

1A. Continuum of Care (CoC) Identification

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

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

1A-1. CoC Name and Number: MN-502 - Rochester/Southeast Minnesota CoC

1A-2. Collaborative Applicant Name: Institute for Community Alliances

1A-3. CoC Designation: CA

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

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	

In the chart below for the period from May 1, 2022 to April 30, 2023:

1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:

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

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

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

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

(limit 2,500 characters)

1) The CoC invited new members year-round via postings on CoC website (bottom of every page) and at CoC member organizations, and via listserv each month as part of the CoC’s public meeting announcements. A formal annual invitation to CoC membership and CoC working committees occurred in October. During the annual formal invitation, the CoC Executive Committee led efforts by presenting the activities and goals of each committee and distributing an invitation for posting within all county-level homeless response team networks. The Committee and CoC staff also conducted outreach directly to groups and populations not well-represented within CoC decision-making during the formal request period.

2) Member invitations and member agreements, including code of conduct and anti-discrimination policy, can be accessed and completed online by any prospective member on the CoC website. Sign-up for CoC listserv is automatic for members. Meeting materials were posted on the CoC website and listserv invitations were distributed prior to meetings in accessibility-enabled PDF format, including information about requesting ADA accommodations for participation in CoC activities. Detail about accessibility for virtual CoC activities (live captioning and visible speakers) and in-person activities (site accessibility) is on the website and all listserv invites.

3) The CoC’s open invitation for membership was distributed directly to the Diversity Coalitions in the region, culturally specific service providers, student-led LGBTQ+ groups, Centers for Independent Living (disability services), and Area Agencies on Aging. The list of contacts for direct outreach is updated each year with guidance from CoC Committees and Lived Experience Working Group.

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

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

(limit 2,500 characters)

1. The CoC intentionally sought knowledge and opinions on homelessness from a broad range of persons in regular CoC activities, needs assessment, and prioritization processes. In the past 12 months, over 80 organizations and individuals participated in CoC activities. All CoC meetings are open to the public and anyone can join the email listserv. The CoC directly solicited input via survey from service providers, planning jurisdictions, community members, and persons with lived experience during its annual needs assessment, as well as year-round communication from county-level Homeless Response Teams. The CoC conducted public meetings advertised via website, listserv, and other public meetings to discuss needs data, upcoming opportunities, and priorities for CoC action. The needs assessment was updated in January 2023, with priority-setting activities in February-March. The assessment and resulting CoC priorities were posted on the CoC webpage.
2. A meeting schedule is always publicly posted on the CoC webpage, along with agendas and materials, information on stipends for people with lived experience, and what to expect in a CoC meeting. All Full CoC meetings were announced via CoC listserv, with links to the website resources. Meeting announcements also identified special topics and opportunities for input throughout the year.
- 3) All in-person CoC activities were held in physically accessible spaces. Virtual meeting activities included live captioning and visible speakers to assist people with hearing loss. Meeting materials and invitations were distributed prior to the meeting in accessibility-enabled PDF format and included information about requesting ADA accommodations for participation in CoC activities. CoC staff reviewed all documents for clear image descriptions and appropriate reading order is for people using screen readers.
- 4) Information gathered at public CoC meetings and via surveys informed changes to CoC Coordinated Entry procedures, priorities for types of new projects to be funded, and key tasks for committees in 2023. Committees generated policies that were introduced and posted for public review before a full CoC vote. Voting was open to all participants (except in funding decisions and approval of the CoC Collaborative Application, where previous attendance is required). Participation was especially encouraged during priority-setting for funding and the CoC’s annual work plan.

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

(limit 2,500 characters)

1. The CoC's 2023 Call for New Projects was issued on 7/17/23 via CoC listserv and posting on the CoC webpage. It was also sent directly to membership groups that may have interest, including Violence Free Minnesota (DV Coalition), statewide homeless coalition, and human services directors. The Call for Projects specifically invited applications from agencies that have not received CoC Program funding and identified supports available for applicants.
2. The CoC's Call for New Projects on 7/17/23 described the Local Competition process, timelines, and application materials. Process details included both Local Competition materials collected by the CoC directly and e-snaps processes. Timelines detailed the dates for intent to apply, initial project submittal for review, applicant notifications, and final e-snaps submissions. A checklist of application materials and links to HUD and CoC guides were included to assist applicants. The Call for Projects also invited participation in webinars for new project applicants, office hours with CoC staff, and virtual lab time to help with e-snaps applications.
3. The CoC published its 2023 priorities for new projects on the CoC webpage and distributed it via the CoC listserv in April 2023 to encourage early preparation for applicants. The CoC issued its formal Call for Projects on 7/17/23 with detail on eligible project types, bonus funding from the NOFO, and CoC rating criteria for projects. The CoC requires notice of intent to apply to ensure new projects propose eligible applicants, activities, and participants. Qualified projects were invited to submit a full application in e-snaps with supplemental Local Competition materials by 8/23/23. All projects submitted by that date were reviewed using the CoC's published criteria.
4. The CoC followed guidance from the MN Disability Council to ensure documents are readable and meetings accessible. This includes the use of headings, lists, meaningful hyperlinks, simple tables, alternative text for images, and use of accessible PDFs. Information about ADA accommodation for participation in CoC activities is included on all meeting invitations. Applicant webinars are recorded with subtitles enabled, and slides and notes from project applicant webinars are posted on the CoC webpage within 72 hours.

1C. Coordination and Engagement

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

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Nonexistent
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	No
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

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

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

(limit 2,500 characters)

1. The CoC consulted with the one ESG recipient in the CoC region (State of Minnesota) to plan and allocate ESG funds through a series of public meetings and open comment periods. ESG Recipient staff joined a CoC meeting to seek input on ESG priorities for competitive funding and CoC members participated in reviewing subrecipient applications. ESG funds targeted street outreach and emergency shelters, rapid rehousing services, as well as work to support victim service providers (VSPs) to submit HUD-compliant reports and develop long-term solutions for VSP data management.
2. The CoC participated in evaluating performance of subrecipients by reviewing project applications and by coordinating on statewide HMIS Quarterly Data Quality checks for subrecipients. During application, CoC reviewers provided input on performance, participation in Coordinated Entry, and match with current needs and priorities. In HMIS Quarterly Data Quality checks, the CoC and ESG recipient often identify other areas where performance can be supported, which in turn affects the data reported by subrecipients. Specific to the ESG recipient, the CoC helped evaluate the direct recipient by providing comment during updates of Con Plan priorities and efforts.
3. The CoC publicly posted its PIT and HIC data to the CoC website, as well as its annual Needs Assessment and project priorities. Con Plan jurisdictions and ESG recipients were notified by email at the time of posting these resources. Additional breakdowns of data were distributed upon request.
- 4) The CoC posted to its website all reports submitted to HUD as well as the CoC's own annual updates on needs and gaps and occasional data reports on populations of interest, such as older adults, youth, persons who are unsheltered, or adults with severe mental illness who experience homelessness. Each time a report is posted, Con Plan jurisdiction staff were notified by email. The CoC also maintains always-available access to several public dashboards via the statewide HMIS Lead Agency with information on Coordinated Entry and other data via its website for use by Con Plan jurisdictions and other partners.

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

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

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

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

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

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

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

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

(limit 2,500 characters)

State Education Agency partnership:

The CoC, with all the MN CoCs, entered into a new Collaborative Agreement with the MN Dept. of Education (MDE) in September 2022. This agreement outlines the roles of CoCs and MDE and our collaborative efforts in ensuring that families and youth experiencing homelessness are informed of their rights under McKinney Vento and have access to resources they need to be stably housed.

In the agreement, MDE commits to: a) Provide training to CoC Coordinators on how to use MDE aggregate public data on youth experiencing homelessness in Districts and Schools. b) Provide a list of trainings, offered to District and School Homeless Liaisons, to CoC Coordinators. c) Provide to District and School Homeless Liaisons, a list of CoC Coordinators with contact information sortable by county; and encourage Liaisons to communicate and collaborate with their CoC.

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

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

Local Education Agency partnership:

The CoC holds a formal agreement with Rochester Public Schools to develop a Youth Homelessness Demonstration Project proposal. In the agreement, both agencies agree to commit staff time to the development of the next YHDP application and implementation (if selected). A key task of RPS is to include CoC staff in regional homeless liaisons meetings facilitated by RPS, while the CoC commits to provide regular information on planning and funding opportunities as well as projects to the liaison group.

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

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

(limit 2,500 characters)

The CoC adopted an Education for Children & Youth Policy in September 2017. The policy of the CoC is to ensure that households with children, including unaccompanied youth, are identified, informed of available educational rights and resources, and supported to access educational services available to them. The policy applies to housing projects as well as to Coordinated Entry access points, with higher expectations for housing projects with long-term engagement with children and youth. As such, programs that serve households with children (including unaccompanied youth), must ensure and document that they:

- 1) Collaborate with local education agencies to assist in the identification of homeless families as well as informing these homeless families and youth of their eligibility for McKinney-Vento education services.
- 2) Consider the educational needs of children when families are placed in emergency or transitional shelter and, to the maximum extent practicable, place families with children as close to possible to their school of origin so as not to disrupt the children’s education.
- 3) Establish policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness.
- 4) Designate a lead staff person to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney- Vento education services.
- 5) Measure and document outcomes in education access and participation for children, youth and families in the housing program. Housing projects must document collaboration with local education agencies in Memorandums of Understanding (MOUs) or Community Partner Agreements. The CoC, HUD, SEA, or LEAs may monitor projects for compliance with this requirement. Projects seeking CoC funding are required to provide documentation on K-12 and early childhood education access for review before project rating and ranking.

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

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

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

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

	1C-5. Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaboration with Federally Funded Programs and Victim Service Providers. NOFO Section V.B.1.e.
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In the chart below select yes or no for the organizations your CoC collaborates with:

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

	1C-5a. Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. NOFO Section V.B.1.e.	
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Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

	1. update CoC-wide policies; and 2. ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.	
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(limit 2,500 characters)

1. Local Victim Service Providers (VSPs) are active in CoC decision-making, including updates on CoC-wide policies. A VSP (and ESG funding recipient) is currently Co-Chair of the Coordinated Entry (CE) Committee, with responsibility to lead the group in updating CoC policies and procedures that affect access to, and quality of housing and services needed by survivors of domestic violence, dating violence, sexual assault, or stalking, whether they are served by VSPs or Homeless Service Providers (HSPs). Other VSPs, including youth Safe Harbor providers, also participate in CoC decision-making committees, which are responsible for reviewing and updating CoC policies related to training, child/youth services, anti-discrimination, and other areas. All CoC policies are scheduled to be reviewed at least every three years.

2. The CoC works closely with local victim service providers and statewide domestic violence advocacy groups like Violence Free Minnesota to train at least annually on best practices in serving survivors for both project staff and Coordinated Entry (CE) staff. The training topics vary to address unique needs of subpopulations. Many trainings are incorporated into the regular CoC meetings and CE Provider meetings to encourage participation in both education and decision-making, and to meet staff where they are already gathered. CE Provider meetings include ESG and CoC recipients as well as providers with other funding. Annual training for CE assessors, navigators, and housing providers covers trauma-informed and victim/survivor-centered service expectations throughout interactions with the survivor. Beyond local providers, the CoC participates in a statewide working group with Violence Free Minnesota, state ESG recipient, and others to make available core training for all homeless response system providers, including trauma-informed and victim-centered practices. The CoC also consults with Violence Free Minnesota and the MN Office of Justice Programs to provide and increase technical assistance to VSPs on how CoCs work and how to participate in both planning and funding opportunities to increase housing and services that meet the needs of survivors.

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

(limit 2,500 characters)

Under the CoC’s training policy, the CoC ensures regular access to and completion of necessary training for CoC project staff as well as Coordinated Entry (CE) managers, navigators, and assessors. The CoC’s Data & TA Committee leads efforts to implement this policy. The CoC conducts training & planning with victim service providers (VSPs) & homeless service providers (HSPs) to ensure survivors have choices, security, & support to obtain safe housing and services, no matter where they present or what their circumstance. Planning occurs monthly within the CoC CE Committee and Executive Committee, where a VSP serves as chair of the CE Committee. Planning occurs biennially with staff of Violence Free Minnesota and the MN Office of Justice Programs, to address data system coordination and shared training efforts for VSPs and HSPs serving survivors.

Training occurs at least annually on best practices in serving survivors of DV/SA for both project staff and CE staff. Many trainings are incorporated into regular CoC meetings to encourage participation in both CoC education and decision-making, and to meet project staff and Coordinated Entry staff where they are already gathered.

1) For Project Staff, training is provided in 3 ways: monthly CoC meetings, annual CE Recertification training, and monthly CE Provider Meetings. Trainings at CoC meetings occur annually and focus on understanding concepts of providing victim-centered and trauma-informed care as well as CoC policies. Annual CE Recertification training for all staff involved in CE focuses specifically on procedures to implement safety planning, protect victim rights, avoid retraumatization, and restore a sense of safety and choice at all stages of CE. Monthly CE Provider Calls provide space for peer learning and addressing questions from assessors and housing providers, so that providers can learn and adapt practices over time for more trauma-informed and more victim-centered approaches.

2) For CE staff, training is provided in the same 3 ways as for project staff. In addition, since a formal partnership with VSPs was established with DV Bonus funds beginning in 2019, CE staff also participate in VSP-provided internal staff trainings to improve safety practices. VSP-provided training occurs at least quarterly.

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

(limit 2,500 characters)

1. Trauma-informed and victim-centered practices are incorporated into CoC protocols for Coordinated Entry (CE). The CoC plans with Victim Service Providers (VSPs) within the CoC to ensure victim-driven, trauma-informed, and culturally relevant assessment and screening tools, as well as referral policies, procedures, and access points address the physical safety, emotional safety, and privacy/confidentiality needs of survivors. All CE access points, including shelters, follow safety protocols and include safety planning as one of the first steps in CE assessment. At access, safety is assessed & referrals are immediately made to a victim advocate if safety is a concern and the individual/family allows. Regardless of whether a referral is made to a victim advocate, CE assessors assist with safety planning. Planning for safety and housing with survivors focuses on centering the needs of the survivor and supporting them to make choices to meet their needs. Key elements of safety planning include having phone numbers ready, collecting documents, and identifying places to go for self and, if applicable, children and pets. VSP staff and CoC CE navigators also assist survivors to identify possible housing options, including budgeting for housing costs, and to complete an assessment for CE housing if needed.

2. Confidentiality begins at CE access points with a no-wrong-door approach that allows survivors to select a VSP or non-VSP for access. CE assessments are conducted within private spaces with the individuals and do not require HMIS-based data sharing for access to housing. Prioritization within CE for survivors and minor youth occurs via anonymous non-HMIS-based list. Survivors presenting at VSPs are prioritized for housing at VSPs; they are also offered the choice to be on the CE list for prioritization with non-VSP Homeless Service Providers (HSPs). When survivors choose to be considered for referral to HSPs, VSPs refer the household to the non-HMIS CE priority list with a code instead of personally identifying information. When housing openings become available, the VSP contacts the HSP directly (without identification in CE) and provides a warm handoff to the HSPs for move in.

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC uses de-identified aggregate data from several sources: a) HMIS data summarized by county the annual total number of survivors that need housing or services, persons fleeing DV that need housing or services, DV survivors served by CoC programs, and persons fleeing DV served by the CoC. It also provides basic demographics in each category for the CoC (not by county). b) Non-HMIS CoC Coordinated Entry (CE) priority list summarizes the total number of survivors and persons fleeing not in the HMIS-based CE data so a combined total can be calculated. c) Comparable database program data reported in Sage, which can be combined with other CoC grant totals of persons served, demographics, and outcomes. d) Minnesota Statewide Homeless Study data includes in-depth interview and survey data, summarized by region and subpopulation to identify trends and other experiences of survivors.

2. HMIS, non-HMIS CE priority list, and Sage data assist in CoC needs assessment and planning, by allowing the CoC to identify changes in numbers or county locations of survivors and prioritize new projects in response. The CoC also uses this data to evaluate if survivors have other experiences or needs that affect their prioritization in CE (e.g. disability status), if significant household type or racial/ethnic differences exist between survivors and others, and if referrals to DV and non-DV providers are equally effective at connecting people with housing.

When CoC level data is combined with data summaries from the Minnesota Statewide Homeless Study, the CoC can identify other needs that may not be visible within the smaller CoC data set. The CoC reviews all data related to survivors with advocates to contextualize the data and ensure that survivor needs are identified and prioritized effectively in Coordinated Entry as well as in priorities for new projects. When contextualized with input from program staff, differences found between participants in DV programs and other general programs may indicate unique needs of survivors in the region, and help the CoC develop new types of housing and services that respond to survivor needs and preferences.

** nbsp;**

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

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

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

(limit 2,500 characters)

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1) The CoC prioritizes client choice and makes the first open housing opportunity in Coordinated Entry (CE) available to all households, regardless of survivor status. The CoC ensures access to all housing/services for which survivors are eligible by: a) Using a no-wrong door for CE access, with at least one Victim Service Provider (VSP) CE access site in each county, but which allows survivors to access any site and receive support to find/retain housing. The CE Assessment allows households to select geographic preferences and needs for referrals, including being considered for CE referrals in another CoC. b) Maintaining a non-HMIS CE priority list provides access to housing in CE without data sharing requirements of HMIS. It is vital for survivors, minor youth, and individuals unwilling to participate in a statewide database for housing referral. When a housing opening occurs, referrals are made from both the HMIS and non-HMIS lists based on order of priority. c) Prioritizing households with immediate health and safety needs for referral. CE considers immediate health and safety needs, including threat of violence, a high priority in selecting referrals for housing openings. All participants in CE may choose whether to accept referrals without repercussions, so survivors may decline a housing opening if it does not feel safe for them. d) Training assessors and housing providers in responding to the needs of survivors, including providing safe, confidential, and supportive space throughout the process, and using trauma-informed and victim-centered practices in assessment, navigation, and housing.

2) To proactively identify barriers within the homeless response system, the CoC includes VSPs and survivors in CE decision-making and service delivery. The CE Committee includes a VSP seat to drive CE policy and written standards for projects. The regular CE assessment process evaluates access and outcome data specifically for survivors and solicits input from survivors, VSPs, and statewide coalitions on the outcomes reported and experience of survivors so that policy and procedure changes can be made to prevent or eliminate barriers to housing through CE. The CoC also employs navigators to work onsite with VSPs to offer CE assessment and housing planning with survivors. The navigators identify emerging issues to securing housing so that the CoC can respond quickly with training, policy/procedure change, landlord engagement, or other interventions.

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

Note: We believe a question about “ensuring” participation from individuals with broad range of experience is not a reasonable or trauma-informed expectation because it requires significant disclosure on the part of survivors and was only introduced as a question this year. The trust needed to address this question cannot be developed in the 45 days between question instructions being posted and the application being finalized for CoC approval and submittal.

1. The CoC regularly assesses member demographics. In the most recent assessment, survivors broadly defined made up 36% of CoC participants and 29% of CoC leadership (committee chairs/members of Executive Committee). Survivors identified participating in all CoC committees, making decisions on training, Coordinated Entry (CE) practices, standards for housing projects, youth engagement, etc. The CoC provided training for committee members regarding tasks, HUD requirements, CoC expectations for engagement, and participation stipends for persons with lived experience, including survivors. Beyond committees, CoC engaged survivors to share expertise and guide CoC decisions by participating in listening sessions. Sessions were held in safe spaces for participants, including with a victim service provider (VSP). Trusted staff at the VSP invited participation in individual or group conversations, with or without VSP staff/advocate present. VSP and CoC coordinated to train participants (options to participate, types of questions, use of information) and invited involvement beyond the session. Sign-in was anonymous and compensation was provided via gift cards. Survivor feedback was critical to revise CE practices and set written standards for projects. Revisions will be shared with session participants for further guidance or approval before being presented to the CoC.

2. The CoC accounted for survivors’ needs by focusing on developing trust and offering choice in disclosure of lived experiences, identities, and needs. Participants in CoC may provide any name (including pseudonyms), share their pronouns, and receive language assistance as needed. Communication with survivors is based on their preference, including direct contact, contact via an advocate/trusted individual, electronic or in-person only, using a pseudonym, etc. Survivor status disclosure is controlled by the survivor. The CoC will not disclose status of individuals, and data is never reported at a level where any individual may be identified.

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

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

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC reviews its policies, including the anti-discrimination policy, upon feedback from stakeholders or at least every three years. A feedback form is available year-round on the CoC website where policies are posted, and the CoC specifically requests feedback on policies each fall, through announcement in CoC public meetings and by posting on the CoC website. This fall, the request for feedback is also extended to agencies and individuals not currently participating in CoC, but who bring knowledge and personal experience related to the policies. Four local LGBTQ+ led groups have been identified for outreach this year.

2. The CoC assisted providers in developing project-level anti-discrimination policies consistent with the CoC's by a) sharing the CoC's policy template with the CoC Agency Membership agreement, b) providing training for providers on Fair Housing, Equal Access Final Rule, and Gender Identity Final Rule as part of Fair Housing Month, and c) promoting use of the HUD TA-developed Equal Access Self-Assessment for internal planning. CoC assistance in developing and updating policies is available to all CoC projects upon request.

3. The CoC evaluates compliance in two ways: a) Semi-annual Coordinated Entry Committee review of provider compliance and outcomes, which includes review of data on household access, services, and exits as well as any grievances that may have been submitted to the CoC related to providers, and b) annual review prior to the CoC program competition. All renewal and new CoC projects are required to identify that they meet HUD's requirements at the time of review, including the CoC antidiscrimination policy, the Equal Access Final Rule and Gender Identify Final Rule.

4. Noncompliance with CoC antidiscrimination policy is addressed through the CoC's grievance process if an individual or family complainant is involved. Individuals are also advised of their right to report the issue to State and Federal oversight agencies. The CoC will take immediate action to prevent recurrence of noncompliance as well as retaliation toward the complainant. Depending on the severity of the noncompliance, the CoC may provide Technical Assistance, implement a Corrective Action Plan, report the grievance (and retaliation) to program funders, and/or remove project from ranked project list for HUD CoC funding.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Mankato EDA	35%	Yes-Both	Yes
Olmsted County HRA	8%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	

Describe in the field below:

1. steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference--if your CoC only has one PHA within its geographic area, you may respond for the one; or
2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

The CoC's workgroup on PHA partnerships has led CoC strategies to increase use of homeless, coordinated entry (CE), and Move-On preferences by the 30 PHAs in the region. Actions taken for homeless preferences include:

a) Administrative Plan revisions: Both Olmsted HRA (largest PHA) and Mankato EDA (second largest PHA) have adopted and affirmed CE (homeless) preferences in their administrative plans. Each also worked with the CoC to increase vouchers available for use under these preferences and shared their experiences with other PHAs to increase implementation more broadly. Several other HRAs have implemented a new homeless preference specific to project-based vouchers for permanent supportive housing, a model supported by the CoC workgroup for a regional approach.

b) Education and outreach: The CoC has participated with representatives of the HUD Field Office, Minnesota chapter of the National Housing And Redevelopment Authority Organization (NAHRO), and largest local PHAs to share with other PHAs how preferences for homeless/CE can be managed and meet community needs. Several PHAs are now exploring the option and developing plans for upcoming Administrative Plan updates.

c) New rental assistance with preferences: The CoC provided need data and documented commitment to make referrals from CE for PHAs applying for vouchers with homeless preferences. The assistance has resulted in over 120 new housing opportunities through State Housing Trust Fund vouchers with homeless preference and HUD Mainstream Vouchers with preference. The workgroup also encouraged applicants for new vouchers to allow for portability so that homeless households are able to live where they have support networks. Because the new vouchers don't require use of HMIS, the addition of units has affect HMIS bed coverage. The CoC is continuing to with PHAs to participate in HMIS for their units or vouchers that are filled in conjunction with a homeless or CE preferences.

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

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

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	No
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

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

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

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

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

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). NOFO Section V.B.1.g.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program. Not Scored—For Information Only	
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	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA
Mankato EDA
Rice County HRA

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

Name of PHA: Mankato EDA

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

Name of PHA: Rice County HRA

1D. Coordination and Engagement Cont'd

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

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

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

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

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

You must select a response for elements 1 through 4 in question 1D-1.

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

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

You must enter a value for elements 1 and 2 in question 1D-2.

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	
	You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.	
	Describe in the field below:	
	1. how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;	
	2. the list of factors and performance indicators your CoC uses during its evaluation; and	
	3. how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.	

(limit 2,500 characters)

1. Prior to submitting application for CoC project funding, projects must submit their completed Housing First Assessment Tool (developed by HUD TA) along with documentation of all items where they have indicated that they have “Documented” or “Done” it. Documentation includes program/agency policies, tenant screening criteria, lease agreements, and – if a termination has occurred – records documenting efforts to prevent the termination. At competition time, the CoC Project Performance and Review Committee checks documentation provided, and the score is incorporated into the project’s overall rating and ranking. The Committee also identifies if there are inconsistencies in the Assessment Tool responses and project performance outcomes on Housing Stability/Exits. Based on outcomes, the project may advised not to check “Housing First” on their application in e-snaps and may be referred to the Data & TA Committee for performance improvement related to Housing First implementation.

2. Factors the CoC considers in evaluating Housing First are: Program policies, including tenant screening and lease provisions; Training and procedures for staff; Input from clients and CE staff; and Data reported in HMIS. Performance indicators include vacancy rate, days from housing referral to result, rate of unsuccessful referrals, reasons for unsuccessful referrals, and rate and cause of terminations.

3. Regular assessments: a) Program assessments- Project representatives use the HUD Housing First Assessment Tool available on the HUD Exchange website to conduct self-assessments for their programs. They are encouraged to use the Tool any time they make a policy or procedural change, but they may use the tool at any time. b) System assessments are informal touchpoints as part of quarterly system performance checks. During assessment, provider denials of referrals and re-entries to Coordinated Entry (after exit to permanent housing) are reviewed. If apparently eligible households are denied or delayed, or if households are returning to homelessness, CoC staff and CE Committee Chair meets with the provider to identify issues and change practices as needed. Often, issues surface when there is staff turnover. The CoC’s Data & TA committee uses information from the tools and CE performance checks to identify common areas of difficulty or emerging issues and develops training and support activities to help agencies consistently implement Housing First.

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

(limit 2,500 characters)

1-3. Street outreach occurs throughout the whole CoC region, with frequency and activity varying by community. In large cities, outreach occurs at least bi-weekly at libraries, schools, parks, and other known locations to identify, engage, and screen people for housing/services. In smaller communities and rural areas, program staff provide information annually to local service agencies and partners such as law enforcement and respond to specific outreach needs when requested. Specialized outreach also occurs for youth who are experiencing trafficking, making connections online or via posters and resources in key locations such as hotels, highway rest areas, and truck stops. Outreach workers and multiple access points in each county are trained in safety planning, Housing Problem Solving, and in conducting assessments for Coordinated Entry (CE). They help individuals and families complete the assessment when they are ready and at a location where they are most comfortable. They also partner regularly with CE Housing Navigators to locate and support individuals prioritized for a housing opening, but who did not respond to contacts from the housing program or Navigator. This connection has been vital to connect those least likely to access assistance to move into housing, and it is proposed to be expanded through the Special NOFO as capacity of some rural agencies has become strained in the past two years.

4. To reduce barriers to assistance, outreach workers come to people as much as possible, rather than scheduling office appointments that require travel. Outreach also occurs via phone and text when possible and when preferred by persons experiencing homelessness. Beginning upon contract for Special NOFO funding, rural-focused outreach and navigation services will be expanded by one Full Time position in eligible areas where shelter is limited or requires significant travel. Workers receive training in health protocols, trauma-informed person-centered care, motivational interviewing, and unique strategies for youth, veterans, persons with serious mental illness, and other unsheltered homeless persons. Workers access translation services through Language Line and State Services for the Blind/Deaf to facilitate written and verbal communication.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	
	Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC’s geographic area:	

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

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	162	177

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

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

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

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. The CoC shares updates on mainstream benefits programs through its email listserv about once a month and offers 1-2 trainings per year for program staff and for Coordinated Entry staff. Recent resource spotlights include Housing Stabilization Services (HSS, new Medicaid billable service in Minnesota) and Disability Benefits 101 (a state-funded website and support team to help people navigate the benefit and income sources they have). The CoC has acted to maximize mainstream benefits by creating standard assessments as part of Housing Problem Solving (diversion/prevention), Coordinated Entry, and during program participation for mainstream benefits including SNAP, SSI/SSDI, MFIP (TANF), Workforce Center programs, post-foster care supports for youth, community-based mental health services, and more.
2. The CoC guides project staff to MNsure (health insurance exchange) navigators who provide access to health insurance across the region. Through partnership with Housing Resource Coordinators at Counties (a state Olmstead Plan effort), project staff can collaborate to help people with institutional stays or treatment stays access mainstream housing and persons with disabilities identify community-based services beyond homeless-designated housing and service resources. The CoC's HSS workgroup is also promoting use of HSS (Medicaid service) to housing providers and connecting them to technical assistance to become enrolled providers and assist participants in maximizing access to Medicaid.
3. The CoC has offered information sessions with SOAR providers (primarily disability services agencies) in the region to promote SOAR certification with program staff. Several agencies pursued it but found they did not have the volume of clients and SOAR activity to make it financially sustainable or to maintain the high level of knowledge needed to provide SOAR services. As a result, the CoC is instead pursuing partnerships between programs and active SOAR providers as well as connecting directly with the local SSA office to use the vulnerable populations application process for persons in PSH.

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

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

(limit 2,500 characters)

The CoC is investing in many shelter spaces across the region to increase access as well as safety and dignity in shelter. Total year-round ES beds in the CoC have increased from 212 in 2020 to 331 in 2023, with 64% of year-round beds now in non-congregate settings. Additional efforts to increase capacity include:

a) New shelter beds and service models. Using a combination of ARPA, local levy, private dollars, and a new State shelter capital funding source, at least three cities in the CoC are adding shelter spaces for individuals and families, with particular emphasis on private spaces for persons seeking shelter. Projects include a former college campus now providing individual shelter units for larger families, new youth shelter options in the largest city of the CoC, and two combined shelter/service/housing projects for individuals.

b) Improvements to existing shelter spaces. Existing congregate shelters across the CoC sought and received funding from ARPA recipients, State, and private sources to convert congregate spaces to more private spaces, improve ventilation, and purchase personal safety and health equipment for staff, volunteers, and residents. The CoC also supported shelter requests for funding through direct allocation with the region’s congressional delegation.

c) Additional vouchers. Hotel-based shelter remains a resource for non-congregate shelter in the CoC. The CoC partners with MN Dept. of Veterans Affairs to connect veterans to hotel vouchers through the Veterans Temporary Housing Voucher Program (VTEMP) for safe shelter while Minnesota Assistance Council for Veterans provides case management and housing search and placement. The CoC also received shelter vouchers for rural areas of the region under the Special CoC NOFO to expand options for non-congregate shelter in connection with Coordinated Entry access.

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

(limit 2,500 characters)

1. CoC policy is to follow guidelines of the Minnesota Department of Health (MDH). MDH began working more closely with CoCs & homeless service providers as part of the COVID-19 response, and in 2021 was recognized by the CDC foundation as one of three National Centers on Excellence on Public Health & Homelessness. Partnerships are now being extended to address other infectious diseases. The MDH Highly Impacted Settings team has developed COVID-19 policies & procedures for homeless service providers related to testing, case reporting, mitigation strategies, and access to therapeutics. Homeless service providers can access a large supply of free COVID-19 tests, personal protective equipment, and supplies for on-site isolation and quarantine. MDH and local public health agencies also supported free on-site COVID-19 testing and vaccination clinics at homeless settings and provided vaccine incentives to people experiencing homelessness. The CoC actively promotes the MDH policies/procedures and resources, particularly with privately funded shelters.

2. The CoC works closely with the MN Department of Health to build connections between providers and public health agencies to support participant health. Within the CoC region, MDH is continuing many programs started during COVID, including testing and vaccination. MDH now has a permanent team to provide guidance & resources for homeless programs and contracts for COVID vaccine clinics, which homeless setting can request online. CoC has encouraged participation in MDH's Infectious Disease Trusted Messenger Program for people experiencing homelessness, where participants receive education and technical assistance from MDH on how vaccines work, how they were tested, when is your time to get a vaccine, and motivational interview teams to meet people where they are with what they're hearing about vaccines and concerns and move them toward evidence-based practices. The program has expanded beyond COVID to include other vaccine preventable diseases. MDH is implementing a new statewide Syringe Services Program (SSP) for People Experiencing Homelessness, and homeless overdose prevention hubs in the CoC to provide holistic care to people experiencing homelessness who use drugs or are in recovery. CoC has also promoted use of MDH's grant programs to target specific needs for people who are unhoused, including HIV, Hepatitis C, drug overdose risks, and sex trafficking.

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

(limit 2,500 characters)

1. The CoC shared information with providers in partnership with the MN Department of Health (MDH). MDH distributed information on public health measures with homeless service providers via newsletter and quarterly provider webinars, with recent webinars focused on harm reduction and homelessness, and syphilis and homelessness. When things emerge (e.g. MPOX), MDH, CoCs, and MN Interagency Council on Homelessness coordinate on communication. MDH maintains a GovDelivery listserv to share infectious disease information with homeless service providers and other congregate settings and attends meetings with homeless service providers to learn of local public health concerns and share infectious disease updates, such as surveillance data and updated guidance. In communities of higher concern, MDH held regular meetings (e.g., outreach workers, youth shelter providers) to offer guidance and address specific concerns for those settings.

2. The CoC and its HMIS Lead Agency, the Institute for Community Alliances (ICA), partner with MDH to communicate with homeless service providers to prevent disease outbreaks. To enable communication, one staff from the COVID-19 unit at MDH was granted an HMIS read-only license during the pandemic to support the COVID-19 response in homeless service settings. This user searches for people with a known positive COVID-19 case who reported residing in shelter to confirm whether the individual was indeed in shelter during their infectious period. This has helped to identify outbreaks and ensure shelters have the resources they need to respond to cases. Through a community-informed process, ICA also developed a system for information sharing regarding Covid-19 suspected and confirmed cases via HMIS and a report for agencies using HMIS to do vector contact tracing within the system. ICA, MDH, and other public health entities also partnered in a limited data matching project to track the extent to which people experiencing homelessness are accessing the COVID-19 vaccine. Information from the match is used by MDH to monitor trends and identify disparities in vaccine uptake, and target outreach to underserved sub-populations. This partnership began in 2020 and is ongoing.

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

(limit 2,500 characters)

1. The CoC Coordinated Entry System (CE) uses a no-wrong-door approach with multiple access and assessment points in each of the 20 counties of the CoC. This covers 100% of the CoC region.
2. The CoC's CE process is laid out in policies and procedures posted on the CoC website. CE begins with self-reported demographics and immediate health/safety check as part of initial assessment. A CE Entry is created in HMIS or a non-HMIS CE list for those unwilling to use HMIS or who are assessed by a Victim Service Provider. The CoC uses phone-based and onsite interpretation services for persons who speak languages other than English or who are deaf/hard of hearing. In cases when a victim advocate or healthcare support is identified as an immediate need for the individual or family, CE assessment will be sought after the household is safe and stabilized. Once immediate health and safety needs are addressed, CE uses a strengths-based Housing Problem Solving consultation to identify all housing options available and, if possible, avoid entry to shelter or assessment into CE. If no other options are available, the CE assessment is conducted in-person or by phone, using scripting and a short set of eligibility questions for programs available in the CoC. Participants receive confirmation of their placement on the CE priority list as well as a short explanation of how the priority list works and how to update information in their assessment if their housing situation or household size changes. (The CoC uses Case Conferencing to facilitate access to housing after assessment, but not during the assessment process.)
3. CE policies and procedures are updated regularly to respond to changing needs. The CoC CE Provider Group meets monthly to refresh on procedures, problem-solve any emerging issues with access, assessments, or referrals, and make changes to procedures within the bounds of policy. The CE Committee uses surveys, focus groups, and data on CE entries and exits to evaluate the CE policies at least twice annually. Input is gathered from CE providers, CE staff, participants in Coordinated Entry, and the CoC Lived Experience Working Group, with focus on procedural changes in the first half of the year and policy changes in the second half. Policy changes are brought to the Full CoC membership for approval.

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

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

(limit 2,500 characters)

1. To reach people who are least likely to apply for assistance, access sites are advertised in locations frequented by persons experiencing homelessness, including libraries, 24-hour businesses, food/meal sites, and mobile health clinics. CoC staff outreach to agencies that serve persons of color, youth, persons with disabilities, and seniors to ensure that trusted service partners help in reaching those least likely to apply. Street outreach workers and Coordinated Entry (CE) navigators assist persons who may otherwise lose touch with CE, have difficulty documenting eligibility, or need to connect with services to remain safe and stable prior to housing enrollment. Through Case Conferencing, non-CE agencies like law enforcement can also recommend contact with individuals who aren't already connected with CE.
2. CE uses a standardized assessment and published order of priority to prioritize households who have the longest time homeless, have a disability/urgent health condition, are without shelter, and might be excluded from subsidized housing due to background. Assessment data is entered into an HMIS or non-HMIS list and sorted based on priority.
3. Assessors must immediately enter assessments to ensure rapid placement on the CE priority list. Households are prioritized for referral within their preferred geography using Order of Priority. When a housing opening occurs, a household chooses whether to accept the referral without repercussions. Housing providers and CE staff follow procedures to contact prioritized households (multiple attempts within 5 days of receiving referral) and complete the eligibility and move-in process.
4. To reduce burdens on people using CE, the CoC conducts annual review of the assessment and eliminates questions when possible. The CoC also started Housing Problem Solving as a strengths-based first step to find viable housing solutions before CE assessment. To reduce administrative barriers, the CoC proactively contacts households to update records and makes scheduled or non-scheduled assessments available onsite, in office or virtually. CE staff also engage housing providers and funders of affordable housing to remove non-required screening criteria and processes. Through partnership the state Housing Finance Agency, the CoC uses simplified eligibility documentation and tenant screening for PSH, allowing for more rapid move-ins in many projects.

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

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

(limit 2,500 characters)

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	04/15/2023

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC analyzes racial disparities within the homeless response system using an ongoing assessment process. Twice yearly, the CoC Coordinated Entry (CE) Committee reviews six months of HMIS data on CE access, referrals to housing, referrals to navigation, referral outcomes, and CE exits broken down by race, ethnicity, and other priority subpopulations. CoC staff present the data for Committee members to evaluate. CE access by race/ethnicity is compared to data from the Point in Time Count, MN Statewide Homeless Study, and regional Census counts to identify disparities. Disparities at other points in the CE process are identified by comparing to access totals. Annually, the CoC Data & Technical Assistance Committee reviews the previous calendar year HMIS data for both Coordinated Entry and the housing/service programs participating in HMIS, using the approach described above. Along with CE access, referral, and exit, the D&TA Committee reviews program entries, overall participants served, exits from housing, and returns to homelessness, disaggregated by race/ethnicity. Input from and consultation with the CoC Lived Experience Working Group and a biennial community partner agency survey provide context for the data.

2. Through the CoC's assessment process, several disparities in provision or outcomes of homeless assistance have been identified. A few key findings: a) Lack of family shelter beds in Rochester disparately impacts Black/African American households, resulting in Black/African American families with children experiencing unsheltered homelessness at a rate 10x higher than would be expected based on population. b) Compared to White heads of household on the CE list, Black, Indigenous, and other Persons of Color are only 68% as likely to identify having a disability or other severe service need, which affects prioritization for available housing. c) Comparing households on the CE list to those referred for housing, referrals appear equitable (with the caveat of b above), but referral outcomes reveal disparities in housing move-ins that follow referrals, particularly for single adults who identify as Native American/Indigenous or multi-racial. Referrals for these individuals result in housing provider reports of inability to contact referral/no response at a rate nearly 30% higher than reported for single adults identifying as white.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

CoC strategies addressing disparities described in 1D-10a:

a) Disparity in unsheltered homelessness for Black/African American families with children: The CoC is increasing service coordination and family shelter beds in Rochester. CoC agency partners applied for new shelter capital funds from the State to create 20 shelter units for households with children. The partners are also expanding a family and youth focused Homework Starts with Home program. The program engages PHAs, schools, and homeless service providers in Rochester (and other school districts) using school-based teams to assist students experiencing homelessness with rental assistance and coordinated services in and out of school, with the goal of stabilizing housing and supporting student educational outcomes. The program tracks race and ethnicity to ensure that Black/African American children and families are accessing the program, and to adapt outreach strategies as needed if they are not.

b) Disparity in reporting disability/severe service need for Black, Indigenous, and other Persons of Color (BIPOC). To address this, the CoC is updating its approach to Coordinated Entry (CE) case conferencing to identify and personally connect with BIPOC households where updating the participant information in CE would affect priority level for referrals. The CoC is also coordinating with the State Housing Stability Services program (Medicaid service) and Zumbro Valley Medical Society to identify and build relationships with health professionals qualified to document disability status. One promising pathway is ZVMS' doctor training program with Mayo Health System. The program places medical students in shelter settings to provide basic care and could establish build trusting relationships to report severe service needs more accurately.

c) Disparity in successful housing move-ins for single adults who identify as Black/African American or Native American/Indigenous: Because lost contact is the primary reason referrals to housing aren't successful, the CoC is contacting households not yet housed in CE and targeting CE navigation services to individuals least likely to have a successful move-in, including these adults. CoC is also beginning a Special NOFO project with rural capacity building funds to increase representation of Hispanic/Latinx and Black/African American persons in the homeless response workforce and train CE agencies to provide culturally appropriate services from access to exit.

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

(limit 2,500 characters)

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

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

(limit 2,500 characters)

Working in a geographically larger region, the CoC has found that personal invitations and outreach to build relationships are most effective to engage people in CoC and overcome the barriers that come with regional and virtual CoC activities. As a result, the CoC does not focus on social media outreach but instead provides a one-page info sheet used in targeted outreach to engage persons with lived experience in CoC activities, leadership, and decision-making. Targeted outreach occurs through four avenues:

1. CoC members with lived experience. One third of CoC members and 14% of CoC leadership members indicated lived experience of homelessness in the most recent demographic survey. Current members are most effective in outreach because they are peers who can explain the value they find in CoC, how it works, and who is involved.
2. Trusted staff. The CoC requests that staff of homeless response service and housing programs talk with current/recent participants or program advisory committee members about CoC involvement as part of their personal or professional growth goals. Staff provide information and support to engage, virtual or physical access to CoC meetings, introductions to new people, and explanation of roles.
3. Equity Committee listening sessions. When individuals participating in listening sessions express interest in sharing more ideas, leading on a certain topic, or getting involved in a group, the Committee shares information on CoC participation and leadership with the individual and invites them to a CoC event or activity to learn more.
4. Annual request for nominations. The CoC Executive Committee specifically seeks out nominees with lived experience of homelessness for roles as committee members, committee chairs, or ad hoc members of the Executive Committee. Members explain the roles and the support available to help those new to leadership, and they encourage exploring the roles.

Beyond CoC board roles, the CoC ensures that job opportunities related to Coordinated Entry appear in more people's job searches by removing educational requirements and specifically calling out value of lived experience in postings. The CoC is revising subgrantee agreements that affect Coordinated Entry staff at other agencies in a similar way.

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

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.
Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
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1.	Included in the decisionmaking processes related to addressing homelessness.	18	8
2.	Participate on CoC committees, subcommittees, or workgroups.	18	8
3.	Included in the development or revision of your CoC's local competition rating factors.	5	2
4.	Included in the development or revision of your CoC's coordinated entry process.	8	4

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

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

(limit 2,500 characters)

CoC member organizations provide development and employment opportunities for persons with lived experience in several ways:

1. Advisory committees or boards: As part of case management, homeless service providers regularly share opportunities for participants to learn and share experience and knowledge by being part of a committee or board. Types of boards and committees where persons with lived experience are now involved include building resident councils, city/county citizen panels, state agency program advisory groups, and CoC member organization boards.
2. Workforce program partnerships: CoC member organizations have agreements with workforce programs to provide specific job skills classes, help participants prepare for applications and interviews, and identify training programs that help them reach their goals.
3. Speaking engagements: Organizations that often receive requests to speak to community groups have established protocols for including participants with lived experience in the engagement, including training and support for public speaking and participant compensation from the requesting group.
4. Revised job qualifications: Several CoC member organizations with open positions encourage applications from people who have lived experience by reducing/removing educational requirements and preparing for on-the-job training to develop skills.

As a CoC group, professional development and employment opportunities are provided by:

1. Promoting and supporting the MN Coalition for the Homeless conference stipend program. The annual conference provides training and networking opportunities for staff, volunteers, and participants in homeless response throughout the state. Registration, hotel, meals, and transportation are included.
2. Sharing employment training programs and member organizations' current job openings. Through the CoC email listserv, the CoC shares jobs at member organizations, jobs with employers willing to train, and workforce training programs to build skills. Staff and volunteers with organizations use the information to support clients in reaching their employment goals.
3. Deploying Special NOFO rural capacity building funds. The project includes incentives for programs and persons with lived experience to fill roles with rural homeless assistance programs and participate in shared training to build skills and professional networks.

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

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

(limit 2,500 characters)

1. The CoC routinely gathers feedback from people experiencing homelessness or receiving assistance in three ways: a) Every two years, the CoC conducts short surveys with people currently or recently experiencing homelessness to learn about their priorities, needs, and experiences with the homeless response system. Respondents tell us what was most helpful or what would have been most helpful during their housing crisis and whether they felt heard and respected, as well as some basic demographics. b) The CoC's Lived Experience Working Group meets 4 times per year to provide guidance to CoC leadership. The Working Group meets in small local groups across the region and is joined together by Zoom to share their thoughts on any part of CoC activities or goals. c) The CoC Equity Committee conducts focus groups and interviews with individuals and families experiencing homelessness to evaluate personal experiences in the homeless response system. The focus groups will occur at least annually going forward.

2. Participants in CoC and ESG programs are included in the feedback opportunities in #1. The CoC has not assessed experiences of participants in CoC or ESG programs separately from others but can do that in the future. As a practice, the CoC follows its grievance policy regarding how and whether to inform programs of participant input and protect whistleblowers as needed.

3. The CoC recently addressed challenges raised by people with lived experience related to:

a) Long waits for housing openings in Coordinated Entry (CE). The CoC currently has far too few housing openings to meet the needs of households experiencing homelessness. Feedback from the needs surveys confirmed that this is frustrating and scary, and in some cases has resulted in people experiencing serious health and safety risks. People indicated need for supports even if housing wasn't available. In response, the CoC has added Day Shelter with medical services, Housing Problem Solving in CE, and expanded Navigation services.

b) Stipends for participation. In response to concerns about stipends, the CoC increased the stipend budget. The CoC also updated its stipend policy to address technology needs and update the hourly rate. The CoC was not able to accommodate requests to provide cash or gift cards because it would place the lead agency out of compliance with federal Uniform Guidance on accounting practices for nonprofit recipients of federal funds.

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

(limit 2,500 characters)

As part of the CoC's partnership to review projects seeking Low Income Housing Tax Credits and other affordable housing funding through State programs, the CoC regularly engages with city, county, and state governments about barriers to housing. In the 2023 funding round, the CoC supported eight affordable housing development proposals by providing comments and data on experience of homelessness and program safety to city officials, developers, and advocates. (In Minnesota, permanent supportive housing (PSH) is included in many proposals for state affordable housing financing. To block development, local officials often question the need for PSH and local law enforcement recommends strict crime-free housing standards.)

In the past 12 months, the CoC has also consulted with the State Housing Finance Agency to simplify the administrative process of securing affordable housing development funds. Over several meetings and public comment periods, the CoC provided input to state officials on reducing the huge investment of time, forms, certifications, and other documentation needed just to apply for affordable housing financing. The CoC comments focused on retaining CoC consultation within the due diligence phase, so that developers and local officials could focus on fewer projects and better engage on local administrative and regulatory resolutions related to affordable housing development. These changes went into effect during the 2023 funding round.

In other action, the CoC encourages participation by members in local planning, and several CoC individual members and staff are members of their local city, county, or township planning and zoning decision-making body. The CoC and many CoC member agencies are also members of Homes for All, a legislative advocacy coalition in Minnesota. Through the Homes for All Coalition, CoC members contacted and met with state and local policy makers on issues related to increasing affordable housing, addressing homelessness, and reducing land use and regulatory barriers to housing development.

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

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

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

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

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	135
2.	How many renewal projects did your CoC submit?	17
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC collected data already in HMIS or an alternate database to assess successful housing placements over a calendar year. Stability in or Exits to PH: APR questions 5a.8 and 23c were used to calculate the proportion of stayers and leavers to positive destinations vs. total stayers and leavers. Stability after program exit: An HMIS-based report identified returns to homelessness within 12 months of exit from each project. Project outcomes were compared to a desired outcome of >85% stability in or exit to PH and <5% returns to homelessness in 12 months.
2. The CoC Coordinated Entry referral data to identify the median days between date of referral to a program and date of program entry over one calendar year. The median was then compared to a desired outcome of entry within 30 days for PSH and 15 days for RRH/TH to calculate a score.
3. The CoC considered severity of needs and vulnerabilities of participants using a balanced scoring tool and strategic ranking policies. The CoC rating tool scored performance outcomes as well as commitment to serving people with high need/vulnerability and using best practices. For PSH renewal projects, for example, 37% of 135 possible points were objective performance outcomes, 15% were based on percentage of high need populations served, and 22% were related to implementing best practices for Equal Access, Housing First, and promoting self-sufficiency regardless of outcomes. (Specific needs considered were chronic homelessness, disability, fleeing DV, and one of the following: previous incarceration, active substance use, no income, or large families.) CoC Ranking policy also required the Committee assess and adjust ranking if loss of projects in Tier 2 would negatively impact a high need geography or subpopulation.
4. Beyond the considerations in #3, the CoC applied its ranking policy to adjust ranks for two existing projects serving single adults with severe service needs. Based on score, the projects would have been ranked at the bottom of Tier 2. However, the projects are in the highest need area for single adults and losing them would negatively affect access to housing for that population. To prevent that impact, the projects were placed as the last project in Tier 1 and first project in Tier 2.

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

(limit 2,500 characters)

1. The CoC obtained input from persons of different races through membership in the Committee responsible for review, selection and ranking, and membership in the CoC's Lived Experience Working Group. Within the CoC region, people who identify as Black/African American or are overrepresented in the population experiencing homelessness (23% vs. 11% of population in poverty); people who identify as Other/Multi-racial are also overrepresented (7% vs. 4%). Rating factors for project reviews were developed and are revised each year with input from the CoC community. Input received resulted in several changes rating factors for projects: a) Advancing Equity assessment for all projects, b) new project requirement to document involvement of people who experience homelessness in the project plan, and c) points in new project scoring awarded directly by the Lived Experience Working Group.

2. The CoC's Lived Experience Working Group (LEWG) reviewed project goals, approaches, and description of how they involved people with lived experience in project planning. Project descriptions were shared in a focus group setting, where verbal or written input was provided to projects to adjust approaches. The members could also award up to 10 points to the project based on their own experience. The scores per project were averaged and the feedback was provided to applicants as reviewer notes. In the LEWG, 70% identify as persons of color, including 30% identify as Black, African American, or African and 20% as multiple races. The CoC's Review Committee reviewed the full project applications for scoring. The Committee is gathered from CoC membership: 32% of participants have lived experience of homelessness, 14% are persons of color, and 35% have experience with domestic violence, bringing a range of experiences and knowledge to the review process.

3. The CoC rated and ranked projects based on several factors, including applicants' identification of populations experiencing barriers to participation in their program/service, actions taken to address disparities found for specific underserved groups, and actions planned for next 12 months. Five points (4-5% of possible points) were associated with this factor in total project score, which is the primary ranking consideration.

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

(limit 2,500 characters)

1. The CoC competition policies allow project reduction, rejection, and reallocation during project scoring or ranking phases of the local competition. Projects may initiate voluntary reallocation in writing for any reason. Involuntary reallocation is CoC-initiated based on any of 12 performance/project management criteria in the Local Competition Guide (the Guide). Reallocation criteria are applied to similar projects equally, and full or partial reallocation is based on the extent of noncompliance and efforts to resolve issues with noncompliance. The CoC identifies low performance (in outcomes or project management) by reviewing spending/recaptured funds reports, APRs, and project documents, and then scoring based on CoC project standards and reallocation criteria. Geographic areas with less need are clearly identified in the CoC needs assessment data and are not selected as priorities for the competition.
2. All projects met minimum standards for performance (at least 60 of 100 points possible in reviews), so no projects were identified for full reallocation based only on performance. Three projects were identified for involuntary reallocation during project reviews based on a consistent pattern of high vacancy and underutilization of funds. One project offered voluntary partial reallocation, which was accepted by the CoC.
3. The CoC applied partial reallocation to five projects: Hearth SE, Women’s Shelter RRH-TH, SHOR, Cherry Ridge, and The 105. The first three projects received involuntary reallocation based on consistent underspending (20-58% recapture rates) and had been advised to address spending levels in several prior review cycles. Cherry Ridge proposed voluntary reallocation during review, and The 105 voluntarily reallocated a small BLI during application phase to reduce reporting burden.
4. N/A. The CoC reallocated low performing or less needed projects.

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

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

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/10/2023

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/10/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

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

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/26/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	09/26/2023
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2A. Homeless Management Information System (HMIS) Implementation

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

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

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

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

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

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

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

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

(limit 2,500 characters)

1. The CoC and HMIS lead have taken several steps forward in supporting victim service providers are able to meet HUD's comparable database requirements.
 - a) The CoC's HMIS Lead continued to engage with Violence Free Minnesota, working with a position funded through a grant from the Office of Justice Programs (MN Department of Public Safety). This role aims to identify data collection, technology, and privacy barriers for VSPs and evaluate how these barriers may have prevented VSPs from obtaining sufficient funding. This partnership between the statewide coalition and HMIS Lead provides technical guidance for VSPs via Helpdesk as they work to ensure compliance (while maintaining clear separation of client data; VSP data is not in HMIS nor shared with the HMIS lead directly). This will benefit the CoC by continuing to develop partnerships between the HMIS Lead and VSPs.
 - c) To support DV grantees, the CoC consulted with the HUD Field Office to create a statewide cohort of Joint TH/RRH grantees to gather peer support as well as CoC, HUD Field Office, and HMIS Lead support for recipients of this unique project type. While not limited to projects serving survivors of domestic violence, VSPs grantees from the CoC participated in this cohort, which provided a unique opportunity for collaboration, learning, and support to resolve database setup and reporting issues for VSPs.
 - d) The CoC participated with the HUD Field Office and other CoCs in Minnesota to offer a pre-competition "CoC Basics for Victim Service Providers" training. The training covered what is involved with HUD CoC grants (including data and reporting) and what it means to be part of a CoC. The training was well-attended and resulted in new applications from VSPs in the CoC and across the state.
2. VSPs receiving HUD funds are using HUD-compliant comparable databases. Compliant with FY2022 HMIS Data Standards. VSPs without funding for this purpose are not.
3. Yes, the CoC is compliant with the FY2022 HMIS Data Standards.

2A-5. Bed Coverage Rate—Using HIC, HMIS Data—CoC Merger Bonus Points.

NOFO Section V.B.3.c. and V.B.7.

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	331	75	212	82.81%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	221	37	150	81.52%
4. Rapid Re-Housing (RRH) beds	171	0	171	100.00%
5. Permanent Supportive Housing (PSH) beds	293	0	263	89.76%
6. Other Permanent Housing (OPH) beds	909	0	713	78.44%

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

(limit 2,500 characters)

EMERGENCY SHELTER

1. Step(s): Add at least 6 ES beds in HMIS to increase coverage rate to 85% or higher.

2. Implementation: The CoC will assist one program, Connections Shelter (35 beds), to begin reporting in HMIS as it moves from seasonal to year-round shelter. Connections is included in a capital project to include site-based shelter and permanent housing, which will open in 2025. Barring other changes in ES inventory, HMIS participation of this shelter will bring coverage to 96%. The CoC will also engage Von Wald Youth Shelter to encourage use of HMIS for all shelter beds, rather than only required RHY beds. If the Connections project is delayed, this project alone would add 6 beds and bring coverage to 85.2%.

TRANSITIONAL HOUSING

Note: The Competition report for this project type is incorrectly including 37 VSP beds. Current coverage excluding VSP beds is 81.5%.

1. Step(s): Add at least 7 TH beds in HMIS to increase coverage rate to 85% or higher.

2. Implementation: The CoC is assisting Bethlehem Inn TH (18 beds) to participate in HMIS. The agency has completed its agreements and has a user currently in training. Barring other changes in TH inventory, HMIS participation of this program will bring coverage to 91.3%.

OTHER PERMANENT HOUSING

1. Step(s): Add at least 60 OPH beds in HMIS to increase coverage rate to 85% or higher.

2. Implementation: The CoC has added 150 Mankato/Blue Earth County EDA Mainstream Voucher beds and 20 EHV beds in HMIS, which will be reflected in the next Housing Inventory report. Barring other changes in inventory, this change will bring the CoC bed coverage for OPH to 97%.

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

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

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

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

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

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

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. PIT Count planning is led by the CoC’s Data & Technical Assistance Committee, with help from the Youth Committee. The planning occurred during multiple county-level and youth-specific meetings in late 2022 and was consolidated at the CoC level in January 2023. Youth-serving organizations participated in county-level homeless response team meetings across the 20-county area. Programs included homeless youth service programs, McKinney Vento liaisons and other school staff, Alternative Learning Centers, YMCAs, and libraries. Youth were engaged through existing local youth councils, outreach sites, and trusted school staff to guide survey procedures, incentives, and training. Youth also took on leadership roles in planning a youth/student focused resource fair where PIT surveys could be conducted.
2. Using the same types of meetings listed in #1, locations for the count were selected with guidance from youth and youth-serving programs, with priority for locations where youth feel safe and welcome to gather, both for in-school and out-of-school youth. Access to technology, food, personal supplies, and safe hangout space were identified by youth and programs as key considerations. Other locations for outreach were identified with the help of youth, including parks and certain stores/shopping areas. The CoC also partnered directly with youth-serving agencies that participate in Coordinated Entry; together, they conducted targeted outreach to youth known to be experiencing homelessness but who were not counted in another location.
3. Youth experiencing homelessness were not counters in the most recent count. They had more pressing issues of work, school, and figuring out housing arrangements. Other youth not currently experiencing homelessness volunteered as guides for the youth/student resource fair event, while school counselors and others conducted PIT surveys.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
	3. describe how the changes affected your CoC’s PIT count results; or	
	4. state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

1. The CoC made changes prior to the 2022 count, but no substantive changes to methodology or data quality were made to the shelter count between 2022 and 2023 counts.
2. The CoC made changes prior to the 2022 count, but no substantive changes to methodology or data quality were made to the unsheltered count between 2022 and 2023 counts.
3. No changes were made, so changes in results were due to external factors.
4. Not applicable.

2C. System Performance

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

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

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	

In the field below:

1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2.	describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time

(limit 2,500 characters)

1. The CoC used the Minnesota Prevention Assessment Tool (MPAT), developed by the State and TA-provider Abt Associates, to determine risk factors for people experiencing homelessness for the first time. Risk factors identified with the tool include current housing status (e.g. being doubled-up), criminal history, adverse childhood experiences, domestic violence or other major household trauma, recent discharge from an institution, low income, and previous evictions. Discrimination based on race/ethnicity, sexual orientation or gender identity, and familial status are also contributing factors. The most significant risk factors across all households are previous history of homelessness and current housing status, while specific barriers to housing such as history of institutionalization affect certain portions of the population. Low income by itself is not a strong predictor of experiencing homelessness.

2. The CoC uses the data and prioritization capabilities of the MPAT along with a growing network of housing navigators and resources to prevent first time homelessness. County-based Housing Resource Coordinators assist persons in mental health treatment and other group settings to prevent exits to homelessness, and new PATH workers prevent exits to homelessness from institutional settings. The CoC also added a housing program with 30 units specifically to serve persons with mental illness after exit from care facilities to stabilize housing and maintain health. To build diversion capacity, the CoC implemented Housing Problem Solving as a first engagement step at Coordinated Entry (CE) access site (before full CES assessment) to help resolve emerging crises. Partnerships with Legal Aid, County Human Services, and nonprofits using State funded Family Homelessness Prevention & Assistance Program funds have expanded Housing Problem Solving to serve at least 1,500 more households this year.

3. The CoC's Coordinated Entry Committee Chair is responsible to oversee strategy and outcomes for reducing first time homelessness.

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

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

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

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

In the field below:

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

(limit 2,500 characters)

1. The CoC strategy to reduce length of time homeless includes increased prevention/assistance services, targeted Coordinated Entry (CE) Navigation and case conferencing, and additional housing openings in the region. The CoC funds Housing Problem Solving through many sources to make the service available at CE access sites and shelters throughout the region. Housing Problem Solving uses strengths-based assessment, advocacy, and support to connect people directly with other housing options to rapidly enter housing rather than waiting for an opening via CE. In the first year of Housing Problem Solving (HPS), over half of households avoided assessment into CE and shelter stays, and instead accessed other housing. Less than 5% of HPS assisted households returned. For households needing more than HPS, the CoC prioritizes individuals in CE with long periods of homelessness and severe service needs for immediate referral to housing openings. The CoC also uses case conferencing to help CE providers and other community partners work together to help individuals and families access housing quickly. CE Housing Navigators, outreach workers, and Day Center staff also now play a critical role in connecting or reconnecting with individuals with long histories of unsheltered homelessness, building trust, and collecting documents to prove housing eligibility. The CoC also works to expand other housing options by meeting with landlords, supporting community-level landlord mitigation programs, and engaging with more PHAs to use their preferences and partnerships with local service providers to expand access to households experiencing homelessness.
2. Households with the longest length of time homeless are identified via CE assessment and referred to the first available permanent housing opportunity. The CE assessment addresses literal homelessness and doubled up situations to ensure that an individual’s experience of homelessness and housing instability may be considered under several funding programs. For individuals who resist or distrust CE, (and who may not be included in CE lists for referral), outreach workers, Day Center staff or supportive law enforcement partners engage at least weekly. These individuals are acknowledged in CE case conferencing so that connection to housing can be made as soon as individuals are ready.
3. The CoC’s Coordinated Entry Committee Chair is responsible to oversee strategy and outcomes for reducing length of time homeless.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC’s Strategy	
	NOFO Section V.B.5.d.	

	In the field below:
1.	describe your CoC’s strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC’s strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1. CoC strategies to increase exits to permanent housing from temporary locations are to increase a) services devoted to developing viable pathways to permanent housing (PH) and b) housing options available for people when they exit. Because exits to non-permanent locations are rare in TH and RRH, the CoC strategy focus on ES. In ES, exits to homelessness most often occur after short stays at shelters with limited services. In these cases, households often do not have time or support to identify viable paths to stable housing. In response, the CoC is expanding Housing Problem Solving services through COVID emergency rental assistance programs, additional Coordinated Entry navigators and Day Center medical services, and Medicaid Housing Stabilization Services, with a specific focus on shelters. Integrating Medicaid HSS ensures assistance with finding, securing, and maintain housing is available post-COVID. The CoC is also increasing the number of supportive and affordable rental housing units in key markets, using HUD CoC, Stability Vouchers, MN Housing Support, County ARPA funds, Low Income Housing Tax Credits, HOME, and other resources as available. At least 100 new units or vouchers are in the pipeline from these sources.

2. To prevent exits to homelessness from PH, the CoC strategies are to a) increase housing options available at exit and b) provide additional training on Housing First and Harm Reduction.

To increase housing options, the CoC has doubled the number of Move On vouchers available for participants leaving PSH, OPH, or RRH because they no longer need intensive services, but who have long-term affordability needs. Medicaid Housing Stability Services is also now expanding to help eligible participants transition and maintain housing stability after exit from RRH or PSH. The CoC also encourages providers to connect exiting participants to Beyond Backgrounds, a program that provides a financial backstop for landlords who rent to people with poor credit, poor rental history, or previous justice involvement. In training, the CoC is updating its training plan to deliver more targeted Housing First and Harm Reduction training, as well as requirements for training at staff turnover. With rapid staff turnover in the past two years, the need for training has expanded significantly.

3. The CoC's Project Performance & Review Committee Chair is responsible to oversee strategy and outcomes for increasing retention of or exits to permanent housing.

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

(limit 2,500 characters)

1. The CoC regularly reviews a standard Returns to Homelessness report in HMIS, along with client demographic reports and provider input to identify individuals and families who return to homelessness. For households identified within six months of exit to permanent housing (PH), the previous project serving the household is responsible to follow up. After six months, a Coordinated Entry Navigator reaches out to reconnect. While returns to homelessness from short-term shelter and TH remained about the same in the past year, the CoC has seen an increase in returns to homelessness after exit from PH as rapid rent increases occur.
2. CoC strategy to reduce returns to homelessness is different for Emergency Shelter (ES) and PH.
 - a) In exits from ES, returns often occur after short stays at shelters with limited service capacity in communities with very tight rental markets. In these cases, households often do not have time or support to identify viable paths to stable housing. To connect households experiencing homelessness with critical stability resources, the CoC is expanding Housing Problem Solving services through COVID emergency rental assistance programs and Medicaid Housing Stabilization Services. Integrating Medicaid HSS ensures assistance with finding, securing, and maintain housing is available post-COVID. The CoC is also increasing the number of supportive and affordable rental housing units in key markets, using HUD CoC, Stability Vouchers, County ARPA funds, Low Income Housing Tax Credits, HOME, and other resources as available. At least 100 new units or vouchers are in the pipeline from these sources.
 - b) In returns after exit from PH programs, the greatest risk for household returns is unstable income as rents rise rapidly. To respond, the CoC has doubled the number of Move On vouchers available for participants leaving PSH or RRH, but who have long-term affordability needs. Medicaid Housing Stability Services is also now employed to help eligible participants transition and maintain housing stability after exit from RRH or PSH.
3. The CoC's Project Performance & Review Committee Chair is responsible to oversee strategy and outcomes for decreasing returns to homelessness.

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

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

(limit 2,500 characters)

1. CoC strategy to access employment cash sources includes three activities: a) Promoting job resources to ensures that staff and participants know about employment opportunities in their areas. Resources promoted include reputable job boards catering to persons with lived experience of homelessness or with previous justice involvement, short-term or on-the-job training for in-demand jobs, and job fairs and hiring events. The CoC also invites employers to share opportunities, participate in Project Community Connects events, and consider partnering with homeless programs to fill open jobs. The CoC provides template partnership documents between programs and local employment organizations to assist in formalizing agreements. b) Staff retraining/TA is vital due to the rapid staff turnover occurring in the region. Training and TA focuses on helping staff conduct effective assessments with participants to support employment, know employment resources in Minnesota and locally, work toward CoC expectations for increasing income, and record income updates correctly in HMIS. c) Policy and procedures: CoC Coordinated Entry assessments are updated to address employment, education, and literacy, so that many pathways to higher participant income are explored.

2. The CoC works with mainstream employment organizations in a few key ways: a) The CoC partners with State and local workforce development programs to cross train housing providers and workforce development staff. The training helps frontline workforce center staff across the state to better support people experiencing homelessness by connecting with homeless program staff to support participants' employment goals. It also connects homeless program staff to workforce training partners and encourages intentional partnership to support each participant. b) The CoC connects to benefits specialists with the MN Department of Rehabilitation Services to guide participants with disabilities on work or income incentives that exist within SSI/SSDI and other programs that allow people with disabilities to keep benefits, increase income, and save for the future.

3. The CoC's Data & TA Committee Chair is responsible to oversee strategy, outcomes, and training/TA for increasing employment cash income.

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section V.B.5.f.	

In the field below:	
1.	describe your CoC's strategy to access non-employment cash income; and
2.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,500 characters)

1. To increase access to non-employment cash income, the CoC uses a multipronged approach.
 - a) Staff training: Training on mainstream benefits is offered at least annually by the CoC, and other opportunities for training and support are shared broadly with providers. Because about two-thirds of adults in Coordinated Entry identify as having a disabling condition, access to disability benefits is especially emphasized in the training. Key resources for training are Minnesota’s Disability Benefits 101 and Housing Benefits 101.
 - b) Policy and procedures: The CoC requires all CoC programs to screen participants for mainstream benefits, including nonemployment cash income like SSI/SSDI, TANF, and State benefits. Procedures were recently updated to integrate income and benefits assessment into Housing Problem Solving (Diversion/Prevention), Coordinated Entry, and Housing Program annual assessments. TANF for families and General Assistance for individuals are now well utilized and increase incomes by \$200-1000/month depending on household size.
 - c) Program expansion: The CoC has increased use of a State-funded program called Housing Support by nearly 50% in the past 5 years, which provides room/board and non-employment cash income for individuals with disabilities in supportive housing. An additional 40-50 more Housing Support units are currently in planning and development to advance CoC goals.
 - d) Partnerships: The CoC has new working relationships with the local Social Security office to provide vulnerable populations applications at PSH sites and support from staff to submit applications for SSI/SSDI. Partnerships with libraries and schools have placed kiosks for cash and non-cash benefits applications in accessible locations outside of county service buildings. Participants can now access and update their MN Benefits applications securely and receive support if needed to access non-employment cash benefits.
2. The CoC’s Data & TA Committee Chair is responsible to oversee strategy, outcomes, and training/TA for increasing non-employment cash income.

3A. Coordination with Housing and Healthcare

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

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
Mankato Supportiv...	PH-PSH	19	Housing

3A-3. List of Projects.

1. What is the name of the new project? Mankato Supportive Housing

2. Enter the Unique Entity Identifier (UEI): HJJKEGCH1JD8

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 19

5. Select the type of leverage: Housing

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

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

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

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

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

(limit 2,500 characters)

Not applicable. No projects with rehabilitation/new construction are proposed.

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

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

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

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

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

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

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

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

(limit 2,500 characters)

Not applicable. The CoC is not seeking to designated any projects to serve persons experiencing homelessness as defined by other statutes.

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

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

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

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

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

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

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

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

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

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

1.	Enter the number of survivors that need housing or services:	363
2.	Enter the number of survivors your CoC is currently serving:	192
3.	Unmet Need:	171

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

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

(limit 2,500 characters)

1. Survivors needing housing or services: 363 households on the CoC's HMIS and non-HMIS based Coordinated Entry lists over a 12 month period (CY2022) who indicated they were fleeing DV situations - 192 households in non-emergency housing programs during the same 12 month period who had been fleeing DV at entry = 171.
2. Data sources used: CoC HMIS-based Coordinated Entry list (Monitoring report) , CoC non-HMIS based Coordinated Entry list (tabulation of spreadsheet), CoC HMIS Program Data (Core Report, stayers for all housing programs), and VSP comparable database (count of stayers).
- 3.

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

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

Applicant Name
Olmsted County Ho...

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

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

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

1.	Applicant Name	Olmsted County Housing and Redevelopment Authority
2.	Project Name	OCHRA DV RRH
3.	Project Rank on the Priority Listing	3
4.	Unique Entity Identifier (UEI)	GQWAYD787CC8
5.	Amount Requested	\$132,938
6.	Rate of Housing Placement of DV Survivors–Percentage	78%
7.	Rate of Housing Retention of DV Survivors–Percentage	83%

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

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

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

(limit 1,500 characters)

1. Rate of housing placement is calculated two ways: a) 31 referred participants with housing move-in to existing programs / 40 referred participants engaged = 78%. Rate of housing retention: 28 participants completed or stayed in program remaining in PH / 31 participants = 90%. b) 11/13 participants who exited, or 83%, remained in safe housing at least 6 months after exit from program.
2. The second calculation in #1 accounts for exits to and retention of safe housing destinations.
3. Data source: Referral data is from CoC Coordinated Entry referral spreadsheet (referrals made and accepted by program). Program outcome data is from subrecipient WSSC's database, Vela. The agency maintains the HUD-compliant alternative database for its existing Joint Component TH-RRH project to produce reports for HUD and CoC use.

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

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

(limit 2,500 characters)

Note: This project is a partnership. Narrative addresses experience of both the applicant and subrecipient.

1. Upon receiving referrals from Coordinated Entry and programmatic applications within WSSC, staff contacted and notified households of available housing options within 5 days. At application for housing, safety needs were addressed by creating a safety plan, with revisions as needed throughout the housing program. Access to 24-hour domestic violence advocates was available for emergency needs. Current relationships with landlords led to quick connection to permanent housing for households using rapid rehousing. OCHRA has prioritized survivors in longer term voucher programs, which will increase access to permanent housing for participants.
2. WSSC serves survivors of domestic violence as a focal point of the Agency’s mission. Both WSSC and OCHRA receive referrals through Coordinated Entry (CE). WSSC’s CE agreement identified survivors as eligibility criteria for referrals. OCHRA has established preferences for survivors in its voucher programs and coordinated with CE to serve survivors under the Emergency Transfer plan.
3. WSSC assessed service needs at intake using conversation and questionnaires to identify immediate needs, with interpreters available as needed. Ongoing needs for supportive services were identified through regular conversations/meetings to develop a client-led step-by-step service plan.
4. WSSC created service agreements and working relationships with Rochester Public Schools, Workforce Center, Legal Aid of Olmsted County, Health Care Navigators, Chemical Health Supports, and Financial Courses with Catholic Charities. WSSC Advocates worked to meet the identified needs and supports through shared resources in the community.
5. WSSC Supports to provide housing stability began at project enrollment with each household. A housing stability case plan was individualized to household needs but generally includes financial means, addressing and minimizing housing barriers, ideal ongoing housing situation, and opportunities for each household. The WSSC Transitional Housing Advocate met monthly with households to maintain supports and address needs as they came up. Following exit of the program, monthly contact was maintained and continued to be client-led. Six months following exit of program, the need for ongoing support was identified and connections with adequate referrals were made.

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

Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentiality policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. At WSSC, intakes are always completed in a private location away from the main desk. WSSC ensures that childcare is available if there are children in the household. Childcare and Intake can be completed within the same building, supported by WSSC Staff.
2. WSSC Housing Advocates use the VIGOR tool to guide safe housing placements and consider many aspects of safety in housing. The tool reviews location, access to safety services, visibility, locked entrances, floor level, etc. The project has extensive experience in the general practices of safety in one's home, and we learn from the participant the important aspects of safety for them in this process.
3. Housing Advocates are trained Safe at Home Application Assistants. Safe at Home is MN's address confidentiality program allowing a PO Box to be used as a legal address. Housing Advocate will use this as a safety tool during housing search.
4. Project staff receive baseline 5-week training upon hire regarding aspects of Domestic Violence. The agency uses the VIGOR safety planning tool to assist in identifying goals, options, and risks revolving around safety. Housing Advocates are also connected with Safe Housing Alliance, a national organization that provides training and technical assistance at the intersection of Domestic Violence and Homelessness.
- 5.

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

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

(limit 2,500 characters)

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

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

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

(limit 5,000 characters)

Examples of applicant and subrecipient experience using trauma-informed, victim centered approaches include:

1. Prioritizing participant choice: Preferences are established during the housing search phase. Together, the Advocate and Participant talk about needs and wants to document preferences in housing. It remains a fluid document as ongoing safety concerns may affect preferences and exploring housing options has helped to identify other safety needs, including different locations or even specific security resources on site.

2. Establishing and maintaining agency and mutual respect: The project applicant and subrecipient use the term Advocate, as we aim to walk along though and advocate with survivors. The project has also developed transparent program rules for all participants, with input from current/past participants. Advocates have also committed to communication based on factual events to help in resolving conflicts.

3. Providing participants with information on trauma: The project has trained staff on talking to participants about the effects of trauma for themselves and their children. Internal Support Groups have helped participants find ways to talk about trauma, learn from others, and acknowledge that trauma extends beyond individual relationships. Recent topics include self-esteem, power and control, anger management, and healthy relationships. The project also connects participants with external therapy as a resource for learning about and dealing with traumas.

4. Emphasizing participant strengths: At intake, a Housing Advocate completed a strengths assessment with participant, recorded participant-identified goals, and worked to build on those throughout case management. Identifying positive choices the participant has made in the past to be safe has helped participants think through new situations and gain confidence in their ability to identify options that work best for them.

5. Centering cultural responsiveness and inclusivity: Project staff have been trained on Equal Access and anti-discrimination practices on a regular basis, and have been encouraged to identify implicit biases that they may hold. Advocates also help center cultural responsiveness as part of strengths-based coaching by helping participants identify family or cultural practices that reconnect them to their values or people who care about them.

6. Offering variety of opportunities for connection: The project provides both communal and individual living settings, and facilitates internal Support Groups based on different needs and priorities, e.g. parenting. The project also offers opportunities for fun connections like art to create new ways of bonding.

7. Providing support for survivor parenting: The project currently employs a Children’s Advocate and offers support groups for parents. The project also provides childcare that accompanies groups, so parents do not have to worry about children as they attend. Childcare is also provided on a limited basis so parents can keep up with medical needs, make job interviews, and attend court hearings.

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

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

(limit 5,000 characters)

During the year 2022, project staff provided the following services:
 Crisis DV services: Staffed 24-hours a day, 7-days a week by trained advocates, the WSSC Crisis Line provided support and referrals to 5,334 people seeking information about domestic violence. Compassionate and caring advocates were available to talk about current or past situations and provide callers with information about community resources, shelter services, and safety planning.

Coordinated Entry housing navigation: WSSC partnered with the CoC Lead Agency to make CE navigator services available on-site and virtually to assist with eligibility documentation for rapid housing move-ins and to explore other safe housing options in the community.

Housing stability and safety advocacy: WSSC staff provided individual support to 1,778 individuals, including assistance with safety planning, housing options, transportation, and connecting to eligible benefits. Support also includes assistance in completing applications for rental assistance or housing and assessing potential long-term housing options with the participant after the program.

Court advocacy: WSSC Court Advocates provided assistance with criminal and civil court issues, protective orders, and victim impact statements. They worked in partnership with Legal Assistance of Olmsted County, which offered no-cost legal clinics and consultations at WSSC to answer questions about protective orders, family law issues, financial law issues, housing concerns, and other topics as needed.

Direct financial assistance: Relocation, first month rent, deposit assistance, ? Emergency supplies, such as food, clothing, and personal needs; Advocates also provided 768 participants with community referrals for childcare assistance, legal services, housing assistance, financial resources, and other crucial supports.

Children’s services: WSSC Child advocates provided educational and supportive programming for 133 youth on topics such as healthy relationships, dating violence, anger, self-esteem, and communication. They also engaged 116 children in activities like art, music, field trips, and cooking to build relationships and confidence.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(e)		
Describe in the field below examples of how the new project(s) will:		
1.	prioritize placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;	
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasize program participants’ strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;	
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	

6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Going forward, the applicant and subrecipient will deploy trauma-informed, victim centered approaches in several ways:

1. Prioritize participant choice: The project will continue its practice of supporting participants to identify housing preferences and document them during the housing search phase. Together, the Advocate and Participant talk about needs and wants to document preferences in housing and maintain it as a fluid document to be adjusted as safety concerns are identified by participants. The plan will remain flexible to different locations, security resources, and access to supports.
2. Establish and maintain agency and mutual respect: The project will continue to use the term Advocate and train staff to walk along though and advocate with survivors. Transparency and open communication will be prioritized with participants, and any new program guidelines will be provided and available to participants at any time.
3. Provide participants with information on trauma: The project will continue to train staff on talking to participants about the effects of trauma for themselves and their children, if applicable. Small support groups will be a primary tool for helping participants find ways to talk about trauma, learn from others, and acknowledge that trauma extends beyond individual relationships. The project will maintain and grow relationships with trusted external therapists to provide support for participants as they choose to use it.
4. Emphasize participant strengths: At intake, a Housing Advocate will continue to employ a strengths-based assessment with clients, and work to build on those throughout case management. Project staff will seek input from experts and peers in the field to identify new tools to identify strengths in a variety of ways that respond to differences in personality, literacy, physical and mental abilities, etc. so that participants have options in tools.
5. Center cultural responsiveness and inclusivity: At intake and throughout the program, staff will identify with the participant if they have specific beliefs, holidays, views, or practices that they want incorporated into case management. Advocates will support participants to identify the strengths they may possess because of their cultural, spiritual, or family background. Project staff will continue to receive training on Equal Access and anti-discrimination practices at least annually, and will be encouraged to identify implicit biases that they may hold.
6. Offer a variety of opportunities for connection: The project will continue to provide both communal and individual living settings, and facilitate internal Support Groups based on different needs and priorities, e.g. parenting. The project will offer opportunities for fun connections to create new ways of bonding, and starting in fall 2023, the project will establish a formal Advisory Group to guide programming, provide a network of support, and offer new ways for participants to lead and advocate for themselves.
7. Provide support for survivor parenting: The project will ensure that the participant Advocate and Children’s Advocate work together in supporting parents and children in the program. The project will offer support groups for parents as well as childcare so parents can attend. Childcare will also be available on a limited basis for parents with appointments for medical needs, job interviews, court hearings, and other needs.

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

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

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

(limit 2,500 characters)

4B. Attachments Screen For All Application Questions

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

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

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

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	MN-502 HDX Compet...	09/22/2023
3A-1a. Housing Leveraging Commitments	No	MN-502 Housing Le...	09/22/2023
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		