

CoC Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs

This Community Plan is being submitted on behalf of residents and community partners in the River Valleys CoC (Rochester/Southeast Minnesota CoC MN-502) region and includes input and insight from a broad array of stakeholders. Stakeholders include people with lived experience through the CoC members and the Lived Experience Working Group, community non-profit agencies, local government leaders, agencies with expertise in serving Veterans, youth, and victims of domestic violence and trafficking, and healthcare providers with specific interest in responding to needs of people without shelter. The Community Plan is representative and reflective of CoC goals.

This plan details efforts to be undertaken within the CoC region during the years 2023-2026. The plan outlines a focused three-prong strategy for specific populations and operates within the framework of the CoC’s Ten Year Plan 2018-2028.

Action plan summary: Actions proposed in this plan are summarized in three key areas below and respond directly to gaps in connections and housing solutions that were identified in CoC data and community input, and which affect access to housing for people experiencing homelessness in the CoC region. In short, the CoC has identified that it cannot build its way out of the current reality of increasing unsheltered homelessness in the region. Instead, prevention strategies and connective services for those least likely to access housing must be equals components of the CoC strategy to end homelessness.

Prevention	Connections	Housing
Create more housing options for people leaving care or justice settings (e.g. drug court partnerships, behavioral health post-care housing)	Submit CoC project requests: <ul style="list-style-type: none"> Coordinated Entry (CE) HMIS Day Shelter Include rural capacity building request for hiring, training, and support for culturally responsive and trauma-informed services	Submit CoC Project Requests: <ul style="list-style-type: none"> Olmsted County PSH Mayowood PSH HUD Rural RRH (Three Rivers) Rural RRH (CAC Northfield)
Connect children, youth, and families to housing using state-funded Local Homelessness Prevention Aid	Increase coordination between outreach, housing navigation, shelters, and emergency services	Submit project requests to State and local funders to create other affordable and supportive housing
Increase employment and training services to provide choice in housing	Increase health services throughout response system	Increase partnerships with PHAs and landlords to use rent vouchers
Expand eviction prevention clinics & direct assistance	Add year-round shelters and day shelters with services	Expand use of master leasing to overcome housing barriers

Goals:

- **Decrease** the number of people without shelter by 40%
- **Decrease** average days homeless after assessment to <60 days
- **Increase** by 30% the number of housing openings available to people experiencing homelessness each year
- **Strengthen** agency ability to provide trauma-informed and culturally responsive services

P-1. Leveraging Housing Resources

P-1a. Development of new units and creation of housing opportunities

New units and new housing solutions are a major component of CoC strategy to address unsheltered and rural homelessness. With current system capacity, housing opportunities available through Coordinated Entry (CE) can only meet the needs of about 25% of households experiencing homelessness or at risk of homelessness each year in the 20-county region.

Specific to persons with severe service needs in rural areas or experiencing unsheltered homelessness, the CoC has identified the need for over 400 additional housing opportunities each year.

	Persons experiencing unsheltered homelessness	Persons experiencing homelessness in rural areas (13 of 20 counties in CoC)
Need	<ul style="list-style-type: none"> • 372 households per year are known to experience unsheltered homelessness. • 274 (74%) have severe service needs. • Over half (55%) were identified in one county: Olmsted. 	<ul style="list-style-type: none"> • 336 (39%) households per year have severe service needs and experience homelessness that qualifies under paragraphs 1 or 4 of the homeless definition. • Over two thirds (68%) of households are identified in three counties: Rice, Steele, and Goodhue.
Capacity	<ul style="list-style-type: none"> • 432 shelter beds in region. Only 133 (30%) in Olmsted. • 294 housing program openings occur each year in existing PSH, RRH, & TH programs (66 are DV-specific). 	<ul style="list-style-type: none"> • 294 housing program openings occur each year in existing PSH, RRH, & TH programs (66 are DV-specific). • Estimated 71 are in rural counties.
Gap	<ul style="list-style-type: none"> • 144 households each year remain in unsheltered homeless situations or move between sheltered/unsheltered locations due to lack of housing solutions. • Estimated 86 in Olmsted County. 	<ul style="list-style-type: none"> • 265 households each year in rural counties remain in homeless situations due to lack of housing solutions. • Estimated 159 in Rice, Steele, and Goodhue counties.

To meet the gaps identified above, the CoC is pursuing all viable options to create new units and new housing opportunities:

Projects funded/applied for with non-CoC or ESG subsidies

Project Name	Proj. Type	CoC or ESG RA	Other RA	Source, if other RA	% Non-CoC RA
Mayowood Apartments	PSH	0	5	Minnesota Housing Support program (via Olmsted County)	100%
Olmsted County PSH	PSH	4	26	HUD Stability Voucher (Olmsted HRA)	87%
<i>Unsheltered Subtotal</i>		<i>4</i>	<i>31</i>		<i>89%</i>

TRCA HUD Rural RRH	RRH	10	10	HUD Stability Voucher or HCV (Rice County HRA, Red Wing HRA, Owatonna HRA)	50%
CAC Rural RRH	RRH	2	3	HUD Stability Voucher or HCV (Rice County HRA)	60%
Rural Subtotal		12	13		52%
Overall Total		16	44		73%

Other RRH and PSH units being created with non-CoC or ESG resources are described in section P-5.4a. of this document.

P-1b. PHAs committed to pairing vouchers with CoC-funded services and work with the CoC to develop prioritization or preference through CE. Letters attached in *e-snaps*.

- Olmsted County HRA (MN151)
- Mankato EDA (MN063)
- Red Wing HRA (MN090)
- Rice County HRA (MN193)
- Blue Earth County EDA (MN022)
- Owatonna HRA (MN220)

P-1c. Landlord recruitment

1. Current strategy: The CoC and its member agencies recruit landlords to participate in homeless response voucher programs in two key ways: Landlord informational meetings and education programs, and strategic use of financial incentives to reduce landlord level of perceived risk. Because of the CoC’s relatively large geography, recruitment has occurred primarily at the community level, not at the CoC-level, but the CoC shares information on landlord risk mitigation resources and available units from larger property management companies with providers and local homeless response teams.

While approximately 300 households are rehoused each year in partnership with landlords in the CoC, effectiveness of CoC strategy has diminished over the past three years, due to several factors: a) Lack of in-person visits with landlords and homeless service providers during the pandemic to build landlord trust in PSH or RRH partnerships. This has recently been compounded by rapid staff turn-over within many programs. b) Pandemic-related eviction moratoria and difficulty in getting financial assistance in a timely way reduced the overall pool of landlords and left many of those remaining highly skeptical of any programs that may obligate them to take on more risk. c) Inflationary pressures, including rapidly rising rents, reduce buying power of existing homeless service programs to assist with up-front and ongoing rental costs demanded by landlords.

2. New practices in past three years: The CoC has adapted its landlord recruitment strategy to meet the challenges above in a few important ways.

- Redeveloping long-term in-person engagement. The CoC learned early that no rent assistance app can replace the partnerships needed to make PSH and RRH effective strategies to end homelessness for individuals and families. As communities reopen, program staff engage with landlords through proactive door-knocking and calls to new landlords to build relationships over time. Program staff share outreach strategies through county-level Homeless Response teams to build on successes and avoid conflicting messages, which caused frustration for landlords in the past. CoC and program staff have also begun partnering with cities and rental licensing bodies to

present themselves as partners and educate landlords about housing with services early in their licensure and in places where they are already gathering to learn.

- Adapting strategic financial supports for prevention and move-in expenses. Along with using ARPA-funded renter assistance, the CoC increased prevention funding by 30% using state Family Homelessness Prevention and Assistance funds and Community Living Infrastructure grants. CoC providers also increased use of a statewide landlord risk pool called Beyond Backgrounds, for landlords who rent to people with poor credit, poor rental history, or previous justice involvement. While successful in supporting thousands of vulnerable renters, some providers quickly ran out of funds and left landlords uncertain (again) about available supports for tenants. Providers that were successful consulted with their advisory committees on spending levels and priorities to meet unique needs as they occurred, while maintaining effective service levels throughout the whole grant period.
 - Maximizing consultation and mediation. The CoC implemented Housing Problem Solving (CE diversion) and eviction prevention through partnerships with legal aid, counties, and nonprofits to prevent negative rental outcomes for tenants and landlords, even without direct financial assistance. The CoC also began integrating Medicaid-billable Housing Stability Consultation services into CE and seeks to expand that going forward. After 12 months, 60% of households in crisis were able to avoid shelter and entry to CE with Housing Problem Solving (including Housing Stability Consultation), and less than 2% returned within 12 months with a subsequent crisis.
- 3. Use of data to update strategy.** The CoC will use continue to use data from HMIS and other public sources to inform and adapt its landlord engagement strategy. Data review and strategy updates in this area are the responsibility of the Coordinated Entry Committee during its 6-month assessments of CE. At minimum, data points used will be:
- From HMIS: a) Number and percent of Housing Problem Solving entries in HMIS resolved without entry to shelter or CE priority list. b) Number and percent of returns to homelessness (Housing Problem Solving or CE entry) within 6 months and within 12 months of a Housing Problem Solving exit. c) Rate of denials by TH, RRH, and PSH programs for referrals from CE. d) Rate of referral denials due to landlord decision for RRH, and PSH programs. e) Days to housing move-in after CE referral.
 - From Non-HMIS sources: a) Rate of evictions per rental unit by county and change in rate over 3 months (EvictionLab) to identify priority areas for proactive landlord outreach. b) Median dollars of direct assistance per household for eviction prevention and re-housing, by provider (provider reports for state funder). c) Number of landlords in CoC using Beyond Backgrounds (HousingLink).

P-2. Leveraging healthcare resources

The CoC leverages healthcare resources throughout the homeless response system to meet immediate health and safety needs and to support long-term wellbeing of individual and families experiencing homelessness.

1. CoC Program housing applications

Overall, the CoC has documented \$849,445 leveraged from healthcare resources for the proposed permanent housing projects in Unsheltered and Rural Set-Aside requests. Letters attached in *e-snaps*.

Housing Project	Healthcare Contributors	Contribution types	CoC project request
Maywood Apartments (PSH)	Fernbrook/CREST Adult Mental Health Consortium Olmsted County (using State of Minnesota Housing Support)	\$231,714 Healthcare services tailored to program (\$215,514 ARMHS + \$16,200 consults) \$86,911 Direct contribution from insurance provider (\$483.84* 5 participants * 36 months)	\$160,620
Olmsted County PSH	Doc’s Recovery House	\$300,000 Direct partnership – peer recovery specialist	\$1,003,560
Unsheltered Subtotal		\$618,625 (53%)	\$1,164,180
TRCA HUD Rural RRH	Goodhue County Rice County	\$60,000 Health care services tailed to program – mental health \$60,000 Health care services tailed to program – mental health	\$891,224*
CAC Rural RRH	Beyond Brink/ WEcovery MOST/Allina Health Rice County Northfield Hospital and Clinics HOPE Center	\$24,000 Direct partnership – peer recovery specialist \$7,200 Direct partnership – opioid addiction care/support \$60,000 Healthcare services tailored to program – mental health \$10,020 Healthcare services tailored to program – primary care \$9,600 Healthcare services tailed to program – survivor care	\$278,440*
Rural Subtotal		\$230,820 (20%)	\$1,169,664
Overall Total		\$849,445 (36%)	\$2,333,844

*Excludes rural capacity building funds, which are not specific to the permanent housing project.

2. Other projects in the CoC leveraging healthcare resources (sample, not exhaustive list)

Project Name	Healthcare Contributors	Contribution types
Day Shelter (SSO requested in Unsheltered Set-Aside)	Mayo Clinic Winona State University Zumbro Valley Medical Society	Healthcare serviced tailored to program – Community Paramedic drop-in medical care Healthcare services tailored to program – onsite nursing services Healthcare services tailored to program – street medicine
Zumbro Valley Healthcare PSH	Ucare	Direct contribution from insurance provider
Solace Apartments PSH	Refocus Recovery New Beginnings Southern MN Counseling Services	Healthcare services tailored to program – peer recovery supports Healthcare services tailored to program – substance abuse treatment Healthcare services tailored to program –mental health treatment

	Nicollet County	Direct partnership for healthcare services – Women and children’s nutrition and health
Maple Hills Apartments PSH	Hiawatha Valley Mental Health	Direct partnership for healthcare services – mental health
CoC Coordinated Entry	Medicaid (via State of Minnesota)	Direct contribution from insurance provider – housing consultation and housing sustaining services

P-3. Identifying, sheltering, & housing individuals and families experiencing unsheltered homelessness

In the most recent Point in Time Count, the CoC counted 88 individuals experiencing unsheltered homelessness. The CoC also identified 526 individuals (372 households) experiencing unsheltered homelessness over the 2021 calendar year, as reported during Coordinated Entry assessments. Most people experiencing unsheltered homelessness are single adult males (80%) who are predominately white (68%) or black (20%) and have disabling conditions. Youth and households with children experiencing unsheltered homelessness, while much fewer in number, are more likely to identify as a person of color (51%) and be fleeing violence (27%). At the same time, only about 65% of CoC shelter resources are in use at any point in time, representing a mismatch in need and resources.

P-3a. Street outreach strategy

CoC strategy for street outreach covers the 20-county CoC region but varies in frequency and activity by community. In large cities, outreach occurs at least weekly at libraries, schools, parks, meal programs, hospitals, and other known locations to identify and engage people for housing/services. In smaller communities and rural areas, program staff provide information at least twice annually to local service agencies and partners such as law enforcement, schools, and county veteran service officers, and respond to specific outreach needs when requested. Specialized outreach also occurs on an as needed basis for military veterans, persons with mental illness and youth who are experiencing trafficking. Locations and times are tailored to the need. Youth outreach, for example, focuses on hotels, highway rest areas, schools, and truck stops. Outreach teams coordinate at least monthly through Case Conferencing calls but connect at other times for specific individuals.

All outreach workers are trained in safety planning, health protocols, trauma-informed person-centered care, Housing Problem Solving, motivational interviewing, and assessments for Coordinated Entry (CE). They help individuals and families locate shelter and complete the assessment when they are ready and at a location where they are comfortable. 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. Workers access translation services through Language Line and State Services for the Blind/Deaf to facilitate written and verbal communication.

Outreach workers also partner as needed 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.

P-3b. Strategy to provide immediate access to low-barrier shelter and temporary housing

CoC strategy to provide immediate access to shelter and temporary housing is to ensure utilization of all shelter and housing available and create new shelter and temporary housing opportunities with services in high-need areas.

To maximize utilization of shelter and housing available, the CoC strategy is to:

- Build on partnerships with victim service providers, MN Department of Veterans Affairs, and medical training programs created over the past three years to address urgent health and safe needs and identify all immediate pathways to shelter and housing. CoC will continue to facilitate strengths-based Housing Problem Solving to identify shelter and non-shelter solutions for unsheltered situations. The CoC will also use Rural Capacity Building funds to increase hiring of persons with lived experience for critical roles in Housing Problem Solving and training in culturally appropriate and trauma informed services.
- Update approach to hotel-based shelter. Hotel-based shelter remains a resource for non-congregate shelter, particularly after the past three years, but hotel-based shelter is often very short term (less than 7 days) and does not include services to connect stayers to other housing and services they need. Proposed shelter vouchers included in the Coordinated Entry navigator projects in the Special NOFO include transportation assistance to access shelter (and housing afterward) and additional Housing Problem Solving services to prevent returns to unsheltered situations.

To create new shelter/temporary housing opportunities in high-need areas, the CoC strategy is to:

- Use a combination of ARPA, local levy, and private dollars in at least three cities to add low-barrier shelter for individuals and families, with particular emphasis on private spaces and services. Compared to the CoC's many small privately-run shelters, recent shelters with public-private partnerships (and those in planning) provide shelter without preconditions of sobriety or limitations based on family status or gender. For example, a former college campus now provides individual shelter units for larger families and a combined shelter/service/housing project is in planning for individuals.
- Increase hotel-based shelter with vouchers and transportation assistance. Less than half of CoC counties (9 of 20) have shelter facilities. Using vouchers as proposed above and coordinating with ESG-funded shelter recipients, the CoC will target new voucher use in areas with unsheltered needs identified each month in Coordinated Entry Case Conferencing.

P-3c. Strategy to provide immediate access to permanent housing

The CoC is expanding its system-wide commitment to Housing First to provide immediate access to permanent housing. Housing First depends on housing being available as well as supports to access housing as quickly as possible and without preconditions. CoC strategies in these areas are to:

- Increase housing opportunities. Without additional housing openings in the CoC, meaningful Housing First will remain aspirational only. The housing projects proposed in this Special NOFO create over 50 new units/vouchers in the region, and another 50 are proposed through other resources noted in section A.1 above. With commitments from additional PHAs to partner on use of the CoC can get close to the number of units needed for persons currently unsheltered in the region. The CoC has seen the impact of additional vouchers in Mankato, which reduced unsheltered homeless over the past three years while other areas continued to see increases. The CoC proposal also intentionally expands master leasing for persons with histories of institutional interactions or other barriers to leasing their own units. In response to post-eviction moratorium landlord hesitance to work with all renters, the CoC is expanding use of master leasing in

communities with high rates of unsheltered homelessness, including the Olmsted PSH project proposed in this Special NOFO.

- Continue Housing Problem Solving (HPS). HPS began in 2020; it assists nearly 600 households per year to access housing solutions through mainstream resources or trusted family members and avoid placement on the Coordinated Entry (CE) priority list. The SSO-CE projects proposed in this Special NOFO expand HPS services at CE sites and provide additional training and support for rural agencies to expand HPS's strengths-based, trauma-informed, and culturally responsive approach, as well as hire and train persons with lived experience for this role and other roles in the homeless response system.
- Use CE navigators to connect outreach and transportation assistance for people experiencing unsheltered homelessness. While CE navigators in the CoC have traditionally assisted households already in CE and likely to be referred based on need, the SSO projects proposed in this Special NOFO indicate a shift in approach for CE navigators to engage earlier in the CE process with anyone who is identified as unsheltered, including working directly with outreach teams, day shelters, and DV shelters, providing direct assistance with transportation to shelter and/or other housing, and remaining a support to access permanent housing through CE or elsewhere.

P-4. Updating CoC strategy to identify, shelter, and house individuals and families experiencing unsheltered homelessness with data and performance

CoC uses data specific to local populations as well as industry best practices to support outcomes for people experiencing homelessness and adapt practices based on what we have learned. Data review and strategy updates will be integrated into the CoC Coordinated Entry (CE) Committee's existing 6-month assessments of CE and quarterly overall plan review will be led by the CoC Data & TA Committee, in consultation with the Lived Experience Working Group. HMIS will be the primary data source for CE and project data points, with additional data from program records, funder reports, and non-HMIS based CE list. All data will be reviewed for differences in experience or outcomes by race, gender, age, household type, disability, domestic violence status, chronic homeless status and other subpopulations as needed.

Data points for overall project outcomes:

- # days to permanent housing in CE after CE access (Goal <60 days)
- # days to permanent housing in CE after CE referral (Goal <7 days)
- # days to other permanent housing after HPS or CE assessment (Goal <60 days)
- % utilization of beds/units/caseload (Goal >90%)
- % exit to permanent housing (see below)
- % returns to homelessness within 6 months of exit (<10%)

Data points for overall system & community outcomes:

- # of people experiencing unsheltered homelessness (Goal <50 in PIT Count, <200 annual in CE)
- % of people experiencing unsheltered homelessness assisted by SO or CE Navigator (Goal 90%)
- # days without shelter, average and median (Goal <15)
- # and % vacancy in shelters, average by month (Goal <10%)
- # new housing openings/year available via CE for people experiencing homelessness (Goal 50 new)
- # new housing openings/year available via other pathways for people experiencing homelessness (Goal 70 new)

- # persons with lived experience hired within the homeless response system (Goal 15 new hires with agency and CoC-based training and support)
- % programs completing training and adopting/updating implementation of best practices (Goal 100%)

In addition to the overall measures listed above, the CoC will employ the strategies below throughout the plan period with focus on performance standards and best practices to reach measurable, meaningful, and equitable outcomes for people experiencing homelessness.

1. Street outreach (SO)

Street outreach providers, Day shelter staff, CE Navigators, and CE referral staff will meet together as part of quarterly plan reviews to evaluate outcomes, share approaches, and identify key partnerships created (or needed) to meet immediate health and safety needs of individuals and families while supporting pathways to stable housing. Street outreach and Navigation will aim to have 60% households exit to permanent housing. The CoC will use this process to update written standards for street outreach and navigation, and to identify key areas for training and support. Within rural areas, the CoC will require training on key best practices, with emphasis on Housing First, Equal Access, trauma-informed care, culturally responsive services, advancing equity, and involvement of persons with lived experience. Additional TA and peer support will be offered to develop agreements or policies that ensure ongoing program strength and professional development, e.g. MOU for onsite medical care. The CoC will report on strategy updates, emerging needs, and priorities from the quarterly meetings to CoC members, funders of street outreach, and others as requested.

2. Low-barrier shelter and temporary housing, including anything new under this NOFO

Shelter and temporary housing providers, as well as CE Navigators that are assigned to work with shelters under Special NOFO funding requested, will meet together as part of quarterly plan reviews to evaluate outcomes, share approaches, and identify new practices that support rapid access to permanent housing and other community services. Shelter providers will aim to have 50% households exit to permanent housing. The CoC will use this process to update written standards for shelters and temporary housing, to engage non-HMIS participating shelters in using the system, and to identify key areas for training and support. Within rural areas, the CoC will require training on key best practices, with emphasis on Housing First, Equal Access, trauma-informed care, culturally responsive services, advancing equity, and involvement of persons with lived experience. Additional TA and peer support will be offered to develop agreements or policies that ensure ongoing program strength and professional development, e.g. training staff and volunteers on transition to low-barrier shelter. The CoC will report on strategy updates, emerging needs, and priorities from the quarterly meetings to CoC members, funders of emergency shelter and temporary housing, and others as requested.

3. Rapid access to permanent housing

Permanent housing providers, CE Navigators, and CE Assessment site staff convene in monthly CE Provider meetings. At least twice yearly, in quarters that alternate with CE Committee 6-month reviews, the providers will dedicate time to evaluate outcomes (with emphasis on days to housing move-in, successful vs. unsuccessful referrals), share approaches, and identify new practices that support rapid access to permanent housing. Permanent housing providers will aim to have >90% exits to permanent housing. The CoC will use this process to update written standards for RRH and PSH, to improve assessment data quality checks, to increase program integration of Moving On strategies, and to identify key areas for training and support. Within rural areas, the CoC will require training on key best practices, with emphasis on Housing First, Equal Access, trauma-informed care, culturally responsive services, advancing equity, and involvement of persons with lived experience. Additional TA and peer support will be offered to develop agreements or policies that ensure ongoing program

strength and professional development, e.g. employer agreements. The CoC will report on strategy updates, emerging needs, and priorities from the quarterly meetings to CoC members, funders of RRH and PSH, and others as requested.

P-5. Identifying & prioritizing households experiencing/with histories of unsheltered homelessness

1. Strategy for ensuring resources in this plan will reduce unsheltered homelessness

The CoC is aligning all of its resources, processes, and partnerships to ensure the plan to reduce unsheltered and rural homelessness is successfully implemented.

- Planning: The CoC strategy for ensuring resources in the plan will reduce unsheltered homelessness began in early 2022 with data analysis of who is experiencing unsheltered homelessness and where. The CoC wanted a comprehensive plan that included system support projects (HMIS, Planning, SSO-CE, and SSO-Outreach) needed to help housing projects be successful. Based on the data and consultation with the community, the CoC set priorities for new housing projects in key locations and identified needs for key improvements in outreach, connection, and evaluation to support access to housing, especially for underserved communities.
- Project selection: The CoC shared data summaries on rural and unsheltered homelessness, including what may be unique experiences for different household types and subpopulations in parts of the region. Projects selected for the Rural Set-Aside and Unsheltered Set-Aside are in priority geographies: PSH and SSO-Outreach in Olmsted County, RRH in Goodhue, Rice, and Steele Counties, and targeted HMIS and SSO-CE throughout the region. Projects selected also met CoC criteria for demonstrating ability to implement Housing First, provide culturally appropriate services based on their target and geography, engage participants in the project, bring in other housing or health resources, work toward key system outcomes, and manage federal funds.
- Engagement: The CoC is committed to active engagement now and throughout the plan period to maximize resources and realize its goals. To do this, the CoC will share its plan broadly with partners at local, state, and philanthropic agencies to identify how targeted resources could reduce unsheltered homelessness. The CoC will also continue to work with PHAs to add more partnerships in vouchers and services, guide housing developers to seek projects in CoC priority areas, and promote full usage state housing and service programs (Local Homeless Prevention Aid, Community Living Infrastructure grants, Housing Support, etc.) by county human services departments across the region.
- Monitoring and support: The CoC will conduct a quarterly review of progress in consultation with the Lived Experience Working Group. The CoC Committees for Data & TA, Coordinated Entry, and Equity will lead any changes in response to the quarterly reviews, including arranging for additional training and support for parts of the homeless response system where needed.

2. How CoC will adopt eligibility and CE processes that reduce unsheltered homelessness

The Coordinated Entry (CE) Committee leads CoC policy and procedure and is prepared to move forward with these strategies to reduce unsheltered homelessness:

- Update CE case conferencing process to dedicate specific time to persons currently unsheltered with severe service needs, separate from time for persons who qualify as chronically homeless or other priority group. The revised case conferencing focus will set priorities for immediate action from outreach or CE navigator teams to assist with shelter and housing access.

- CE Prioritization already incorporates a severe service need definition to prioritize households for housing referral. The Committee is evaluating adjustments to align with needs and HUD definition in this NOFO for implementation in 2023.
- CE direct support resources are proposed in the Special NOFO SSO-CE projects to provide transportation assistance to housing/shelter and add shelter vouchers in rural areas.
- Improved CE eligibility and referral monitoring will begin this fall to ensure full information for good referrals, rapid access to housing upon referral, and rapid return to CE referral list if needed. All projects will review and update eligibility, consult with the Committee on changes of concern, and begin running monthly reports to verify all referrals are dealt with in a timely manner and no households are excluded from consideration for referral because of delayed referral resolutions.

3. Strategy to use street outreach to connect unsheltered people with housing resources

The CoC is updating its strategy to connect people directly to housing resources with three key steps:

- Increase day shelter and street outreach services in Rochester and Mankato. In Rochester, where over half of all people experiencing unsheltered homelessness are found, The Landing MN will increase outreach staffing in partnership with community medical teams using a CoC Program grant requested in the Special NOFO. The Olmsted County Housing Stability Team will also continue to work closely with police and parks department staff to connect with people during the overnight hours. Police are authorized to issue Salvation Army shelter vouchers during that time. In Mankato, Connections Ministry and City of Mankato will add two positions to expand street outreach and navigation services to meet people throughout the community and immediately connect to shelter and support.
- Provide direct access to shelter in rural and non-rural areas. Using funds requested in the Special NOFO, the CoC will provide shelter vouchers to individuals and families experiencing unsheltered homelessness as well as transportation assistance to shelter or permanent housing.
- Expand CE Navigator support to unsheltered individuals and families in areas with low/no shelter resources. Under the Rural Set-Aside and Unsheltered Set-Aside, the CoC is requesting funds to expand and redirect staffing to engage immediately with households using short-term shelter in rural areas, to employ Housing Problem Solving and identify available pathways to safe, decent, and affordable housing, through CE or through other methods.

4. Additional steps CoC is taking to ensure unsheltered people are able to access housing and other resources in the community

Because the number of households experiencing homelessness in any given year far surpasses the housing opportunities available through Coordinated Entry, the CoC is taking steps to increase other housing resources and prevent homelessness whenever possible.

- Other (non-CoC Program) PSH units funded/applied for: Housing projects in the pipeline over the next three years are expected to add 57 units of permanent supportive housing in the CoC region. Based on current turnover rates for established PSH programs, the units will add about 10-12 housing opportunities per year for people currently experiencing homelessness after their initial lease-up period.

Under construction/ opening soon	Funding approved (2023 opening)	Funding requested (2024 opening if approved)
Mankato: • Sinclair Flats (4)	Lake City: • Underwood Terrace (4)	Austin: • First & Third Apts. (4)

<ul style="list-style-type: none"> • Rosa Place II (8) Rochester: <ul style="list-style-type: none"> • Harvest View Place II (4) Winona: <ul style="list-style-type: none"> • Water’s Edge (4) 	Mankato: <ul style="list-style-type: none"> • Lewis Lofts (7) Rochester: <ul style="list-style-type: none"> • Manor Hills (4) 	Kasson: <ul style="list-style-type: none"> • Kasson Apartments (4) Rochester: <ul style="list-style-type: none"> • Mayowood II (7) • Valleyhigh Flats II (7)
20 units	15 units	22 units

- Other pathways to housing solutions
 - Housing for persons with disabilities: Continue MN Bridges rental assistance for persons with serious mental illness. Support development of housing with services for persons receiving county mental health case management, regardless of homeless status.
 - Creating more openings in PSH and RRH projects by:
 - Expanding Moving-On Preference: The two largest PHAs (Olmsted HRA and Mankato EDA) now have active Moving On partnerships with PSH. The CoC is updating program standards to address moving-on assessments in PSH to expand use.
 - Preventing need for PSH: The CoC is engaging in several eviction prevention, homelessness prevention, and other intervention services following the pandemic-related eviction moratorium. The CoC will continue to maximize requests for state prevention program funds and county Community Living Infrastructure supports to provide direct prevention aid and promote use of new Local Homelessness Prevention Aid by counties to support families and children meeting Department of Education standards for homeless assistance.
- Capacity building. The CoC is requesting Rural Capacity Building funds to increase the ability of existing homeless response programs to provide culturally responsive services and to invest in small and culturally specific organizations in rural areas to build homeless response services. While the CoC would have liked to include an additional housing project request under the Rural Set-Aside, agencies in the next highest priority area did not have capacity to seek funding even with CoC support this year. The result is that areas with higher concentrations of Hispanic/Latinx households are not included in service areas for additional housing in this Special NOFO. Increasing capacity particularly in this geographic area is critical to ensuring everyone experiencing unsheltered homelessness in the CoC can access housing.
- Increased supports & connections. The CoC request includes two Coordinated Entry projects to expand and focus navigator services in areas with limited shelter capacity. Like existing navigators, the new navigators will help individuals and families gather documentation for housing eligibility, as well as government-issued IDs. The navigators will also work with the Day Shelter project and other non-CoC Program funded outreach and service teams to integrate healthcare services, access to benefits, and other resources to support health and housing access.

P-6. Involving individuals with lived experience of homelessness in decision-making

1. Outreach efforts to develop CoC-level working group

Working in a geographically larger region, the CoC has found that personal invitations and outreach to build relationships are most effective to engage individuals with lived experience in CoC decision-making and overcome the barriers that come with virtual CoC activities. Based on that knowledge,

outreach to develop a CoC-level working group was simple, with a one-page invitation and description delivered by trusted people in safe spaces.

Targeted outreach occurs through:

- CoC members with lived experience. One third of CoC members have lived experience of homelessness. As peers, they invite others and explain the value they find in CoC, how it works, and who is involved.
- Trusted staff. The CoC asks staff of homeless programs share CoC involvement opportunities with participants to support their personal or professional growth goals. Staff provide support to engage, access to CoC meetings, introductions to new people, and explanation of roles.
- Equity Committee listening sessions. When participants in listening sessions express interest in sharing ideas or getting involved in a group, the Committee shares information on CoC participation and leadership and invites them to a CoC event or activity to learn more.

As a result of outreach, ten individuals representing a broad range of experiences committed to participating in the Working Group. To accommodate people in many locations and with various levels of mobility and health, the Working Group offers site-based gathering spaces and virtual connections, with all locations connected via Zoom across the region.

2. CoC role in encouraging projects to involve persons with lived experience

The CoC encourages projects to involve persons with lived experience by sharing examples and guidance with project managers and staff and inviting participation of both staff and program participants in CoC activities and statewide homeless coalition activities.

The CoC also includes scored evaluation criteria for projects seeking CoC Program funds, in which applicants demonstrate how persons with lived experience were involved in the project proposal and will be involved in the program going forward. For non-CoC Program funded projects, the CoC will encourage projects to consult with the Lived Experience Working Group or continue to work with local groups and will continue to provide feedback to funders on project applicants' involvement of people with lived experience.

As proposed in funding for rural capacity building, the CoC is developing a strategy to incentivize, train, and support agencies that hire persons with lived experience within the programs they provide and within Coordinated Entry (CE) access and assessment teams. The strategy includes direct financial incentives as well as onboarding training and ongoing peer support/learning groups.

3. Working group role in CoC decision-making

As a newly formed group within the CoC, the Working Group role is developing each month and will be formally incorporated into CoC Governance Charter late this year. Despite the start mid-year, the Working Group was active in this year's competition by scoring and providing feedback to projects seeking CoC Program funds, providing input on CoC plan priorities, and guiding CoC activities related to rural capacity building.

Beginning in November 2022, the Working Group will begin to make recommendations on its own membership, tasks, and relationship to other CoC Committees to include in the Governance Charter. Key roles already identified are to a) provide consultative guidance to proposed housing and service projects in the region, b) assess outcomes and models of projects already funded, c) recommend changes in Coordinated Entry policy/procedure, d) guide outreach strategy for services and PIT Count, and e) participate in NOFO scoring/ranking, including setting evaluation criteria. As a

Working Group of the CoC, members have full voting privileges and the group will also have at least one representative on the CoC Executive Committee, which provides overall direction to the CoC.

P-6a. Letters signed by members of the Lived Experience Working Group are attached. (Members signed individual versions of the same letter rather than one letter.)

P-7. Supporting underserved communities and equitable community development

1. Strategy to identify underserved populations in CoC geography

The CoC identifies underserved populations through ongoing review and analysis of disparities within the homeless response system. 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. Other priority populations are persons who qualify as chronically homeless, who have a history of unsheltered homelessness, who have multiple disabilities, who have a history of institutional interactions, or who are unaccompanied youth. CoC staff present the data for Committee members to evaluate. CE access by race, ethnicity, and subpopulation 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 review program entries, overall participants served, exits from housing, and returns to homelessness. Input from and consultation with the CoC Lived Experience Working Group, Equity Committee listening session participants, statewide partner organizations, and the CoC's biennial community partner survey provide context for the data and potential action steps to address disparities.

2. How underserved communities interact with the homeless response system

The three largest underserved communities in the CoC are Black families and youth, persons who identify as Hispanic/Latinx, and persons with histories of institutional interactions.

Black families with children and unaccompanied youth experience unsheltered homelessness and seek shelter at much higher rates than their counterparts of other races. However, the CoC has very few family shelter and youth shelter options located in the communities where Black families and youth are experiencing homelessness. As a result, some families and youth remain unsheltered or in unsafe housing situations. Contacts made with the homeless response system are primarily with non-Black staff. While 35% of persons experiencing homelessness in the region are Black, only about 15% of frontline staff are. The lack of shelter and trusted contacts makes it difficult to connect with families and youth when housing openings occur. The result is that, while referrals from Coordinated Entry (CE) are equitable, successful referral and housing move-in rates are 5-7% lower for this community.

Like Black persons, Hispanic/Latinx persons experiencing homelessness (12% of total population) are also most likely to encounter someone who is not Hispanic/Latinx, and if language assistance is needed, an in-person or phone interpreter may be involved. Referrals, referral success, and housing move-ins, however, appear to be equitable for those who do access CE, but the CoC believes that initial access is where Hispanic/Latinx persons are underserved based on percentage of population experiencing poverty (20%). Persons who identify as Hispanic/Latinx most often interact with the homeless response system on the prevention side due to local patterns of doubling up with friends or family when loss of housing occurs and concern about accessing federal or other supports, especially through agencies with non-culturally specific programs or non-Hispanic/Latinx staff.

Persons with history of institutional interactions, including stays in jail, mental health facilities, or substance abuse treatment, are underserved in the homeless response system despite also having histories of unsheltered homelessness. Persons in this population make up 20% of persons in CE (compared to 13% who qualify as Chronically Homeless, or CH), but they receive referrals at half the rate of persons who qualify as CH and have successful referrals only about a third as frequently as those who meet CH criteria. The CoC is investigating causes by specific institutional setting but knows that referrals are not made to certain housing (including public housing) and rental assistance due to exclusions based on criminal history, which results in 10% longer waits for housing compared to overall CE population.

3. Strategy to provide outreach, engagement, and housing interventions to populations underserved by the homeless response system

CoC strategy responds to the needs and components of the homeless response system that result in specific populations being underserved.

- Black families and youth: With shelter access and connection appearing to be the primary causes of underserving housing for Black families and youth, the CoC is seeking to bolster youth and family shelter resources in Olmsted, Rice, and Steele Counties and incentivize CE provider hiring and training of persons with lived experience in this population (using Rural Capacity Building funds). The CoC will continue to engage school liaisons and support partnerships between schools and counties to use Minnesota’s recently approved “Local Homeless Prevention Aid,” to create or expand housing and resource programs serving homeless students and families, particularly in areas where Black families and youth are located.
- Hispanic/Latinx households: With access as the key issue, the CoC is reassessing CE access sites in areas where most Hispanic/Latinx households live to identify new outreach activities that are linguistically and culturally appropriate, including trusted messenger programs to build trust with community members vulnerable to misinformation about seeking assistance. The CoC is also exploring new partnerships with Hispanic/Latino led organizations, including migrant worker health services, to become CE access sites in key locations or to build partnerships with CE access agencies. Training for non-culturally specific staff is also planned as part of Rural Capacity Building activities proposed in current grant applications.
- Persons with history of institutional interactions: With eligibility presenting specific barriers for this population, the CoC will continue to work with the State Housing Finance agency to educate and enforce limits on participating property owners and managers that employ strict tenant screening criteria. The CoC will also continue to use its CE policy strategically, to prioritize persons with prior justice involvement for housing opportunities that waive certain restrictions (as the CoC did with Emergency Housing Vouchers). The CoC is also supporting development of other housing opportunities for people with institutional interactions, which include services but do not require homeless eligibility criteria for access. One project recently opened in Rochester and another is planned in the eastern part of the region in the coming 1-2 years.