Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

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

For CoC Application Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: MI-519 - Holland/Ottawa County CoC

1A-2. Collaborative Applicant Name: Greater Ottawa County United Way

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Greater Ottawa County United Way

1B. Continuum of Care (CoC) Engagement

Instructions:

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

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members.

Responses should be for the period from 5/1/16 to 4/30/17.

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

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Philanthropic Organizations	Yes	Yes
Fair Housing	Yes	Yes
Community Collaborative	Yes	Yes

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

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

1. The CoC Director and staff attend local community collaboratives in order to solicit opinions from groups not present on CoC but who would offer a unique perspective on meeting the needs of persons experiencing homelessness such as Food Policy Council, community consultants and philanthropic organizations. Information is shared regarding gaps in services. For example, the CoC is establishing new strategies for engaging homeless persons in the planning process based on information gathered at a community collaborative. 2. At public meetings all present have input on strategic planning goals and creating action steps.

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

The CoC is open to any community organization, individual or business interested in membership. The Annual meeting is publicly advertised through social media and other networks encouraging the broader community to attend and join the CoC. Annually, the Director and staff reviews the membership list and reaches out via phone or e-mail to persons or organizations to gauge interest in becoming a member of the CoC. CoC member agencies are asked to recommend homeless or formerly homeless persons to join the CoC. These individuals are given the opportunity to attend regular bi-monthly meetings and invited to participate in CoC-led committees and task forces. The CoC Director also meets regularly with the individual to provide guidance about CoC activities and structure.

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

(limit 1000 characters)

1.On July 28, 2017 all CoC organizations, including those not previously funded, were contacted via e-mail about the availability of funds. Information provided in the message includes the local application, score-sheet and instructions on how to apply. The CoC is open to receiving applications from

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any agency that meets HUD's eligibility criteria. 2.The Allocation and Accountability Committee (AAC) is made up of all CoC agencies not currently requesting funding. The AAC reviews and scores the local applications, hears presentations about each project, and determines priority listing based on the scoring. If a project falls below the locally determined funding threshold the project is rejected.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects.

Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	No
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

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

(1) The CoC distributes funds based on the NOFA from the ESG recipient, MSHDA. The CoC submits quarterly reports to MSHDA; tracking discharge destination, targeting the most in need and length of stay. The CoC participates

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in regional meetings where input is given re: funding decisions, target populations and performance goals.

(2)The CoC collaborates with the Con Plan jurisdictions, MSHDA and the City of Holland. The CoC participates annually in Holland City's "Community Consultation" which is designed to gather input and identify housing priorities. A Holland City staff member attends CoC meetings. The CoC interacts with Holland City and MSHDA staff at least a twice a month. The CoC attends 2 Statewide convenings.

(3) Both MSHDA and the local Con Plan jurisdiction are provided with the annual PIT and HIC data. This is information is utilized in the Con Plan update process. The CoC Director is on the Holland City committee tasked with making recommendations.

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

Center for Women in Transition (CWIT) uses a trauma-informed approach to ensure culturally sensitive service delivery that emphasizes empowerment, principles of harm reduction, and prioritizing survivors' voice and choice. All services are free of charge and voluntary. CWIT adheres to the confidentiality requirements set forth by Michigan law and VAWA that prohibit releasing any identifying information about victims and survivors of domestic and sexual violence without a written, time-limited Release of Information (ROI) signed by the survivor that specifies what information they consent to be released. Once an ROI is in place, CWIT staff can advocate on behalf of survivors by, for example, scheduling appointments with the agency responsible for coordinated entry. CWIT maintains electronic client files on a secured server. In compliance with VAWA, only aggregate demographic information is shared to stakeholders and funding bodies for reporting purposes.

- 1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment. (limit 1,000 characters)
- 1. New Entry Training for volunteers and community members 3 times a year. Topics include: Empowerment and trauma-informed approaches, lethality assessments and safety planning, effects of domestic violence (DV) on children, power/control and the dynamics of DV, serving underserved individuals, and

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Applicant: Holland/Ottawa County Continuum of Care

Project: MI-519 CoC Registration FY2017

legal issues. 2. Michigan Incident Crime Reporting determines DV calls to law enforcement by county. This data shows how widespread DV is locally. Other reputable data sources include: National Coalition Against Domestic Violence and Centers for Disease Control & Prevention. 3. The SPDAT used in the coordinated entry process includes assessing for DV. CWIT uses a research-based lethality assessment and safety planning tools, provides free 911 phones and strategizes how to help keep the victim and children safe depending on the abuser's previous pattern of power/control. Social support mapping is used to identify safe people in the person's life and assist with relocation if necessary.

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

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Michigan State Housing Development Authority	100.00%	Yes-HCV

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

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

N/A

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

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1. The Coordinated Entry has incorporated inclusive language into the intake and procedures. The DV provider partners with Out on the Lakeshore(OOTL), an organization whose mission it is to provide support to the LGBTQ community. OOTL has assisted with conducting an internal needs assessment and form audit to ensure comprehensive, trauma-informed services sensitive to the needs of the LGBTQ population. The main youth provider hires staff reflective of the population, and through specific outreach, case management, and counseling services offered through area LGBT drop-in/service centers. They have partnered with the True Colors Fund to facilitate strategic planning improving the competency of providers and to increase resource allocation for LGBTQ runaway/homeless youth. 2. CoC sponsored training is conducted annually. Individual CoC member agencies conduct internal trainings to ensure equal access. 3. The CoC will implement a CoC-wide anti-discrimination policy by January 2018.

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

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Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders	
Implemented communitywide plans:	
No strategies have been implemented	
Other:(limit 50 characters)	

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1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

1. The local health care facilities (three local hospitals) each have developed agreed upon procedures requiring all persons exiting health care be assigned a discharge planner early in the patients stay in the health care facility in order to be assured safe housing on discharge. 2. In January 2017 a Community Health Worker (CHW) model was implemented to address basic needs including housing. This collaboration includes hospitals, foundations, mental health providers, public health and 3rd party insurers. The program embeds CHW's in local organizations many of which serve persons experiencing homelessness. The facilities need a better understanding of the available housing. An orientation to the centralized intake and a more systematic use of the coordinated entry process will be offered to the health care facilities in the next 12 months. The CoC will also convene meetings with hospital representatives to ensure patients are not discharged into homelessness.

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

The state of the s	
Foster Care:	x
Health Care:	
Mental Health Care:	х
Correctional Facilities:	
None:	

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

Instructions

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

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

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

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities

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

1. The review and ranking process requires applicants to indicate whether the project will serve a vulnerable population including victims of domestic violence, chronically homeless, homeless youth and veterans. Projects serving vulnerable populations are given priority when determining funding distribution. 2. The local application specifically asks if the project will be serving a vulnerable population(s) and if the applicant has experience serving that population(s). The applicant receives additional points on the score-sheet.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection

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process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

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

Public Posting	
CoC or other Website	X
Email	X
Mail	
Advertising in Local Newspaper(s)	
Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	

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

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

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

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

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

Reallocation: Option 2

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

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1E-5. If the CoC rejected or reduced project 08/18/2017 application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps.

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

1E-5a. Provide the date the CoC notified 08/18/2017 applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps.

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

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

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

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

Page 5 Governance Charter

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

2A-3. What is the name of the HMIS software wendor? Mediware

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

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

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in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	138	11	127	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	221	26	195	100.00%
Rapid Re-Housing (RRH) beds	23	18	5	100.00%
Permanent Supportive Housing (PSH) beds	109	0	109	100.00%
Other Permanent Housing (OPH) beds	398	0	398	100.00%

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

The number of OPH beds was repported in error on the HIC. All OPH beds are in HMIS.

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

2A-7. Enter the date the CoC submitted the 05/01/2017 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)

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

Instructions:

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

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

2B-2. Enter the date the CoC submitted the 05/01/2017 PIT count data in HDX. (mm/dd/yyyy)

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

Instructions:

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

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

N/A

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT No count implementation, including methodology and data quality changes from

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2016 to 2017?

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

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

N/A

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

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

- 1. Homeless youth providers and homeless liaisons are recruited to help identify homeless youth during the PIT. Training is provided on the purpose of the PIT and a youth-focused survey is utilized. 2. The CoC engages these providers because of their knowledge of homeless youth and where they might be located. Stakeholders participate in the training and provide input on the standardized survey.3. The Ending Youth Homelessness work group of the CoC is working on a centralized intake for homeless youth which will increase engagement.
- 2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)
- 1. CoC participating agencies have been trained on the definition of and how to document chronic homelessness. This has resulted in a more accurate count of this population during the PIT. The new Street Outreach program will also be involved in PIT planning and will help identify chronically, unsheltered homeless persons.2. With the implementation of a Veteran focused ROI there is better communication between veteran serving agencies. This has improved the identification of veterans at all times throughout the year. The CoC has included more volunteers and new agencies to assist in the counting of above-mentioned populations. Veteran serving agencies are present at a local soup kitchen to help identify homeless veterans and provide access to resources.

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3A. Continuum of Care (CoC) System Performance

Instructions

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

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

(1) In 2016 26 fewer persons experienced homelessness for the first time than in 2015.(2)Member agencies of the CoC that provide basic services such as food and clothing identify risk factors for first time homelessness such as low income, eviction history and un/under-employment.(3) Households at risk are referred to employment services, financial empowerment programs and the coordinated entry. The coordinated entry process screens for eligibility for prevention services and funds are available through the ESG allocation for homelessness prevention.(4) The agency that operates the Coordinated Entry, along with the CoC Director, is responsible for overseeing the CoC's work to reduce first time homelessness.

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

(1) The average length of time households in ES, and TH remained homeless in 2016 was 89 days, down from 108 in 2015. (2) The CoC's development of a coordinated entry and the use of standardized assessment tool has helped in making right-sized housing referrals and diverting people from emergency shelter. The CoC has increased resources for rapid re-housing. The CoC has adopted an order of priority for beds dedicated to chronically homeless persons as well as those not dedicated. Shelters are required to refer all clients to the coordinated entry provider within 48 hours.(3) The CoC has adopted the VI-

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SPDAT, a standardized assessment which identifies those households with the greatest barriers. (4)The Coordinated Entry Agency has implemented a policy of housing people within 24 days. The HMIS System Administrator is responsible for tracking and reporting data and the Data Committee recommends strategies for improving outcomes.

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

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

1. There was a decrease from 2015 in persons exiting ES, TH, RRH to permanent housing in 2016 (-13%). Although 2% fewer persons this year than last exited PSH with PH, 96% did exit into permanent housing. 2. The CoC's development of a coordinated entry system, the use of the vulnerability index, SPDAT, and increasing resources for RRH has helped the CoC to make appropriate housing referrals, potentially diverting people from emergency shelter. 3. The CoC will also be implementing an Interagency Services Team to address the needs of specific hard to house individuals and families which will increase collaboration between homeless services providers. 4. The CoC funded agencies are responsible for ensuring placement and retention; the HMIS administrator will provide data.

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

1. 21% returned after 0-6 months; 6% after 6-12 months, 8% after 13-24 months. 2. The CoC has established a coordinated entry allowing for persons at risk to seek additional support or be quickly be identified. Follow-ups are conducted at 3 to 12 month intervals. The CoC has implemented the VI-SPDAT to determine vulnerability. The SPDAT along with case management best practices help make the appropriate referral based on the needs of the household promoting long term housing stability. 3. The CE agency has established a relationship with the district court who refers households facing eviction. The victim service provider explores stable housing options, safety planning, and strengthening social supports. The CoC will implement an Interagency Services Team to address the needs of hard to house people thus increasing agency collaboration. 4. The HMIS Agency Administrators are responsible for reviewing system performance measures and sharing the information with the CoC.

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3A-5. Performance Measures: Job and Income Growth
Describe: (1) the strategies that have been implemented to increase
access to employment and mainstream benefits; (2) how the CoC
program-funded projects have been assisted to implement the strategies;
(3) how the CoC is working with mainstream employment organizations to
help individuals and families increase their cash income; and (4) the
organization or position that is responsible for overseeing the CoC's
strategy to increase job and income growth from employment, nonemployment including mainstream benefits.
(limit 1000 characters)

1.The CoC has a strong relationship with the primary employment organization, Michigan Works!, and with Michigan Rehabilitation Services. All CoC funded organizations regularly refer project participants to one or both of these organizations. Participants create strength-based plans to increase income. 2. SOAR is available for CoC-funded project participants. Agencies receive job notifications from temp agencies as well as hiring information from several local companies. Advocates assist clients in gaining access to child care and transportation services. To remove barriers to employment, clients receive help with education, training enrollment, program fees and assistance with securing documentation. 3. CoC –funded agencies utilize what is referred to by the HUD Office of Policy Development as smoothing mechanisms by participating in networking opportunities improving knowledge of existing resources. 4. CoC funded programs are responsible for increasing income and employment.

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

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

3A-7. Enter the date the CoC submitted the 05/31/2017 System Performance Measures data in HDX, which included the data quality section for FY 2016.

(mm/dd/yyyy)

MI-519

Project: MI-519 CoC Registration FY2017

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

Instructions

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

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	15	41	26

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

Total number of beds dedicated as Dedicated Plus	2
Total number of beds dedicated to individuals and families experiencing chronic homelessness	39
Total	41

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

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

History of or Vulnerability to Victimization	X
Number of previous homeless episodes	X

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Unsheltered homelessness	X
Criminal History	X
Bad credit or rental history (including not having been a leaseholder)	X
Head of Household with Mental/Physical Disability	X

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

1. DHHS pays for shelter night stays and requires that people entering shelter be referred to the coordinated entry agency within 48 hours. The coordinated entry agency uses the SPDAT index to identify the appropriate referrals for families experiencing homelessness. The victim service provider uses intensive case management to connect survivors of domestic violence with housing needs to local housing providers. 2. Day 2-10: Initial intake, determine eligibility for RRH or PSH, finalize motel voucher; Day 11-30: Secure documentation, locate housing, engage a case manager, volunteer coordinator and educator to coordinate move-in. Day 16-30: Finalize housing requirements. 3. These strategies have resulted in a 88% success rate with 99% of households coming from shelter or the street. 4. The Coordinated Entry Agency is responsible for the largest rapid-re-housing and the CoC Director ensures the other programs rehouse families as quickly as possible.

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	2	5	3

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

(limit 1000 characters)

All CoC and ESG funded projects operate under HUD established antidiscrimination policies and do not separate families. The CoC memebr agencies prioritize trainings that focus on diversity and inclusion. Most recently, in January 2017, agencies participated in a webinar entitled Equal Access and Gender Identity Rules Training provided through HUD, which helped the staff

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recognize and encourage inclusive and appropriate language with all clients served. Based on the materials provided in that webinar, Intake and Eligibility staff and Housing Case Managers have incorporated inclusive language into intake and ongoing procedures. Agencies partner with local advocates for LGBT persons. In order to address the lack of an established policy the CoC will form a task force to look at current practices and make recommendations. The CoC will develop an anti-discrimination policy by January 2018.

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

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

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

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
Number of Previous Homeless Episodes	X
Unsheltered Homelessness	X
Criminal History	X
Bad Credit or Rental History	X

- 3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC's efforts. (limit 1500 characters)
- 1. The CoC was able to secure additional funding through the ESG program for Street Outreach which will increase services available to homeless youth. The CoC is in the process of implementing a component of coordinated entry for homeless youth. Financial assistance is available for homeless youth ages 18-24 and street outreach will allow for engagement. Street Outreach is a new program but it is designed following best practices for engaging homeless youth. 2. Currently, the CoC tracks numbers of homeless youth and successful

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housing placement but this is not a comprehensive measure. Because this a unique and vulnerable population engagement should be measured as well.

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

(1) The McKinney-Vento grant coordinator is a member of the CoC and is the contact person between the state coordinator and the districts as well as local agencies. The Grant coordinator is the chair of the Ending Youth Homelessness strategic work group. (2) The CoC has a Collaborative Community Partner Agreement in place establishing a commitment to address the needs of children experiencing homelessness. (3) The grant coordinator holds quarterly meetings at the OAISD for the district homeless liaisons and invites at least one local agency to attend/present about homeless services. The grant coordinator speaks with local liaisons on a daily basis. She developed the website: http://www.livebinders.com/play/play?id=1490432 to disseminate information to liaisons, community partners and parents.

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

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

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

(limit 1000 characters)

All CoC –funded member agencies as well as other housing service providers

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and programs gather the HUD universal data elements which identify veterans at intake. Trained Call-211 intake workers request military service status and make referrals based on housing needs to veteran specific resources. The SSVF provider is an active member of the CoC and other housing service providers refer veterans to those services. The VA Trust Fund has representatives in the county and the VA services officers have office hours. Representatives are available to CoC member agencies interested in learning more about available services. The SPDAT is used at intake to identify appropriate resources and services. The CoC also manages a by-name list of veterans experiencing homelessness and reports on successful housing placements on a monthly basis. A veteran specific release of information allows for direct referrals to the SSVF provider and the Dept, of Veterans Affairs.

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

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

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

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

Instructions:

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

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

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

4A-1a. Mainstream Benefits

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

1. CoC agencies partner with local philanthropic organizations to supplement CoC funding and ultimately increase participants' involvement in mainstream benefits. CoC programming is is also supported by MSHDA, Medicaid and a local Mental Health Millage. 2. Housing Specialists and key staff are trained in resource referral and attend collaborative meetings of area agencies to keep up to date on programming and services. The coordinated entry agency also publishes an index of community resources in Ottawa/Allegan Counties, Michigan, that serves as a tool for connection and collaboration that can be used to best serve our community. The CoC encourages all members to have staff trained in SOAR. CMH has a 1.FTE MDHHS Eligibility Specialist at their office monitoring benefit applications and coordinates annual applications. The CoC meetings set aside times for announcements from member agencies. 3.

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The HMIS System Administrator is responsible for tracking performance measures.

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

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	6.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	6.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	100.00%

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

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	6.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	6.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	100.00%

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

1.The CoC is providing street outreach services to all residents of Ottawa County. Street outreach services entail: engagement-establishing rapport and building relationships with individuals experiencing homelessness; case management-providing assistance in obtaining affordable housing; and working with local housing and housing-related service providers to both identify and address the needs of homeless individuals.2.One FTE is dedicated to daily street outreach services. 3.Best practices shows that consistently visiting locations where known individuals/families struggling with homelessness tend to gather is key to reaching most people. Therefore, visits to known locations are scheduled several times each week/month to attend. Staff will utilize technology as appropriate when engaging clientele. Staff is bi-lingual and will collaborate with local agencies such as those focusing on vulnerable sub-populations is an important strategy to meet other special needs.

4A-5. Affirmative Outreach Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive

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services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach. Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

1. The CoC affirmatively markets housing and supportive services by posting links to the coordinated entry process on their websites and social media. Call-211 is updated on a regular basis to include the most current information about the assessment process and program eligibility. Other methods utilized include but are not limited to: press releases, Case Coordinator meetings, community presentations, bathroom stall advertising, and community events. 2. The CoC requires equal access for all households and individuals in housing crisis which includes providing materials in languages other than English and as able agencies will engage staff and volunteers fluent in languages other than English. CoC funded agencies must provide auxiliary aids (such as Braille) to ensure effective communication. If any condition impeding access to fair housing is encountered CoC members contact the local fair housing agency and the jurisdiction in which the impediment was identified.

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

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	18	23	5

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

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statues who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3).

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4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	Letter to Rejecte	09/15/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	MI-519 Rating and	09/27/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	MI-519 Rating and	09/27/2017
05. CoCs Process for Reallocating	Yes	Reallocation	09/20/2017
06. CoC's Governance Charter	Yes	CoC Governance Ch	09/15/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies and	09/15/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Homeless Pref	09/25/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No		
11. CoC Written Standards for Order of Priority	No	Order of Priority	09/15/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	System Performanc	09/15/2017
14. Other	No	Evidence of Accep	09/22/2017
15. Other	No		

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Attachment Details

Document Description: Letter to Rejected Projects

Attachment Details

Document Description: Public Posting Notice

Attachment Details

Document Description: MI-519 Rating and Review Procedure

Attachment Details

Document Description: MI-519 Rating and Review Public Posting

Attachment Details

Document Description: Reallocation

Attachment Details

Document Description: CoC Governance Charter

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Attachment Details

Document Description: HMIS Policies and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description:

Attachment Details

Document Description: Order of Priority

Attachment Details

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Document Description:

Attachment Details

Document Description: System Performance Measures

MI-519

Attachment Details

Document Description: Evidence of Acceptance

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated	
1A. Identification	08/28/2017	
1B. Engagement	Please Complete	
1C. Coordination	09/22/2017	
1D. Discharge Planning	09/26/2017	
1E. Project Review	09/22/2017	
2A. HMIS Implementation	09/27/2017	
2B. PIT Count	09/22/2017	
2C. Sheltered Data - Methods	09/26/2017	
3A. System Performance	09/26/2017	
3B. Performance and Strategic Planning	09/26/2017	
4A. Mainstream Benefits and Additional Policies	09/26/2017	
4B. Attachments	Please Complete	

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Submission Summary

No Input Required



August 21, 2017

Jody Immink Good Samaritan Ministries 513 E. 8th Street Holland, MI 49423

Dear Jody:

On behalf of the Lakeshore Housing Alliance, I am pleased to inform you that the following projects have been reviewed by the Allocation Accountability Committee. If the application has been approved and/or approved and reduced the project will be ranked on the Priority Listing.

Renewal

Permanent Supportive Housing for Chronically Homeless Individuals MI0458L5F191602

1. Approved

2. Approved Amount:

\$34,360

<u>First - Time Renewal Project</u> <u>Rapid Re-Housing for Homeless Families</u> MI0548L5F191600

3. Approved

4. Approved Amount:

\$327,204

Bonus Project

PSH for Chronically Homeless Expansion

5. Approved

6. Approved Amount:

\$59,268

Rejection

New Project

SSO for Coordinated Entry

6. Rejected

The project did not meet the scoring threshold to be considered for reallocation.

As per HUD regulations, Project Applications must be submitted to eSNAPS no later than 30 days prior to the CoC Collaborative Application submission. Please submit your approved project applications on e-SNAPS no later than end of business Monday, August 28.

Lyn Raymond

Director

Lakeshore Housing Alliance

2017 HDX Competition Report PIT Count Data for MI-519 - Holland/Ottawa County CoC

Total Population PIT Count Data

		2016 PIT	2017 PIT
Total Sheltered and Unsh	eltered Count	261	258
	Emergency Shelter Total	117	103
	Safe Haven Total	0	0
	Transitional Housing Total	140	147
Total Sheltered Count		257	250
Total Unsheltered Count		4	8

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	9	4
Sheltered Count of Chronically Homeless Persons	6	3
Unsheltered Count of Chronically Homeless Persons	3	1

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	46	45
Sheltered Count of Homeless Households with Children	46	45
Unsheltered Count of Homeless Households with Children	0	0

Homeless Veteran PIT Counts

	2011	2016	2017
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	6	8	2
Sheltered Count of Homeless Veterans	6	8	2
Unsheltered Count of Homeless Veterans	0	0	0

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2017 HDX Competition Report HIC Data for MI-519 - Holland/Ottawa County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2017 HIC	Total Beds in 2017 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	138	11	127	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	221	26	195	100.00%
Rapid Re-Housing (RRH) Beds	23	18	5	100.00%
Permanent Supportive Housing (PSH) Beds	109	0	109	100.00%
Other Permanent Housing (OPH) Beds	398	0	0	0.00%
Total Beds	889	55	436	52.28%

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	15	63

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

Households with Children	2016 HIC	2017 HIC
RRH units available to serve families on the HIC	3	5

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2017 HDX Competition Report HIC Data for MI-519 - Holland/Ottawa County CoC

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC
RRH beds available to serve all populations on the HIC	25	23

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FY2016 - Performance Measurement Module (Sys PM)

Summary Report for MI-519 - Holland/Ottawa County CoC

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

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

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

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

Measure 1: Length of Time Persons Remain Homeless

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

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

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

FY2016 - Performance Measurement Module (Sys PM)

		Universe (Persons)			iverage LO (bed n	iverage LOT Homeless (bed nights)			Median LO [*] (bed n	4edian LOT Homeless (bed nights)	
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Current FY Difference	Submitted FY2015	Revised FY2015	Current FY Difference	Difference
1.1 Persons in ES and SH	666	666	066	51	51	47	4	27	27	24	ဌာ
1.2 Persons in ES, SH, and TH	1146	1147	1124	108	108	68	-19	38	38	34	4

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This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date. NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Univ (Per	Universe (Persons)	Avera (Average LOT Homeless (bed nights)	neless)	Media (Median LOT Homeless (bed nights)	neless)
	Previous FY	Current FY	Previous FY	Previous FY Current FY Difference Previous FY Current FY Difference	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	1	9/6	1	99			30	
1.2 Persons in ES, SH, and TH	,	1107	ı	117			46	

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Total # of Exited to a Housing D Year	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to	Returns to Homelessness in Less Returns to Homelessness from 6 than 6 Months	ess in Less	Returns to	o Homelessne to 12 Months	ess from 6		Returns to Homelessness from 13 to 24 Months	ness from hs	Number of Returns in 2 Years	f Returns 'ears
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	# of Returns % of Returns	Revised FY2015	# of Returns % of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns # of Returns	# of Returns	% of Returns
Exit was from SO	0	0	0	0		0	0		0	0		0	
Exit was from ES	188	525	45	122	23%	22	36	7%	19	48	%6	206	39%
Exit was from TH	38	62	2	11	18%	2	0	%0	2	m	2%	14	23%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	89	53	7	0	%0	4	0	%0	9	m	%9	٣	%9
TOTAL Returns to Homelessness	294	640	51	133	21%	28	36	%9	27	54	%8	223	35%

Measure 3: Number of Homeless Persons

Metric 3.1 - Change in PIT Counts

FY2016 - Performance Measurement Module (Sys PM)

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

	2015 PIT Count	Most Recent PIT Count	Difference
iniverse: Total PIT Count of sheltered and unsheltered persons	285	261	-24
mergency Shelter Total	137	117	-20
afe Haven Total	0	0	0
ransitional Housing Total	142	140	-5
otal Sheltered Count	279	257	-22
Insheltered Count	9	4	-5

Metric 3.2 - Change in Annual Counts

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	1158	1268		-120
Emergency Shelter Total	966	1121	066	-131
Safe Haven Total	0	0	0	0
Transitional Housing Total	271	248	250	2

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY2015	Revised FY2015	Current FY	Current FY Difference
Universe: Number of adults (system stayers)	45	39	36	'n
Number of adults with increased earned income	0	0	1	
Percentage of adults who increased earned income	%0	%0	3%	3%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	45	39	36	-3
Number of adults with increased non-employment cash income	0	0	80	∞
Percentage of adults who increased non-employment cash income	%0	%0	22%	22%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	45	39	36	£-
Number of adults with increased total income	0	0	œ	œ
Percentage of adults who increased total income	%0	%0	22%	22%

FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 - Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	29	6	12	3
Number of adults who exited with increased earned income	12	0	1	1
Percentage of adults who increased earned income	41%	%0	8%	%8

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

	Submitted FY2015	Revised FY2015	Current FY	Current FY Difference
Universe: Number of adults who exited (system leavers)	29	6	12	ю
Number of adults who exited with increased non-employment cash income	10	S	0	ι
Percentage of adults who increased non-employment cash income	34%	26%	%0	-26%

Metric 4.6 - Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	29	6	12	3
Number of adults who exited with increased total income	21	Ŋ	Ħ	4
Percentage of adults who increased total income	72%	26%	8%	-47%

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1020	1020	1047	27
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.	240	274	277	8
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)	780	746	770	24

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1129	1129	1090	-39
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.	280	315	302	-13
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.)	849	814	788	-26

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FY2016 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in the FY2016 Resubmission reporting period.

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

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

	Submitted FY 2015	Revised FY2015	Current FY	Current FY Difference
Universe: Persons who exit Street Outreach	0	0	0	0
Of persons above, those who exited to temporary & some institutional destinations	0	0	0	0
Of the persons above, those who exited to permanent housing destinations	0	0	0	0
% Successful exits				

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

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FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	1062	1062	919	-143
Of the persons above, those who exited to permanent housing destinations	674	674	462	-212
% Successful exits	63%	63%	20%	-13%

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	96	95	124	29
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	45	93	119	56
% Successful exits/retention	%86	%86	%96	-5%

2017 HDX Competition Report FY2016 - SysPM Data Quality MI-519 - Holland/Ottawa County CoC

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

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

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

2017 HDX Competition Report FY2016 - SysPM Data Quality

		All ES	All ES, SH			All TH	E			All PSH, OPH	I, OPH			All RRH	RH		¥	All Street Outreach	Outre	ch
	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014-	2015-	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016	2012- 2013	2013- 2014	2014- 2015	2015- 2016
1. Number of non- DV Beds on HIC	138	140	142	127	148	145	173	170	105	106	276	220	œ	Ŋ		52				
2. Number of HMIS Beds	138	140	142	127	144	145	173	160	66	106	273	215	∞	ľ		25				
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00 100.00 100.00 100.00	100.00	97.30	100.00 100.00		94.12	94.29	100.00	98.91	97.73	100.00 100.00	100.00		100.00				
4. Unduplicated Persons Served (HMIS)	552	1117	886	976	163	231	268	247	106	122	107	130	0	18	91	84				
5. Total Leavers (HMIS)	435	1015	894	846	53	124	174	137	2	35	18	27	0	18	91	48				
6. Destination of Don't Know, Refused, or Missing (HMIS)	43	150	102	82	м	13	10	6	п	m	0	m	0	0	0	0				
7. Destination Error Rate (%)	68.6	14.78	11.41	69.6	5.66	10.48	5.75	6.57	20.00	8.57	0.00	11.11		0.00	0.00	00.00				

2017 HDX Competition Report Submission and Count Dates for MI-519 - Holland/Ottawa County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2017 PIT Count	1/25/2017	

Report Submission Date in HDX

	Submitted On	Met Deadline
2017 PIT Count Submittal Date	4/28/2017	Yes
2017 HIC Count Submittal Date	4/28/2017	Yes
2016 System PM Submittal Date	5/31/2017	Yes