Standards and local additional requirements thereto.

b. Customizing the HMIS application to meet local data requirements.

c. Monitoring data quality, generating agency exceptions reports,

d. Ensuring data quality.

c. Preparing and implementing a data quality plan.

f. Carrying out aggregate data extraction and reporting (in coordination with the Rockford, Boone/Winnebago CoC) including the HMIS data needed for an unduplicated accounting of homelessness, excluding the Point in Time and Street count.

g. Assist partner agencies with agency-specific data collection and reporting needs, such as the Annual Progress Report and program reports (within reason and within constraints of budget and other duties).

Satisfactory Assurances Regarding Confidentiality and Security:

It is understood that ICA will receive from client information that may be subject to the privacy and security protections and requirements of HUD HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. ICA hereby agrees that it will use protected client information only for purposes permitted by partnership agreements and as permitted by the applicable law and Standards. Further, ICA agrees it will make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

E. Period of Agreement and Modification/Termination

1. Period of Operation and Termination: This MOU will become effective upon signature of the parties and shall remain in effect until terminated by the parties. Each party shall have the right to terminate this agreement as to itself only upon 90 days prior written notice to the other party.

2. Amendments: Amendments, including additions, deletions, or modifications to this MOU must be agreed to by all parties to this Agreement. The signatures of the parties indicate their agreement with the terms and conditions set forth in this document.

3. Annual Review: This MOU will be reviewed and renewed collaboratively by the Rockford, Boone/Winnebago CoC, the collaborative applicant, and ICA on an annual basis.

HMIS MOU Signature Page

For Rockford, Boone/Winnebago Continuum of Care Board

hetem By_ H A , CoC Chair

For Institute for Community Alliances

By_

David Eberbach, Executive Director

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Rock River Homeless Coalition – Policy on Chronic Homelessness

The Rock River Homeless Coalition policy on chronic homelessness is to adopt the orders of priority for all CoC funded PSH as described in Notice CPD 14-012.

First Priority–Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

Second Priority–Chronically Homeless Individuals and Families with the Longest History of Homelessness.

Third Priority–Chronically Homeless Individuals and Families with the Most Severe Service Needs.

Fourth Priority–All Other Chronically Homeless Individuals and Families.

Shitim Kay

Chair Signature

Rock River Homeless Coalition Coordinated Intake & Assessment Procedure

The Rock River Homeless Coalition (formerly known as the Mayors' Task Force on Homelessness & the Continuum of Care) will implement a Coordinated Intake & Assessment (CI/A) system effective January 2, 2015. This system will be utilized for persons/families that are homeless and in need of housing in Winnebago & Boone Counties.

This system will be comprised of a Single Point of Entry (SPOE) location. This location will be at the office of the Community Action Agency located at <u>555 N. Court Street</u> <u>#301 in Rockford, IL. This location will be open from 8:00 am until 4:00 pm on Monday-Friday, excluding recognized holidays.</u> An after-hours "Hotline" will be available for 24 hour contact. For those clients in Boone County, contact can be made through the "Hotline". **The number to contact (24/7) is 844-710-6919** <u>Extension 5</u> for assistance.

The SPOE will conduct initial screening and assessments which will allow for service matching and referral to appropriate housing options. The SPOE will also be responsible for maintaining a Centralized Waiting list. Immediate placements into permanent housing are not likely but temporary placements will be offered based on a case by case basis.

All Rock River Homeless Coalition (RRHC) member agencies that operate any housing programs including Permanent/Permanent Supportive Housing (PH), Transitional Housing (TH), Emergency Shelters (ES), Rapid-Rehousing, or Homeless Prevention for the homeless will be asked to operate by this procedure in order to better serve the homeless population. This does include both CoC/ESG funded agencies and those funded through other means. The RRHC will also be seeking collaborations with other key stakeholders in order to make this a community-wide effort to end homelessness in Winnebago and Boone Counties.

Intake:

The SPOE will conduct an initial assessment with a client to determine his/her homeless status. These statuses include:

1) Literally Homeless: individual or family who lacks a fixed, regular, and adequate nighttime residence which includes a primary nighttime residence of:

*Place not meant for human habitation such as cars, abandoned buildings, bus/trains, camping, etc.

*Publicly operated shelters or transitional housing (when appropriate), including hotel/motel paid for by an agency

*A person that is being discharged from an institution where he or she has been a resident for 90 days or less and the person resided in a shelter or place not meant for human habitation immediately prior to entering the institution.

2) Imminently at-risk of Homelessness: Individual or family is being evicted within 14 days from their primary nighttime residence (including exits from transitional housing programs) and:

*No subsequent residence has been identified

*The household lacks (and can verify) the resources or support networks (i.e. family, friends, faith-based or other social networks) needed to obtain other permanent housing

3) Fleeing/Attempting to Flee Domestic Violence: Any individual or family who:

*Is fleeing, or is attempting to flee, DV,

*Has no other residence;

*Lacks the resources or support networks to obtain other permanent housing.

*The SPOE cannot require person to have a police report or order of protection. A selfdeclaration can be accepted as proof.

An intake and assessment will be conducted on each <u>literally homeless</u> individual or family (including those that are fleeing domestic violence) who enter the facility. Initial intakes will collect data required by HUD (required HMIS data element), enter the client into the HMIS system, and conduct a Vulnerability Index-Service Prioritization Decision Assessment Tool (VI-SPDAT) assessment to ensure they meet the definition of homeless and to prioritize, and make referrals to appropriate programs.

For after-hours/weekend calls and other special circumstances, phone intakes can be done on an as needed basis. On the following business day, a referral will be sent to the receiving agency.

If a client presents in person at an agency that is not the SPOE, they should inform the client of the site location. Again, entry into the system through a "side-door" will not be allowed, everyone must go through the SPOE. However, you may enter the Emergency

Shelters without a referral but you must inform the client of the SPOE and make sure they get there within 3 days.

In the event of a Domestic Violence (DV), the DV agency will have the ability to keep a client's name and address anonymous if they feel it is necessary for safety reasons. However, in the case of clients who do need housing, they should still be sent to the SPOE as soon as possible, not when they are approaching their out date.

Clients that present as "Imminently at-risk of Homelessness" will be sent to "Shelter Diversion" programs if they are available which will stop them from becoming literally homeless.

Those living with friends/family will <u>not</u> have an intake done but can be referred for shelter services if eligible (for example, pregnant or parenting girls under 21 would be referred to MELD) even if they are with friends/family.

Prioritization:

Based on HUD recommendations, the RRHC will prioritize clients based on lowest income, longest/chronically homeless and greatest barriers. These items will be assessed using an initial questionnaire and VI-SPDAT. The client with the highest priority score will get the first available spot for housing.

In addition to the score that is received from the VI-SPDAT, clients will also earn 5 points for a "Local Preference" for those who can prove prior residency in Boone or Winnebago County. Chronically homeless and veterans will also receive 5 extra points. Domestic violence victims and youth (under age 24) will also each receive an extra 4 points.

In accordance with the Housing First Model, those with the highest score will be directed to Permanent Housing options first (including supportive and non-supportive housing options) followed by Transitional Housing and Emergency Shelters. By conducting the above assessment, a score will be assigned which will assist in determining which program type the client should be referred to.

In accordance with RRHC policy on chronic homelessness priorities for CoC PSH funded projects, prioritization is as follows:

- 1) Chronically homeless individuals & families with the longest history of homelessness and with the most severe service needs
- 2) Chronically homeless individuals & families with the longest history of homelessness.

- 3) Chronically homeless individuals & families with the most severe service needs
- 4) All other chronically homeless individuals & families.

Referrals:

After the intake is complete and the assessment has been conducted, the SPOE will send a referral to the most appropriate place with beds available. A completed standardized referral form will be sent with the client to provide to the receiving agencies or faxed/emailed to the agency. The receiving agency will send the referral form back to the SPOE to inform them of the outcome of the referral for tracking purposes. Clients will have a maximum of 7 days to report to the receiving agency. After 7 days, the referral will be considered void. This referral does include a basic release of information statement which allows the SPOE to give and receive housing related information to the referral agency.

All persons that are eligible for shelter stays will be referred to the appropriate shelter for temporary stays. If the clients leave the shelter and are no longer literally homeless, they do risk being removed from the waiting list.

This policy does acknowledge that households fleeing or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, may have different needs than non-victims. Providers will be trained on sensitivity in regards to victims' assistance, and referrals will ONLY be made to domestic violence providers (when possible). In addition, the HMIS data of victims will continue to be treated with the highest level of confidentiality, and victims' data is not shared with other providers. In the case that the DV provider does not have available beds, the SPOE will look for other options that would provide a safe place for the clients.

Waiting Lists:

One Centralized Waiting List will be kept by the SPOE. Clients should be placed on the list according to their prioritization score and the date and time that they applied for services. When a housing option becomes available, the person at the top of the list will be contacted. As long as they meet any special population requirements for the specific agency/program, the said housing agency should proceed with housing them.

Each client that is assessed and placed onto a waiting list will have the responsibility to contact the SPOE at least weekly to keep his or her application active. Clients can update their file in person at the SPOE office or by phone at 844-710-6919. If they are part of a program, their case manager can also do the check in for them. A written policy will be provided to each client that signs up for services. If the SPOE has not

heard from the client for more than 4 weeks, the client will become inactive, as it will be assumed that they have found other housing.

Any clients that have not been heard from or have not had any documented contact with the SPOE (or partner agencies), they will be considered inactive. If they re-appear or make contact with the SPOE or partners, they will be re-activated. The score should be updated as needed and the entry date will be revised to the date in which they returned. If it has been more than 30 days since their removal from the waiting list (or since their closure in HMIS), they will need to do a new entry into the HMIS system.

Clients who have been assessed will be referred for Emergency Shelter (ES) when no other permanent housing options are available. In the event of no ES beds available, clients may be sent to a motel if funding is available. Because staying in an ES or motel still qualifies someone as Literally Homeless, a client in ES/motel will not be removed from the waiting list. The client will be able to keep his/her place on the waiting list and will still be offered a more permanent option when it comes available.

In the event that we have knowledge of a homeless individual or family who is unwilling to apply for the SPOE services, they can still be added to the list using their basic information. It is recommended that outreach be conducted to collect as much information as possible (even to complete a mobile version of the VI-SPDAT, if the client will comply).

Program vacancies:

A bed tracker function <u>may</u> be available in HMIS for those agencies that use HMIS. Agencies will be responsible for updating this function as available units come open. In trying to fill all vacancies as soon as possible, agencies must contact the SPOE as soon as they know a unit is going to be vacated. A Vacancy Notice form will be used which each agency can complete and fax to the SPOE at 888-433-6927. The SPOE will then look at the waiting list and ensure that an eligible person will be ready to be sent to that program.

Once the SPOE has been notified of an opening, they will have 48 hours to send referrals for the opening. The referrals will be for the person/family who is highest on the waiting list and qualified for the unit. If possible, the SPOE will send at least two eligible households for each opening to ensure that the receiving agency can reach someone. The SPOE will not always notify the client ahead of time, so it is assumed that the receiving agency will make contact with them. The receiving agency is responsible for verifying all information such as chronic status.

Each evening by 8 pm, each Emergency Shelter will contact the SPOE (Phone/text: 779-208-0710, email: <u>csbgadministration@rockfordil.gov</u>, or fax: 888-433-6927) to report their availability for the night in case of any after-hours emergencies. These "emergencies" will usually be brought to the attention of the SPOE by the hospitals, Police or Fire Departments.

Acceptance of clients:

Programs will accept all clients provided that they meet the Special Population requirements for the specific programs. They will take those persons that have the highest prioritization score. According to the Housing First Model, clients will be taken as they are and not required to be involved in services in order to obtain housing.

If a referral is made on behalf of a client and the receiving agency is not able to contact them within 5 days, a different referral will be made.

Programs shall not discriminate against any individuals or families including against those that are part of the LGBTQ community. In the event of a transgendered individual enters, HUD requires that an agency houses the individual based on whatever gender the person identify him/herself as. It is also the policy of the SPOE to keep all families intact and refer them to places where they may stay together.

Clients who are Registered Lifetime Sexual Offenders will not be denied for services; however, placement in housing programs will be determined based on the safety of other people in the said program and any other legalities. Other services may be offered in the event that there is not an appropriate housing placement.

Termination from Housing Programs:

For Shelter Programs:

If a shelter is discharging someone from their program, they should notify the SPOE as to the discharge date and reason for discharge to allow SPOE to better follow up with services. If the discharge is for a specified amount of time, please indicate that also. The referral form that the SPOE send to the agencies initially does contain a release of information for housing information. Each situation will be assessed individually and the SPOE will assist based on the circumstances.

For Transitional/Permanent Program:

An agency may terminate assistance to a program participant who violates their lease agreement or occupancy agreement. Termination under this section does not prohibit

the agency from providing further assistance at a later date to the same individual or family.

For the Hard to House Population and those agencies that are providing Permanent Supportive Housing, the agencies will be required to exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that the program participant's assistance is terminated only in the most severe cases.

If a client is being terminated from a program, the terminating agency should ensure that the client is referred back to the SPOE if they have not identified another housing option.

All clients should be given the termination policy to read and sign upon their acceptance to a program.

Due Process:

In terminating assistance to a program participant, the agency must provide a formal process that recognizes the rights of individuals receiving assistance under the due process of law. This process, at a minimum, must consist of:

*Providing the program participant with a written copy of the lease or occupancy agreement and the termination process before the participant begins to receive assistance

*Written notice to the program participant containing a clear statement of the reasons for termination

*A client has the right to request a review of the decision in writing within 30 days to the terminating agency. The program participant will have the opportunity to present written or oral objections to the termination.

*Prompt written notice of the final decision to the program participant.

Summary Report for IL-501 - Rockford/Winnebago, Boone Counties CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		177		119			93	
1.2 Persons in ES, SH, and TH		440		213			166	

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

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

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

		erse sons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference	
1.1 Persons in ES and SH	-	-	-	-	-	-	-	-	
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-	

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	Homelessn than 6 (0 - 18	rns to ess in Less Months 0 days)	Homelessn to 12 l	rns to less from 6 Months 65 days)	Homeless 13 to 24	rns to ness from Months 30 days)		of Returns Years
	Destination (2 Years Prior)		% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	10	1	10%	2	20%	0	0%	3	30%
Exit was from TH	17	0	0%	2	12%	0	0%	2	12%
Exit was from SH	0	0		0		0		0	
Exit was from PH	31	1	3%	4	13%	0	0%	5	16%
TOTAL Returns to Homelessness	58	2	3%	8	14%	0	0%	10	17%

Measure 3: Number of Homeless Persons

Metric 3.1 - Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	410	327	-83
Emergency Shelter Total	230	146	-84
Safe Haven Total	0	0	0
Transitional Housing Total	149	152	3
Total Sheltered Count	379	298	-81
Unsheltered Count	31	29	-2

Metric 3.2 - Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		448	
Emergency Shelter Total		179	
Safe Haven Total		0	
Transitional Housing Total		289	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		131	
Number of adults with increased earned income		9	
Percentage of adults who increased earned income		7%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		131	
Number of adults with increased non-employment cash income		17	
Percentage of adults who increased non-employment cash income		13%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		131	
Number of adults with increased total income		26	
Percentage of adults who increased total income		20%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		110	
Number of adults who exited with increased earned income		25	
Percentage of adults who increased earned income		23%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		110	
Number of adults who exited with increased non-employment cash income		15	
Percentage of adults who increased non-employment cash income		14%	

Metric 4.6 - Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		110	
Number of adults who exited with increased total income		38	
Percentage of adults who increased total income		35%	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		278277	
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.		23	
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)		278254	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		407	
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.		44	
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.)		363	

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

This Measure is not applicable to CoCs in 2016.

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

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		635	
Of persons above, those who exited to temporary & some institutional destinations		245	
Of the persons above, those who exited to permanent housing destinations		158	
% Successful exits		63%	

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

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		312	
Of the persons above, those who exited to permanent housing destinations		189	
% Successful exits		61%	

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

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		315	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		291	
% Successful exits/retention		92%	

Rock River Homeless Coalition – Policy on Involuntary Separation of Families

The Rock River Homeless Coalition policy on involuntary separation of families is as follows;

- The Rock River Homeless Coalition recognizes that a family unit is selfdefined by the family at time of entrance into coordinated intake, emergency/transitional shelter or permanent housing. This family unit may not be discriminated against based upon any protected class status or marital status per HUD guidance.
- Entities that engage in involuntary separation of families are not eligible to apply for HUD funding through the Continuum of Care.
- Families who are involuntarily separated in a facility funded through the Continuum of Care may call the Homeless Hotline at 844-710-6919 to file a complaint.
- The Continuum of Care Collaborative Applicant will provide training to members on this policy annually.

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Chair Signature