Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.

2. Ensuring all questions are answered completely.

3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.

4. Ensuring all imported responses in the application are fully reviewed and updated as needed.

5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.

6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click here.
1A. Continuum of Care (CoC) Identification

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

1A-1. CoC Name and Number:  CA-509 - Mendocino County CoC

1A-2. Collaborative Applicant Name:  Mendocino County Health and Human Services Agency

1A-3. CoC Designation:  CA

1A-4. HMIS Lead:  Mendocino County Health and Human Services Agency
### 1B. Continuum of Care (CoC) Engagement

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

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.

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

**Applicant:** Mendocino County Health and Human Services Agency  
**Project:** CA-509 CoC Registration FY2017  
**CoC CA-509**  
**Project:** CA-509 CoC Registration FY2017  
**COC_REG_2017_149369**  
**FY2017 CoC Application**  
**Page 3**  
**10/02/2017**
1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 1000 characters)

Members of the MCHSCoC participate in housing and homelessness focused committees, action and advocacy groups, throughout the County. Each general member, as well as the governing board, share information about COC activities and invite others to join the CoC or to attend as a guest and share their ideas. The CoC makes sure to stay up to date on new or developing homelessness focused entities and activities. More recently, Members of the CoC attended the inaugural meeting of the Fort Bragg City Council homeless action plan in order to strategize coastal responses to homelessness. Following the community meeting in which the City Manager along with the City Council gathered information and ideas from more than a dozen community members and stakeholders. As a follow up, the CoC Chair met with Fort Bragg and Ukiah City Police and Fort Bragg leadership for further conversation about COC support of Fort Bragg’s process.

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

Each year the MCHSCoC holds an annual General Orientation and Membership Invitation Event during which the structure of the CoC, committees, workgroups and governing board is outlined. Invitations to this event are distributed via email, listed on the CoC and partner websites, and general membership may solicit specifically for members to represent under-represented subpopulations or groups, including initiating additional actions to ensure representation by homeless and/or formerly homeless individuals.

Recently, we have been working specifically to increase engagement with local (City) governments and law enforcement agencies. These efforts have been very successful and have been mainly through scheduling appointments with individuals or agency teams, and by attending planning commission and community forum gatherings.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.
The CoC publically announces the NOFA by posting it on the CoC website, distributing through e-mail and making announcements in meetings. The CoC, as it has re-structured to be in compliance with the Interim Rule, has attracted new members, and provided clarification on who can apply for this funding. On July 18th, 2017 the MCHS CoC posted the NOFA information along with contact for further information on the CoC and Mendocino County websites and sent the NOFA along with a timeline including various submission and meeting dates, to all current and past CoC member agencies and individuals, as well as distribution lists of current CoC members' other associations. On August 3rd, 2017, the CoC distributed information about the ESG Balance of State NOFA using the same method.
1C. Continuum of Care (CoC) Coordination

Instructions:

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

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects. Only select "Not Applicable" if the funding source(s) do not exist in the CoC’s geographic area.

<table>
<thead>
<tr>
<th>Entities or Organizations the CoC coordinates planning and operation of projects</th>
<th>Coordinates with Planning and Operation of Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Opportunities for Persons with AIDS (HOPWA)</td>
<td>Yes</td>
</tr>
<tr>
<td>Temporary Assistance for Needy Families (TANF)</td>
<td>Yes</td>
</tr>
<tr>
<td>Runaway and Homeless Youth (RHY)</td>
<td>Yes</td>
</tr>
<tr>
<td>Head Start Program</td>
<td>No</td>
</tr>
<tr>
<td>Housing and service programs funded through Department of Justice (DOJ) resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through Health and Human Services (HHS) resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through other Federal resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through state government resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through local government resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through private entities, including foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>Other:(limit 50 characters)</td>
<td></td>
</tr>
</tbody>
</table>

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

The CoC has implemented ESG performance standards and evaluation processes for ESG funding eligibility. The CoC continues to work with local providers and agencies to facilitate application submission through the state.
ESG process. Another way CoC interacts with ESG applicants and recipients is through the development of housing opportunities which are often shared in COC meetings or member networking.

The COC shares PIT and HIC data with all active members, as well as local jurisdiction representatives working on the Consolidated Plan. Agencies represented on the COC are also part of Consolidated Plan working groups, providing a direct link connecting information and discussion from the COC to the Consolidated Plan.

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

Project Sanctuary (PS) is Mendocino County's (MC) local service provider for victims of domestic violence, and the Program Director is an active member of the governing board. Over the past 40 years, the agency has become well known and supported by community members throughout the county. All PS staff and volunteers are required to complete 40 hours of training for State certification as domestic violence counselors. The training includes crisis intervention, community resources, civil procedures, substance abuse and trauma informed response. PS has a 15 bed emergency shelter where individuals fleeing violence may stay for up to 3 months. MC has a higher than average rate of unemployment, few living wage jobs and an inflated cost of housing due to proximity to the Bay Area. The housing subsidies provided through CoC partnerships create an opportunity for these families to gain the stability needed to move forward with their lives.

1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment. (limit 1,000 characters)

Project Sanctuary (PS), our local Domestic Violence service provider holds a governing board seat, regularly attends CoC meetings and educates the CoC in the area of current best practices for incorporation into assessments and direct service provider trainings.

Beginning this year the CoC will be working with PS to provide training to all CoC partners on current trends and best practices specific to work with victims of domestic violence. All CoC member agencies have access to Mental Health First Aid trainings at least annually.

With technical assistance from CHS, the CoC CE Committee will assist additional providers to incorporate CE into their intake process. Ultimately, we intend to provide CE access in various community-based locations frequented by people experiencing homelessness, as well as through the Street Medicine Program, which provides daily outreach to the homeless population.
1C-4. Using the chart provided, for each of the Public Housing Agency’s (PHA) in the CoC’s geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA’s that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

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

<table>
<thead>
<tr>
<th>Public Housing Agency Name</th>
<th>% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry</th>
<th>PHA has General or Limited Homeless Preference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Development Commission of Mendocino County</td>
<td>1.00%</td>
<td>Yes-HCV</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

(limit 1000 characters)

The Housing Authority is an active participant in the Continuum of Care. Their policies include a preference on the Housing Choice Voucher Waiting list for Permanent Supportive housing participants who have stabilized their housing situation, and they have applied and obtained a grant to operate the Coordinated Entry process in this county. A homeless preference has been discussed, however resources are scarce in this county, so strategically, permanent supportive housing and the HUD/VASH programs are serving chronically homeless households. Because there is an extreme shortage of actual rental housing, the CoC is implementing the above strategy to address homelessness in the county.

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

(limit 1000 characters)
Many of our CoC members participated in the web-based “Equal Access and Gender Identity Rules Training” provided by HUD mid-November 2016. Additionally, individual members are attending trainings outside of the county and bringing back information to make available to the entire CoC. As with those clients who are fleeing domestic violence, the CoC intends to bring local and non-local experts working directly with various special populations, including LGBTQ and their families, to provide the group with best practices and updates on current needs and appropriate interactions. All CoC members have committed to anti-discrimination policies.

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

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

When "No Strategies have been implemented" is selected no other checkbox may be selected.
1D. Continuum of Care (CoC) Discharge Planning

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

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care:</td>
<td>X</td>
</tr>
<tr>
<td>Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Mental Health Care:</td>
<td></td>
</tr>
<tr>
<td>Correctional Facilities:</td>
<td>X</td>
</tr>
<tr>
<td>None:</td>
<td></td>
</tr>
</tbody>
</table>

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

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care:</td>
<td>X</td>
</tr>
<tr>
<td>Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Service Type</td>
<td>Selection</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Mental Health Care</td>
<td>X</td>
</tr>
<tr>
<td>Correctional Facilities</td>
<td>X</td>
</tr>
<tr>
<td>None</td>
<td></td>
</tr>
</tbody>
</table>
1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

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

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

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

<table>
<thead>
<tr>
<th>Used Objective Criteria for Review, Rating, Ranking and Section</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Included at least one factor related to achieving positive housing outcomes</td>
<td>Yes</td>
</tr>
<tr>
<td>Included a specific method for evaluating projects submitted by victim service providers</td>
<td>No</td>
</tr>
</tbody>
</table>

1E-2. Severity of Needs and Vulnerabilities

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

(limit 1000 characters)

The COC ensures funded projects consider the severity of need of clients through scoring of projects using our local rating and ranking tool which includes scores for Housing First practices, access for individuals with physical disabilities and consideration for the chronically homeless.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority
Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

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

<table>
<thead>
<tr>
<th>Public Posting</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CoC or other Website</td>
<td>❌</td>
</tr>
<tr>
<td>Email</td>
<td>❌</td>
</tr>
<tr>
<td>Mail</td>
<td></td>
</tr>
<tr>
<td>Advertising in Local Newspaper(s)</td>
<td></td>
</tr>
<tr>
<td>Advertising on Radio or Television</td>
<td></td>
</tr>
<tr>
<td>Social Media (Twitter, Facebook, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

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

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

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between FY 2013 and FY 2017 CoC Program Competitions.
No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and

| FY2017 CoC Application | Page 13 | 10/02/2017 |
Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps.

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

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

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

09/13/2017
### Reallocation Supporting Documentation

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Required?</th>
<th>Document Description</th>
<th>Date Attached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reallocation Supporting Documentation</td>
<td>No</td>
<td>Notice of Funding...</td>
<td>09/19/2017</td>
</tr>
</tbody>
</table>
Attachment Details

**Document Description:** Notice of Funding Availability announcement with application link
2A. Homeless Management Information System (HMIS) Implementation

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

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

Yes

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

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

Governance Charter page 9


Yes

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

Eccovia Solutions

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area.

Single CoC

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

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Total Beds in 2017 HIC</th>
<th>Total Beds in HIC Dedicated for DV</th>
<th>Total Beds in HMIS</th>
<th>HMIS Bed Coverage Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter (ESG) beds</td>
<td>136</td>
<td>15</td>
<td>121</td>
<td>100.00%</td>
</tr>
<tr>
<td>Safe Haven (SH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Transitional Housing (TH) beds</td>
<td>66</td>
<td>5</td>
<td>61</td>
<td>100.00%</td>
</tr>
<tr>
<td>Rapid Re-Housing (RRH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH) beds</td>
<td>364</td>
<td>0</td>
<td>364</td>
<td>100.00%</td>
</tr>
<tr>
<td>Other Permanent Housing (OPH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

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

N/A

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

5

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

04/21/2017
2B. Continuum of Care (CoC) Point-in-Time Count

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

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

01/26/2017

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

04/21/2017
2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

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

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

The 2016 sheltered PIT count volunteers were successful in counting each individual on the night of the count. Unfortunately, our largest emergency winter shelter was notable to enter their 50 clients into our CoC’s HMIS. The 2017 shelter PIT count was successful both in the counting the night of and in the data entry follow up.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count?

Yes

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

| Beds Added | 44 |
| Beds Removed | 50 |
| Total | -6 |

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC’s 2017 sheltered PIT count?

No

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

| Beds Added | 0 |
| Beds Removed | 0 |
| Total | 0 |
2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017?

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

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

There was no change in methodology from the 2016 to 2017 unsheltered PIT counts.

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

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

One of the topics of the first 2017 PIT committee meeting was how to ensure getting a strong Youth count. A current general member and partner working directly with the youth population, assisted in selection and set-up of the counting locations, publicity, and the locating of encampments that youth frequent.

2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)

No additional actions were implemented in the 2017 PIT count.
3A. Continuum of Care (CoC) System Performance

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

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

As we develop our intake and coordinated entry system with the technical assistance provided through CHS, we are incorporating more quantitative measurements, including rates of first time homelessness. The MCHSCoC is also working with community partners and the MCHHSA to improve and increase diversion activities and the identification of at-risk families and individuals. The Performance Measurement Committee is responsible for monitoring and ensuring CoC funded projects are meeting timelines and goals as outlined in their applications, in addition to meeting the CoC performance goals. The CoC lead agency does compliance visits to monitor all areas of performance. HMIS data is also used to identify project and data outcomes to address areas in need of improvement. Monthly APRs and "system performance measures" are reviewed from the local HMIS software for individual programs and are shared with the entire CoC body quarterly.

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

With the adoption of the VI-SPDAT and housing first strategy by PSH programs operated by the CDC as well as the implementation of a RRH program, the CoC identifies and houses individuals first by VI-SPDAT score and second by date of intake. Individuals who are most vulnerable are immediately placed into PSH ensuring that the CoC is meeting the needs of the most vulnerable individuals.
In addition, the CalWORKS housing program has received funding to reduce length of homelessness for eligible clients through permanent housing placement. Through collaboration, CoC member agencies are able to provide Peer Support and Housing Navigation personnel both on the coast and inland Mendocino County. These staff will assist those homeless or at risk of homelessness through individualized support at the peer level, and advocacy to land holders and community members for affordable housing opportunities, assistance in property owner engagement and access to housing resources.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention
Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC’s strategy for retention of, or placement in permanent housing. (limit 1000 characters)

PSH providers work closely with case managers who utilize progressive engagement to identify, intervene and mitigate behaviors that impact lease compliance, so that the household is not returned to homelessness. Case managers also provide outreach, engagement and support to property owners struggling with tenant behaviors that may jeopardize housing. The policies are designed in the housing first philosophy to provide the highest possible opportunity to be successful and remain housed. Additionally, Legal Services of Northern California provides lease/eviction/tenant property owner dispute services for eligible households. The CalWorks division of HHSA has been awarded a homeless prevention grant, which assists households in maintaining housing and prevents returns to homelessness. The CoC Chair, the CDC and the Coordinated Entry and Discharge Planning Committee are responsible for the oversight of the CoC’s strategy for retention of or placement in permanent housing.

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

Through analysis of HMIS data, the COC HMIS lead is able to track families and individuals returning to homelessness. Continuing a policy of termination of housing only under extreme circumstances, access to peer support, case-management and housing navigation, reduces returns to homelessness. CoC supported programs are expected to help clients engage in ongoing communication with Peer Support, Case management, and Housing Navigator partners. When these various levels of staffing and expertise are connected the collaboration possible among professionals, clients and property owners ensures maximum likelihood of a successful housing opportunity.
3A-5. Performance Measures: Job and Income Growth
Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)

The CoC is working with the Mendocino College, Mendocino County Office of Education and the Ukiah Unified School district in support of their new vocational development, employment readiness, career programs in an effort to prepare clients for any employment opportunities that may arise. The strategic planning committee is working with the McKinney Vento Liaison at the Mendocino County Office of Education to improve graduation rates for high-risk youth and to support their transition to adulthood and into the workforce. Through the coordinated entry process, clients are evaluated as to their need for mainstream benefits, which may include CalFresh, Medi-cal, GA and involvement with EDD and Department of Rehabilitation.

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

Yes

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

An assessment of the terrain was used primarily to exclude wilderness and unpopulated areas due to safety concerns. Many of these areas have no cell service, and are not accessible by paved roads. The CoC identified all populated areas as part of the PIT count, and had many volunteers covering the most remote populated areas. Street outreach providers, of which there were few, participated on the committees that organized the count. Volunteer training provided by the HMIS lead included instructions for surveys, and how to count unsheltered homeless households, including cultural competency as well as volunteers who were actually experiencing homelessness. The strategies used to attract unsheltered homeless were warming stations, gift cards, breakfast, as well as gift bags. These warming stations were located at local service provider agencies who used this opportunity to connect with households who are experiencing homelessness, and included Transitional Aged Youth providers.
3A-7. Enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2016. (mm/dd/yyyy) 06/05/2017
3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

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

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

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.</td>
<td>0</td>
<td>79</td>
<td>79</td>
</tr>
</tbody>
</table>

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

| Total number of beds dedicated as Dedicated Plus | 0 |
| Total number of beds dedicated to individuals and families experiencing chronic homelessness | 0 |
| Total | 0 |

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

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

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

The CoC’s current strategy is assessment through the coordinated entry system to match households with children with the best possible housing intervention. Unfortunately, due to lack of housing inventory, families experiencing homelessness in Mendocino County often wait longer than 30 days for transitional or permanent housing availability. The CoC is currently working with HHSA and many other local government and private agencies to secure divers funding to increase Mendocino County’s housing inventory.

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

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing. (limit 1000 characters)

The CoC reviews the eligibility and admission policies of CoC funded PSH, transitional housing and emergency shelters to ensure adherence to anti-discrimination policies. The MCHSCoC has developed the Coordinated Entry system to screen and place individuals and families in the appropriate housing intervention, utilizing a standardized assessment (VI-SPDAT) to prioritize those who demonstrate the highest vulnerability and risk. This assessment and screening system helps to ensure that people are provided with access to PSH and RRH programs without being subjected to discrimination and barriers based on age, sex, gender, sexual orientation, marital status, disability, or race.
3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

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

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

<table>
<thead>
<tr>
<th>History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)</th>
<th>X</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Previous Homeless Episodes</td>
<td>X</td>
</tr>
<tr>
<td>Unsheltered Homelessness</td>
<td>X</td>
</tr>
<tr>
<td>Criminal History</td>
<td>X</td>
</tr>
<tr>
<td>Bad Credit or Rental History</td>
<td>X</td>
</tr>
</tbody>
</table>

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC’s efforts. (limit 1500 characters)

As part of the MCHHSA’s commitment to focusing on Housing and Homelessness as encouraged by the MCHS CoC, HHSA has engaged professional grant writers to work with the new housing unit HOME to identify and pursue funding opportunities consistent with the values and requirements of the CoC. An example is the use of MHSA dollars to provide housing for youth struggling with mental illness who are experiencing homelessness. CoC partners who focus on youth services provide outreach and engagement throughout the community to identify homeless youth and assist them with accessing needed services. Interagency collaboration serves to minimize duplication of services increasing effectiveness demonstrating fiscal responsibility. Research from the National Alliance to End Homelessness suggests that local government/community-based partnerships increase likelihood of positive outcomes for homeless youth.
3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services.
(limit 1000 characters)

1) The McKinney-Vento County Coordinator at the Mendocino County Office of Education is a current voting Board Member of the MCHS CoC. The McKinney-Vento Coordinator collaborates with all school district liaisons within Mendocino County for referral of identified homeless students that are living in transitional housing or applying for HUD.

2) There are no formal partnerships at the moment, but it is the intention of collaborating with the multi-entry level system, that the COC and partners will be able to cross-refer families applying for HUD with school-aged children to be connected to the local district liaison.

3) The County Coordinator as a voting member of the COC will assist in designing a policy and procedure that will inform individuals and families that qualify under the federal definition of homeless, the laws and legislation for the rights of homeless students, and eligibility for educational services.

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

<table>
<thead>
<tr>
<th>Early Childhood Providers</th>
<th>MOU/MOA</th>
<th>Other Formal Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Early Head Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Child Care and Development Fund</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Federal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Healthy Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Public Pre-K</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Birth to 3</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Tribal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Other: (limit 50 characters)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 1000 characters)

Both year round and emergency weather shelters in Mendocino County identify and refer veterans to services through the Coordinated Entry system and the Veteran’s Administration (VA). The VA works closely with the Community
Development Commission (CDC) to ensure that Vets receive the housing support they are due. Representatives of the CDC and the VA sit on the CoC governing board. The county has 108 HUD/VASH vouchers, and the housing authority and CoC work closely with the Veterans Affairs Community Based outpatient clinic on housing issues.

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

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

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach? Yes
4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

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

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

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

4A-1a. Mainstream Benefits

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

CoC program funds are supplemented by in-kind and cash match. Through CE, clients are referred to a multitude of mainstream services that are appropriate for their individual needs. Information is shared by CoC members with other groups they participate in, as well as throughout their own agencies, ensuring that the community of homeless services providers is constantly up to date on what services are available and where. Legal Services of Northern California is an advisory member of the continuum of Care. They provide public benefit advocacy (including Social Security and SSI benefits), as well as legal services for housing support. HHSA, the collaborative agency, is the local provider to TANF, Food Stamps, and Cal Works (local welfare to work program) for the County. HHSA, the collaborative applicant also runs the Substance Use Disorder program for the county. Ford Street Project has inpatient treatment...
programs for substance use disorders, and is an active member of the CoC.

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)</td>
<td>2.00</td>
</tr>
<tr>
<td>Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected “low barrier” in the FY 2017 competition.</td>
<td>2.00</td>
</tr>
<tr>
<td>Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as “low barrier”</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).</td>
<td>2.00</td>
</tr>
<tr>
<td>Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.</td>
<td>2.00</td>
</tr>
<tr>
<td>Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

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

Our local Street Medicine Program provides outreach clinic times on Tuesday 8-9am and the NorCal Christian Ministries day shelter, Wed 5-7pm at Plowshares, and Thursday 11am -1pm at Plowshares. In addition, the Outpatient Care Coordination team does street outreach on a less scheduled basis, in locations homeless individuals are known to frequent. Beyond access to medical services, these teams provide information on CE locations, as well as various services and supports throughout the community. Both the Street Medicine Program Manager and the Outpatient Care Coordination team manager are CoC members.

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach. Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2)
what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

Everyone in the MCHSCoC’s geographic area have fair and equal access to the Coordinated Entry process, regardless of where or how they present for services. Fair and equal access means that people can easily access the CE process, in person, by phone (in almost any language, 24 hours via our language line), or some other method, and that the process for accessing help is known. Marketing strategies include direct outreach to people on the street and other service sites, informational flyers left at service sites and public locations, announcements during MCHSCoC or other community meetings, and educating mainstream providers. Entry points are accessible to people with disabilities and there are methods by which people can access these entry points. All direct service providers are trained in trauma informed practices, as well as cultural humility and best practices for addressing clients with physical needs.

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

<table>
<thead>
<tr>
<th>RRH beds available to serve all populations in the HIC</th>
<th>2016</th>
<th>2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>79</td>
<td>79</td>
</tr>
</tbody>
</table>

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

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statues who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). No
### 4B. Attachments

**Instructions:**

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

<table>
<thead>
<tr>
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<th>Document Description</th>
<th>Date Attached</th>
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<td>01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants</td>
<td>Yes</td>
<td>List of CoC project evidence</td>
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<td>03. CoC Rating and Review Procedure (e.g. RFP)</td>
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<td>06. CoC's Governance Charter</td>
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<td>09/19/2017</td>
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<tr>
<td>07. HMIS Policy and Procedures Manual</td>
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<td>MCHSCoC HMIS P&amp;P</td>
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<td>08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes</td>
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<tr>
<td>09. PHA Administration Plan (Applicable Section(s) Only)</td>
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<td>Mendocino County Plan details</td>
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<td>10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)</td>
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<td>11. CoC Written Standards for Order of Priority</td>
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<td>12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)</td>
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<td>13. HDX-system Performance Measures</td>
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Attachment Details

Document Description: List of CoC project applications accepted/rejected

Attachment Details

Document Description: MCHSCoC NOFA posting to website and media

Attachment Details

Document Description: MCHSCoC R&R process and procedure 2017

Attachment Details

Document Description: CoC's Rating and Review Procedure: Public Posting Evidence

Attachment Details

Document Description: MCHSCoC Rating, Ranking & Reallocation
Document Description: MCHSCoC Governance Charter

Attachment Details

Document Description: MCHSCoC HMIS P&P

Attachment Details

Document Description: Mendocino County PHA Admin Plan

Attachment Details

Document Description: MCHSCoC HMIS Partner MOU

Attachment Details

Document Description:
Submission Summary

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

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<td>1E. Project Review</td>
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<td>1F. Reallocation Supporting Documentation</td>
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<td>2C. Sheltered Data - Methods</td>
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<td>3A. System Performance</td>
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<td>3B. Performance and Strategic Planning</td>
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<td><strong>4A. Mainstream Benefits and Additional Policies</strong></td>
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<td><strong>4B. Attachments</strong></td>
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<td></td>
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**Files**

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- Concealed Subject: No
- Expiration Date: None
- Notify Recipients: Yes
- Priority: High
- Reply Requested By: None
- Security: Standard
- To Be Delivered: Immediate

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<td>596FAB27.COMDOM1.COMPO2.200.2000003.1.60D277.1</td>
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On July 14, 2017, the U.S. Department of Housing and Urban Development released the Notice of Funding Availability (NOFA) for the Fiscal Year 2017 Continuum of Care Program Competition. This year’s CoC Program Competition requires more intensive strategic resource allocation than has been necessary in past competitions. HUD will continue to require Collaborative Applicants to rank all projects in two tiers. Tier 1 is equal to the greater of the combined amount of Annual Renewal Amount (ARA) for all permanent housing and HMIS projects eligible for renewal up to $1,000,000 or 94 percent of the CoC’s FY 2017 Annual Renewal Demand (ARD), as described in Section III.A.3.a. of the NOFA. Tier 2 is the difference between Tier 1 and the CoC’s ARD plus any amount available for the permanent housing bonus as described in Section II.B.3.b. of the NOFA.

Mendocino County Annual Renewals Demand (ARD):

<table>
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<th>Amount</th>
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<tr>
<td>Tier 1: 94% of ARD</td>
<td>$1,550,888</td>
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<tr>
<td>Tier 2: 6% of ARD</td>
<td>$148,489</td>
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The Mendocino County Continuum of Care (CoC) is eligible to apply for funding to support housing and services for homeless households. That funding breaks down as follows:

**Renewal Project Funding:**
This funding supports the CoC’s existing housing and services. The CoC can continue to support those programs, or could choose to redirect those resources to new projects.

$1,649,881

**Expansion Funding:**
This funding can go toward new permanent supportive housing projects that serve only chronically homeless households, new rapid re-housing programs that serve individuals or families with children.

$148,489*

*In the 2017 competition, the CoC has the option to reallocate funds from CoC renewal projects (whose budgets would be reduced or eliminated) to fund new projects. New funding opportunities created through reallocation will only be available for new permanent supportive housing projects created through reallocation where all beds will be dedicated for use by the chronically homeless as defined in 24 CFR 578.3; and/or new rapid re-housing created for individuals or households with children who are experiencing homelessness and originally came from the streets or emergency shelter; and/or new HMIS projects; and/or new Supportive Services Only projects for Centralized or Coordinated Assessment Systems.

**Applicant Resources:**
FY 2017 CoC Program Competition Funding Availability information and resources can be located at:


I. Rating and Ranking Overview

The maximum number of points both new and renewal permanent housing projects is 50 points. For all renewal transitional housing projects the maximum number of points available is 50. For all non-housing projects including HMIS and SSO for Coordinated Entry, the maximum number of points awarded is 50.

A preliminary, quantitative review of each application submitted will be completed by the CoC. This review will:

- Confirm that application was submitted on time
- Confirm that all required attachments were submitted
- Calculate performance scores
- Assign an HMIS data quality score
- Confirm matching and/or leveraging fund requirements are met

Total scores for each project are determined by adding up points in each section and then adding any bonus points if applicable. All projects are judged together, both new and renewals. The scores from each Rating and Ranking committee member is computed and averaged for each project. HMIS applications will receive full credit for each section that is not applicable to its project type. A project ranking list is then generated from highest to lowest average score. Projects will be approved for submission to HUD based on the project funding requests that fall within the final pro rata share for the CoC, split between Tiers 1 and 2, according to Section II of the 2017 HUD NOFA. Projects scoring highest will be ranked and placed into Tier 1 until all Tier 1 funds are allocated. The remaining projects selected for funding will be ranked and placed into Tier 2 until all Tier 2 funds are allocated. Projects that scored well but fell outside the pro rata share may be encouraged to re-submit in a future competition.

Renewal projects that were recommended for funding but did not meet two or more performance measurements may be placed on probation for a one year term due to performance concerns. The CoC will work with these projects over the next year to develop a plan to improve program performance and monitor the progress with these efforts. If these efforts are not successful, projects may not be able to submit the following year.

There also may be new projects that fail to score well enough that are held out of the competition. These projects may request that the CoC provide them with technical assistance to assist them in improving their application for future competitions. This process ensures that organizations that may lack the current capacity to receive a federal grant, can build their capacity for a future year.

II. Project Scoring

New Project Scoring: Applicants will be scored on project design, how the project addresses local priority need areas; how the project aligns with Mendocino County CoC’s local strategies to end homelessness; budget appropriateness and accuracy; project match; leveraging; CoC participation; community collaboration; housing to services funding request ratio, organizational capacity and implementation timeline. Other factors in the rating of New Projects will include community involvement, and information learned through the discussion period during the rating/ranking session. New Projects will be ranked in conjunction with Renewal Projects to ensure that the best applications are forwarded to the federal competition.

Renewal Project Scoring: Applicants will be scored on project design; description of how the project continues to address community needs; budget appropriateness and accuracy; project match; CoC participation; community collaboration; performance measurements, and timely spending of HUD funds. 10% of a renewal project’s score will be based on HMIS data quality and 64% of scoring which is based on performance measurements. Please contact the HMIS Coordinator if you have questions about your data quality.
Performance and HMIS are heavily weighted measures used by HUD in determining the overall CoC Application scores of local Continuums. Data taken from each project’s Annual Performance Report (APR) submitted to HUD is used to calculate the overall CoC systems performance in moving to permanent housing, housing stability, and accessing mainstream resources and employment resources. Additionally, performance data collected helps the CoC to better define local homelessness issues and help to achieve the goal of ending homelessness. Participation in HMIS and quality data entry is mandatory for those agencies seeking new and renewal CoC funds.

APR performance measurements provide an objective evaluation of current program performance. They can be easily calculated measures and data entry is a limited burden on program providers. It provides the quantitative basis for scoring the performance of renewal projects in the CoC’s local application process and is used by the CoC to assess the system wide progress of the region in meeting established benchmarks.

A. Leverage and Match
Recipients and sub-recipients are required to provide 25% cash or in-kind match in accordance with the CoC Regulations. In addition, HUD scores the CoC on program leverage to see what other resources are supporting the programs it funds. In order to receive maximum points in the competition, applicants must have 175% leverage documented for their program.

- **Renewal Applicants:** For the 2017 NOFA Competition, HUD is requiring that renewal applicants provide a list of leveraged resources and collect match and leverage documentation as part of their application.
- **New Applicants:** New applicants are required to submit match and leverage documentation as part of their application.

Please see the Appendix for resources that provide examples of documentation and potential sources of match and leverage.

B. Performance Measurements
Performance is the most heavily weighted criteria used by HUD when scoring Homeless Assistance Program applications. The burden of performance falls on both the CoC and the individual projects funded by the CoC. It is therefore crucial that all projects make every attempt possible to meet or exceed their program outcomes. The CoC will assist projects that are having difficulty in meeting objectives in any way they can.

C. Rating and Ranking Members
The CoC recruits Application Review Committee members who are knowledgeable about homelessness and housing in the area and who are broadly representative of the relevant Mendocino County Homeless Services Continuum of Care (MCHS CoC) sectors, subpopulations, and geographic areas. The Application Review Committee will be composed of representatives from a cross-section of groups within the MCHS CoC, as described in the MCHS CoC Governance Charter. Complete guidelines regarding the policies and selection process of Application Review Committee Members can be found in the MCHS CoC Governance Charter, located on the CoC’s website at [http://www.co.mendocino.ca.us/hhsa/adult/coc.htm](http://www.co.mendocino.ca.us/hhsa/adult/coc.htm).

D. Appeals Process
If an applicant organization feels it has been unfairly eliminated from either the local or the federal competition, that a decision made by the Application Review Committee regarding the ranking, rejection, or funding of their project was prejudicial, unsubstantiated by project performance, or in violation of the 2016 Continuum of Care Guidelines, the applying lead agency and sponsor if any may file an appeal by contacting the collaborative applicant for further instructions.
III. Assurances

By submitting the application, the project applicant assures the following:

- Applicant will complete the Project Application with the same information as contained in this application unless there were adjustments made during the rating/ranking process. Those adjustments will be included in your project ranking letter and will supersede the original application submitted. The PDF of the application is available on the Mendocino County CoC website.
- Applicant agrees to participate fully in ClientTrack, the local Homeless Management Information System (HMIS).
- Applicant agrees to fully participate in the Coordinated Entry and Assessment Strategy for Mendocino County Homeless Services CoC.
- Applicant understands that HUD funded homeless assistance projects are monitored by the CoC and may include an annual site monitoring visit, as well as the submission of the program’s most recent Annual Performance Report sent to HUD and their most recent audited financial statement and any management letters if applicable when submitting their application.
- Applicant understands that if funding is awarded they are responsible to inform the CoC when:
  - Changes to an existing project or change in sub-population served that is significantly different than what the funds were originally approved for, including any budget amendments submitted to HUD
  - Increase/decrease of other funding to the project that could affect projected numbers of participants served, program staffing, performance, etc.
  - Delays in the start-up of a new project
  - Program is having difficulty in meeting projected numbers served or performance outcomes.
- Project Applicant agrees to execute the following document and submit as a part of their application to the Application and Review Committee:
  - A signed contract between the sub-recipient and the recipient for CoC funds
IV. **Timeline**

This list highlights the steps your agency will take to participate in the local NOFA competition. Please take special note of these dates.

**August 24, 2017**

5:00 p.m.: Submit Complete Application for Rating & Ranking

Submit 1 electronic copy: Prepare a PDF version of the Project Application and email to stuartm@mendocinocounty.org

Additional documentation which may be required:
- Project leverage letters
- Project related MOU’s (if applicable)
- HUD monitoring letter and/or related correspondence with HUD (if applicable)
- Executed Hold Harmless Agreement

Submit these materials in printed form to the following address:

Mendocino County HHSA
Adult and Aging Services
Attn: Maya Stuart, MA., Continuum of Care
P.O. Box 839, Ukiah, CA 95482

BOTH THE ELECTRONIC AND HARD COPIES NEED TO BE DELIVERED BY 4:59:59 P.M. PST ON September 28, 2016. LATE AND/OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

**August 28-September 1, 2017:** Rating & Ranking

The Application Review Committee will meet no later than September 8, 2017. At that time all project applications will be reviewed.

**September 13, 2017:** Notification of Funding Recommendations

On September 13, 2017, you will be notified of the results of the Rating and Ranking process. At this time, you should begin finalizing your application for submission to HUD.

**September 19, 2016:** Final Application Deadline

Between September 12 and September 19, applicants should finalize their applications, incorporating recommendations from the Application Review Committee. Project applications must be uploaded by midnight on September 19. **Between September 12 and September 19, please be sure that someone familiar with your project is available to answer last minute application questions or make corrections.**

**September 21, 2016:** Entire Consolidated Application Submitted to HUD (by CoC) by 4:59:59 p.m. P.S.T.

Any project applicant that submits a project that was rejected by the CoC in the local competition will be notified in writing by the CoC, outside of e-snaps, with an explanation for the decision to reject the project(s). Project applicants whose project was rejected may appeal the local CoC competition decision to HUD if the project applicant believes it was denied the opportunity to participate in the local CoC planning process in a reasonable manner by submitting a Solo Application in e-snaps directly to HUD prior to the application deadline of 7:59:59 p.m. eastern time on September 28, 2017. The CoC’s notification of rejection of the project in the local competition must be attached to the Solo Application.
V. **Reallocation Process:**

Each renewal project will be assessed by CoC staff to determine if reallocation should be considered, and to determine a reallocation amount for consideration by the Governing Board. CoC staff will assess each renewal project using the following questions:

1. Has the project had significant recaptures in the past two completed grant cycles? If so, what amounts have been recaptured?
2. Would the project have the capacity to continue operations (at the same or a reduced level) with a decreased CoC award?
3. Do CoC survey results related to funding priorities and CoC service needs indicate that this project type should be considered for reallocation?
4. What are the project’s contributions toward CoC progress in meeting HUD’s Policy Priorities (taken from Renewal Application)?

Completed Reallocation Assessments will be provided to the Application Review Committee to inform decision making process related to reallocation.
Appendix B: Documentation of Leveraged Resource or Cash Match

[This must be on the letterhead of the entity providing the leverage or cash resource]

In the chart below is information regarding the leveraged resource or cash match being provided by this agency. Name of organization providing the leveraged resource or cash match.

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Appendix C: Examples of Leverage

**Advocacy**
- Assistance to immigration
- Benefits advocacy
- Housing advocacy
- Legal assistance, advocacy, representation, and referrals
- Peer advocacy
- Tenant rights workshops

**Children**
- After-school children’s program
- Child development consultation
- Child care services
- Children’s books, loaned television, videos, art supplies as available, training, tickets for special events
- Children’s art program
- Children’s circus program
- Children’s holiday party and shopping spree
- K-12 homeless education
- Parenting classes
- Summer camp
- Therapeutic day care
- Weekly children’s art program

**Counseling**
- Bereavement counseling and pastoral services
- Counseling services
- Crisis intervention
- Landlord/tenancy counseling
- Pre-treatment counseling, support groups, counseling, and housing assistance
- Recovery groups
- Support groups
- Therapy

**Education, Employment and Training**
- After school and associated summer school activities
- Aftercare services
- Basic computer skills classes and individual tutoring for residents and graduates
- Benefits and Work Incentive Workshops
- Computer literacy training
- Employment and training services
- Education/courses
- Education counseling

**ESL**
- Job development and employment services
- Job research
- Job placement
- Job retention
- Leadership training
- Life skills training
- Literacy
- Nutrition education/cooking classes
- School supplies for children
- Sewing classes
- Training tuition
- Training videos and games
- Transitional housing
- Tutoring
- Uniform vouchers
- Vocational services

**Financial Services**
- Asset/resource management services
- Money management
- Representative payee services

**Health**
- Acupuncture services
- Adult day health care
- AIDS-related services
- Dental screening services
- Dual diagnosis services
- Emergency room services
- Gynecological services
- Health care resources and education
- Healthcare services
- Medical services
- Medical, psychiatric and pharmacy services
- Medication support
- Mental health services
- Peer support
- Pregnancy testing
- Preventative health care services
- Psychiatric disability evaluations
- Psychotherapy
- Residential and outpatient treatment services
- Respite care
- Substance abuse services
- Triage
Housing
Construction loans cash match
Emergency motel vouchers
Emergency shelter
Financial move in grants, housing search support and monthly housing clinics
Housing placement
Housing search assistance
Leasehold value of building
Maintenance and repair projects/beautification project
Move-in assistance
Property management
Rental assistance and financial assistance for move-in costs
Rental subsidies

Human Resources
AmeriCorps VISTA Volunteers
Advertising
Applicant interview
Consultation staff
Mental health advocacy staff
New employee orientation
Pre-employment process
Volunteer hours

In-Kind
Cash/grants
Clothing
Equipment
Food
Furnishings
Household items
Welfare benefits

Operations
Administrative support
Clerical services
Consulting and practical support
Facility space
Indirect expenses
Mail service
Office/workshop space
Programming
Voice mail

Supportive Services
Artistic services to residents
Assessment services
CalWORKs eligibility support
Case management

Community development
Family Support Services
Grooming
Independent living services
Mentoring services
Outreach
Recreational trips and activities
Referrals
Restraining order assistance, court accompaniment and consultation
Shelter services
Story telling
Support services supervision
Team leader
Technical assistance
Translation services
Veteran’s services assistance
YMCA membership & joining fees

Transportation
Subsidized/free bus passes
Transportation
Vehicle
Hello,

Maya has asked me to make sure you have all received these attachments.

Thank you,

**Dennie**
Dennie Maslak
Staff Assistant III
Adult & Aging Services
In Home Support Services
707-467-5851

**KNOW ABUSE REPORT ABUSE**
ELDER AND DEPENDENT ADULT ABUSE AWARENESS MONTH

**REPORT TODAY: APS: 877-327-1799**

CONFIDENTIALITY NOTICE: This e-mail/message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, or distribution is prohibited. If you are not the intended recipient, please contact the sender by "reply" e-mail and destroy all copies of the original message.
Here is the rest of the NOFA info for you.

Thanks,

Dennie
Dennie Maslak
Staff Assistant III
Adult & Aging Services
In Home Support Services
707-467-5851

CONFIDENTIALITY NOTICE: This e-mail/message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, or distribution is prohibited. If you are not the intended recipient, please contact the sender by "reply" e-mail and destroy all copies of the original message.
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2017 Notice of Funding Availability (NOFA)

Homeless Services Continuum of Care Governing Board Meeting Agenda for July 11, 2017
- Homeless Services Continuum of Care Governing Board Meeting Agenda for August 21, 2017
- Homeless Services Continuum of Care Governing Board Meeting Agenda for September 15, 2017

COC Meeting Agendas and Minutes
- Conditional Early釆用Program 停止 at 2017
- 2017 Meeting Schedule
- Notice of Funding Availability Announcement (/video)

News & Notes
- Memorandum of Agreement
- Memorandum of Agreement Memorandum

Mendocino County

Mendocino County Continuum of Care (MCHCC)

Mendocino County Homeless Services

Mendocino County Human Services

Mendocino County Public Health

Mendocino County Environmental Health

Mendocino County Human Services

Mendocino County Animal Care Services

Mendocino County Continuum of Care
On July 14, 2017, the U.S. Department of Housing and Urban Development released the Notice of Funding Availability (NOFA) for the Fiscal Year 2017 Continuum of Care Program Competition. This year’s CoC Program Competition requires more intensive strategic resource allocation than has been necessary in past competitions. HUD will continue to require Collaborative Applicants to rank all projects in two tiers. Tier 1 is equal to the greater of the combined amount of Annual Renewal Amount (ARA) for all permanent housing and HMIS projects eligible for renewal up to $1,000,000 or 94 percent of the CoC’s FY 2017 Annual Renewal Demand (ARD), as described in Section III.A.3.a. of the NOFA. Tier 2 is the difference between Tier 1 and the CoC’s ARD plus any amount available for the permanent housing bonus as described in Section II.B.3.b. of the NOFA.

Mendocino County Annual Renewals Demand (ARD): $1,649,881
Tier 1: 94% of ARD $1,550,888
Tier 2: 6% of ARD $148,489

The Mendocino County Continuum of Care (CoC) is eligible to apply for funding to support housing and services for homeless households. That funding breaks down as follows:

**Renewal Project Funding:**
This funding supports the CoC’s existing housing and services. The CoC can continue to support those programs, or could chose to redirect those resources to new projects.

$1,649,881

**Expansion Funding:**
This funding can go toward new permanent supportive housing projects that serve only chronically homeless individuals, new rapid re-housing programs that serve individuals or families with children.

$148,489*

*In the 2017 competition, the CoC has the option to reallocate funds from CoC renewal projects (whose budgets would be reduced or eliminated) to fund new projects. New funding opportunities created through reallocation will only be available for new permanent supportive housing projects created through reallocation where all beds will be dedicated for use by the chronically homeless as defined in 24 CFR 578.3; and/or new rapid re-housing created for individuals or households with children who are experiencing homelessness and originally came from the streets or emergency shelter; and/or new HMIS projects; and/or new Supportive Services Only projects for Centralized or Coordinated Assessment Systems.

**Applicant Resources:**
FY 2017 CoC Program Competition Funding Availability information and resources can be located at:

I. Rating and Ranking Overview

The maximum number of points both new and renewal permanent housing projects is 50 points. For all renewal transitional housing projects the maximum number of points available is 50. For all non-housing projects including HMIS and SSO for Coordinated Entry, the maximum number of points awarded is 50.

A preliminary, quantitative review of each application submitted will be completed by the CoC. This review will:
• Confirm that application was submitted on time
• Confirm that all required attachments were submitted
• Calculate performance scores
• Assign an HMIS data quality score
• Confirm matching and/or leveraging fund requirements are met

Total scores for each project are determined by adding up points in each section and then adding any bonus points if applicable. All projects are judged together, both new and renewals. The scores from each Rating and Ranking committee member is computed and averaged for each project. HMIS applications will receive full credit for each section that is not applicable to its project type. A project ranking list is then generated from highest to lowest average score. Projects will be approved for submission to HUD based on the project funding requests that fall within the final pro rata share for the CoC, split between Tiers 1 and 2, according to Section II of the 2017 HUD NOFA. Projects scoring highest will be ranked and placed into Tier 1 until all Tier 1 funds are allocated. The remaining projects selected for funding will be ranked and placed into Tier 2 until all Tier 2 funds are allocated. Projects that scored well but fell outside the pro rata share may be encouraged to re-submit in a future competition.

Renewal projects that were recommended for funding but did not meet two or more performance measurements may be placed on probation for a one year term due to performance concerns. The CoC will work with these projects over the next year to develop a plan to improve program performance and monitor the progress with these efforts. If these efforts are not successful, projects may not be able to submit the following year.

There also may be new projects that fail to score well enough that are held out of the competition. These projects may request that the CoC provide them with technical assistance to assist them in improving their application for future competitions. This process ensures that organizations that may lack the current capacity to receive a federal grant, can build their capacity for a future year.

II. Project Scoring

New Project Scoring: Applicants will be scored on project design, how the project addresses local priority need areas; how the project aligns with Mendocino County CoC’s local strategies to end homelessness; budget appropriateness and accuracy; project match; leveraging; CoC participation; community collaboration; housing to services funding request ratio, organizational capacity and implementation timeline. Other factors in the rating of New Projects will include community involvement, and information learned through the discussion period during the rating/ranking session. New Projects will be ranked in conjunction with Renewal Projects to ensure that the best applications are forwarded to the federal competition.

Renewal Project Scoring: Applicants will be scored on project design; description of how the project continues to address community needs; budget appropriateness and accuracy; project match; CoC participation; community collaboration; performance measurements, and timely spending of HUD funds. **10% of a renewal project’s score will be based on HMIS data quality and 64% of scoring which is based on performance measurements. Please contact the HMIS Coordinator if you have questions about your data quality.***
Performance and HMIS are heavily weighted measures used by HUD in determining the overall CoC Application scores of local Continuums. Data taken from each project’s Annual Performance Report (APR) submitted to HUD is used to calculate the overall CoC systems performance in moving to permanent housing, housing stability, and accessing mainstream resources and employment resources. Additionally, performance data collected helps the CoC to better define local homelessness issues and help to achieve the goal of ending homelessness. Participation in HMIS and quality data entry is mandatory for those agencies seeking new and renewal CoC funds.

APR performance measurements provide an objective evaluation of current program performance. They can be easily calculated measures and data entry is a limited burden on program providers. It provides the quantitative basis for scoring the performance of renewal projects in the CoC’s local application process and is used by the CoC to assess the system wide progress of the region in meeting established benchmarks.

A. Leverage and Match
Recipients and sub-recipients are required to provide 25% cash or in-kind match in accordance with the CoC Regulations. In addition, HUD scores the CoC on program leverage to see what other resources are supporting the programs it funds. In order to receive maximum points in the competition, applicants must have 175% leverage documented for their program.

- **Renewal Applicants**: For the 2017 NOFA Competition, HUD is requiring that renewal applicants provide a list of leveraged resources and collect match and leverage documentation as part of their application.
- **New Applicants**: New applicants are required to submit match and leverage documentation as part of their application.

Please see the Appendix for resources that provide examples of documentation and potential sources of match and leverage.

B. Performance Measurements
Performance is the most heavily weighted criteria used by HUD when scoring Homeless Assistance Program applications. The burden of performance falls on both the CoC and the individual projects funded by the CoC. It is therefore crucial that all projects make every attempt possible to meet or exceed their program outcomes. The CoC will assist projects that are having difficulty in meeting objectives in any way they can.

C. Rating and Ranking Members
The CoC recruits Application Review Committee members who are knowledgeable about homelessness and housing in the area and who are broadly representative of the relevant Mendocino County Homeless Services Continuum of Care (MCHS CoC) sectors, subpopulations, and geographic areas. The Application Review Committee will be composed of representatives from a cross-section of groups within the MCHS CoC, as described in the MCHS CoC Governance Charter. Complete guidelines regarding the policies and selection process of Application Review Committee Members can be found in the MCHS CoC Governance Charter, located on the CoC’s website at [http://www.co.mendocino.ca.us/hhsa/adult/coc.htm](http://www.co.mendocino.ca.us/hhsa/adult/coc.htm).

D. Appeals Process
If an applicant organization feels it has been unfairly eliminated from either the local or the federal competition, that a decision made by the Application Review Committee regarding the ranking, rejection, or funding of their project was prejudicial, unsubstantiated by project performance, or in violation of the 2016 Continuum of Care Guidelines, the applying lead agency and sponsor if any may file an appeal by contacting the collaborative applicant for further instructions.
III. **Assurances**

By submitting the application, the project applicant assures the following:

- Applicant will complete the Project Application with the same information as contained in this application unless there were adjustments made during the rating/ranking process. Those adjustments will be included in your project ranking letter and will supersede the original application submitted. The PDF of the application is available on the Mendocino County CoC website.

- Applicant agrees to participate fully in ClientTrack, the local Homeless Management Information System (HMIS).

- Applicant agrees to fully participate in the Coordinated Entry and Assessment Strategy for Mendocino County Homeless Services CoC.

- Applicant understands that HUD funded homeless assistance projects are monitored by the CoC and may include an annual site monitoring visit, as well as the submission of the program’s most recent Annual Performance Report sent to HUD and their most recent audited financial statement and any management letters if applicable when submitting their application.

- Applicant understands that if funding is awarded they are responsible to inform the CoC when:
  - Changes to an existing project or change in sub-population served that is significantly different than what the funds were originally approved for, including any budget amendments submitted to HUD
  - Increase/decrease of other funding to the project that could affect projected numbers of participants served, program staffing, performance, etc.
  - Delays in the start-up of a new project
  - Program is having difficulty in meeting projected numbers served or performance outcomes.

- Project Applicant agrees to execute the following document and submit as a part of their application to the Application and Review Committee:
  - A signed contract between the sub-recipient and the recipient for CoC funds
IV. **Timeline**

This list highlights the steps your agency will take to participate in the local NOFA competition. Please take special note of these dates.

**August 24, 2017**

5:00 p.m.: **Submit Complete Application for Rating & Ranking**

Submit 1 electronic copy: Prepare a PDF version of the Project Application and email to stuartm@mendocinocounty.org

Additional documentation which may be required:
- Project leverage letters
- Project related MOU’s (if applicable)
- HUD monitoring letter and/or related correspondence with HUD (if applicable)
- Executed Hold Harmless Agreement

Submit these materials in printed form to the following address:

Mendocino County HHSA
Adult and Aging Services
Attn: Maya Stuart, MA., Continuum of Care
P.O. Box 839, Ukiah, CA 95482

**BOTH THE ELECTRONIC AND HARD COPIES NEED TO BE DELIVERED BY 4:59:59 P.M. PST ON September 28, 2016. LATE AND/OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

**August 28-September 1, 2017:**

**Rating & Ranking**

The Application Review Committee will meet no later than September 8, 2017. At that time all project applications will be reviewed.

**September 13, 2017:**

**Notification of Funding Recommendations**

On September 13, 2017, you will be notified of the results of the Rating and Ranking process. At this time, you should begin finalizing your application for submission to HUD.

**September 19, 2016:**

**Final Application Deadline**

Between September 12 and September 19, applicants should finalize their applications, incorporating recommendations from the Application Review Committee. Project applications must be uploaded by midnight on September 19. **Between September 12 and September 19, please be sure that someone familiar with your project is available to answer last minute application questions or make corrections.**

**September 21, 2016:**

**Entire Consolidated Application Submitted to HUD (by CoC) by 4:59:59 p.m. P.S.T.**

Any project applicant that submits a project that was rejected by the CoC in the local competition will be notified in writing by the CoC, outside of e-snaps, with an explanation for the decision to reject the project(s). Project applicants whose project was rejected may appeal the local CoC competition decision to HUD if the project applicant believes it was denied the opportunity to participate in the local CoC planning process in a reasonable manner by submitting a Solo Application in e-snaps directly to HUD prior to the application deadline of 7:59:59 p.m. eastern time on September 28, 2017. The CoC’s notification of rejection of the project in the local competition must be attached to the Solo Application.
V. **Reallocation Process:**

Each renewal project will be assessed by CoC staff to determine if reallocation should be considered, and to determine a reallocation amount for consideration by the Governing Board. CoC staff will assess each renewal project using the following questions:

1. Has the project had significant recaptures in the past two completed grant cycles? If so, what amounts have been recaptured?
2. Would the project have the capacity to continue operations (at the same or a reduced level) with a decreased CoC award?
3. Do CoC survey results related to funding priorities and CoC service needs indicate that this project type should be considered for reallocation?
4. What are the projects contributions toward CoC progress in meeting HUD’s Policy Priorities (taken from Renewal Application)?

Completed Reallocation Assessments will be provided to the Application Review Committee to inform decision making process related to reallocation.
### Appendix B: Documentation of Leveraged Resource or Cash Match

[This must be on the letterhead of the entity providing the leverage or cash resource]

In the chart below is information regarding the leveraged resource or cash match being provided by this agency. Name of organization providing the leveraged resource or cash match.

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Name of project

Name of sponsor

Date the contribution will be available** [___________], 2018 OR [___________], 2019

Name of person authorized to commit these resources.

Title of person authorized to commit these resources.

Date
Appendix C: Examples of Leverage

**Advocacy**
Assistance to immigration
Benefits advocacy
Housing advocacy
Legal assistance, advocacy, representation, and referrals
Peer advocacy
Tenant rights workshops

**Children**
After-school children's program
Child development consultation
Child care services
Children's books, loaned television, videos, art supplies as available, training, tickets for special events
Children's art program
Children's circus program
Children's holiday party and shopping spree
K-12 homeless education
Parenting classes
Summer camp
Therapeutic day care
Weekly children's art program

**Counseling**
Bereavement counseling and pastoral services
Counseling services
Crisis intervention
Landlord/tenancy counseling
Pre-treatment counseling, support groups, counseling, and housing assistance
Recovery groups
Support groups
Therapy

**Education, Employment and Training**
After school and associated summer school activities
Aftercare services
Basic computer skills classes and individual tutoring for residents and graduates
Benefits and Work Incentive Workshops
Computer literacy training
Employment and training services
Education/courses
Education counseling

ESL
Job development and employment services
Job research
Job placement
Job retention
Leadership training
Life skills training
Literacy
Nutrition education/cooking classes
School supplies for children
Sewing classes
Training tuition
Training videos and games
Transitional housing
Tutoring
Uniform vouchers
Vocational services

**Financial Services**
Asset/resource management services
Money management
Representative payee services

**Health**
Acupuncture services
Adult day health care
AIDS-related services
Dental screening services
Dual diagnosis services
Emergency room services
Gynecological services
Health care resources and education
Healthcare services
Medical services
Medical, psychiatric and pharmacy services
Medication support
Mental health services
Peer support
Pregnancy testing
Preventative health care services
Psychiatric disability evaluations
Psychotherapy
Residential and outpatient treatment services
Respite care
Substance abuse services
Triage
Housing
Construction loans cash match
Emergency motel vouchers
Emergency shelter
Financial move in grants, housing search support and
monthly housing clinics
Housing
Housing placement
Housing search assistance
Leasehold value of building
Maintenance and repair projects/beautification
project
Move-in assistance
Property management
Rental assistance and financial assistance for move-
in costs
Rental subsidies

Human Resources
AmeriCorps VISTA Volunteers
Advertising
Applicant interview
Consultation staff
Mental health advocacy staff
New employee orientation
Pre-employment process
Volunteer hours

In-Kind
Cash/grants
Clothing
Equipment
Food
Furnishings
Household items
Welfare benefits

Operations
Administrative support
Clerical services
Consulting and practical support
Facility space
Indirect expenses
Mail service
Office/workshop space
Programming
Voice mail

Supportive Services
Artistic services to residents
Assessment services
CalWORKs eligibility support
Case management
Governance Charter

I. NAME AND JURISDICTION
   The Mendocino County Homeless Services Continuum of Care (“MCHSCoC”) evolved from an effort to provide a coordinated community-wide response to homelessness in the geographic area of Mendocino County through a Continuum of Care (“CoC”). The MCHSCoC is the CoC for Mendocino County. The MCHSCoC Governing Board (“Governing Board”) is the oversight board of the MCHSCoC.

II. PURPOSE
   The purpose of the MCHSCoC is to provide a coordinated and strategic approach to planning and management of a range of resources to address the needs of families and individuals at risk of homelessness and those who are currently experiencing homelessness in Mendocino County through a CoC. The MCHSCoC brings together a broad spectrum of participants to address all aspects of homelessness and the needs of all the homeless subpopulations. The MCHSCoC works collaboratively to set and achieve goals that are shared by its members.

   The Governing Board serves as the Department of Housing and Urban Development (HUD)-designated primary decision making group and oversight board of the CoC funding process for Mendocino County. As the oversight board of the MCHSCoC, the Governing Board:

   A. Ensures that the MCHSCoC , as the CoC for the geographic area of Mendocino County, is meeting all of the responsibilities assigned to it by HUD regulations (see “Responsibilities” below);

   B. Represents the relevant organizations and projects serving subpopulations;

   C. Supports homeless persons in their movement from homelessness to affordable permanent housing and economic stability within a supportive community;

   D. Ensures that the MCHSCoC is inclusive of all needs of Mendocino County’s homeless sub-populations; and

   E. Facilitates responses to issues and concerns that affect the agencies funded by CoC funds that are beyond those addressed in the annual CoC application process.
III. MEMBERSHIP

A. GOVERNING BOARD MEMBERSHIP

Each year, at the annual MCHSCoC General Orientation and Membership Invitation Event, the structure of the MCHSCoC, committees and workgroups, and the Governing Board is outlined. The nomination process for the Governing Board is also explained. Then at the MCHSCoC’s Annual Governance Meeting, a slate of potential Governing Board members (developed as described in the “Governing Board and Officer Nomination and Terms, Section VII”) is presented to and voted on by the full MCHSCoC general membership.

The Governing Board Membership consists of agencies or individuals described in the “MCHSCoC Governing Board Membership” table incorporated in this Charter as Figure One to Addendum A.

1. The executive director, or authorized representative, of an agency which has been voted in as a member of the Governing Board may appoint an individual from their organization to serve as Governing Board member in their stead;

2. Each Governing Board member may appoint in writing, by telephone, or e-mail, an alternate voting representative if the designated voting representative is unable to attend a meeting. The written proxy will be given to the Secretary prior to the meeting;

Each designated role has one seat on the Board, except as otherwise indicated.

The MCHSCoC does not currently have a member organization who is an Emergency Solutions Grantee (ESG). If a member organization does become an ESG, and that organization is not a Shelter Organization, a seat will be added to the Governing Board for that ESG organization.

Additional Membership Conditions:

1. No organization may have more than one staff person seated on the Governing Board at any time, regardless of which seats they occupy;

2. The Governing Board is established/activated once seven of the seventeen seats are occupied, pursuant to the process established by this Charter. Two of the seven must include the Collaborative Applicant and the Homeless or Formerly Homeless Individual.
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B. MCHSCoC GENERAL MEMBERSHIP

The MCHSCoC General Membership is a volunteer and/or appointed membership. The Governing Board, with the assistance of the Membership Committee will issue a public invitation for new members at least annually, through a General Orientation and Membership Event. The Governing Board and MCHSCoC general membership may solicit specifically for members to represent under-represented subpopulations or groups, including initiating additional actions to ensure representation by homeless and/or formerly homeless persons. Applications for membership shall be reviewed, approved or denied as provided by Section “IV.C.1.g. Membership Committee” of this Charter.

Current Members are incorporated in this Governance Charter in the “MCHSCoC Membership List” at Addendum A, Figure 2. The MCHSCoC general Membership List will be updated at a minimum once a year.

The MCHSCoC is broadly representative of the public and private homeless service sectors, including homeless client/consumer interests. The CoC Interim rule (24 CFR Part 578.5) outlines those organizations and individuals, that are to be included as part of the membership in the MCHSCoC. The General Membership consists of three membership categories:

1. **Agency/Organization Membership:** A member agency/organization is a public or private agency or organization that can or does address short and longer-term housing needs, health needs, legal needs, case management, education, or other support services related to the homeless in Mendocino County. Agency/organization membership requires completion of the General Membership Form as prepared and updated by the Governing Board with the assistance of the Membership Committee. This form is incorporated to this Charter as Addendum C.

2. **Individual Membership:** An individual member is a concerned community member who is homeless, or formerly homeless, or has otherwise demonstrated a personal interest in the needs of the homeless in Mendocino County. Individual membership requires completion of the General Membership Form.

3. **Advisory Membership:** An advisory membership is for those stakeholder individuals and agencies that are interested in participating in the MCHSCoC, but are unable to fulfill membership duties. Advisory membership requires completion of the General Membership Form. Advisory members do not have the power to vote at any meetings.

C. CODE OF CONDUCT

1. **Scope**
This section applies to all Members of the MCHSCoC, its Board Members, officers and all persons acting on behalf of the MCHSCoC, herein the Code of Conduct referred to as "Members".

2. **General Statement of Expectation**
   Each Member is expected to adhere to a high standard of ethical conduct and to act in accordance with the MCHSCoC’s Mission. Unethical actions, or the appearance of unethical actions, are not acceptable. Members are to be guided by the following principles in carrying out their responsibilities. Note, however, that this Code summarizes such principles and nothing in this Code should be considered as limiting duties, obligations or legal requirements with which Members must comply.

   a. **Loyalty**: Members should not be, or appear to be, subject to influences, interests or relationships that conflict with the mission and purpose of the MCHSCoC.

   b. **Care**: Members shall apply themselves with seriousness and diligence to participating in the affairs of the Board and its committees and shall act prudently in exercising management oversight of the MCHSCoC. Members are expected to understand the MCHSCoC’s principal policies and core values.

   c. **Inquiry**: Members shall take such steps as are necessary to be sufficiently informed to make decisions on behalf of the MCHSCoC and to participate in an informed manner in the MCHSCoC's activities. Members are expected to attend all meetings of the MCHSCoC, except if unusual circumstances make attendance impractical.

   d. **Compliance with Laws, Rules and Regulations**: Members shall comply with all laws, rules and regulations applicable to the MCHSCoC.

   e. **Observance of Ethical Standards**: Members must adhere to the highest of ethical standards in the conduct of their duties. These include honesty, fairness and integrity.

3. **Integrity of Records**
   Members should promote the accurate and reliable preparation and maintenance of the MCHSCoC’s records. Diligence in accurately preparing and maintaining MCHSCoC’s records allows the MCHSCoC to fulfill its reporting obligations and to provide governmental authorities and the general public with full, fair, accurate, timely, understandable, open and transparent disclosure.

4. **Conflicts of Interest**
Members must act in accordance with the conflicts of interest requirements at 24 CFR §578.95(b), namely that no member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents. Members shall review and sign the MCHSCoC’s conflict of interest policy before or at the time of taking their seat.

5. Affirmation

All Members shall read this Code at least annually, and shall certify in writing that they have done so and understand the Code.

6. Recusal Process

Definition: “Recusal” means the process by which a person disqualifies himself or herself from a matter because of prejudice or a conflict of interest.

Members, officers or anyone acting on behalf of the MCHSCoC (including committee members) must recuse themselves from participating in or influencing discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents, and must recuse themselves in matters as otherwise applicable under 24 CFR §578.95.

7. Enforcement

Members will discuss with the Chair of the Board or the Co-Chair of the Board, any questions or issues that may arise concerning compliance with this Code of Conduct. Breaches of this Code, whether intentional or unintentional, shall be reviewed by the Governing Board (excluding any Members whose breaches are under review). Serious breaches of this Code may be cause for dismissal of the Member. Decisions to dismiss shall be made by majority vote of the MCHSCoC Governing Board at a properly convened meeting of the Board; the meeting shall be by closed session if requested by the Member being reviewed. The Member shall have a right to present a defense at such meeting prior to a final decision.

IV. RESPONSIBILITIES

A. GOVERNING BOARD MEMBERS
As the designated board of the MCHSCoC, the Governing Board, with the assistance of the MCHSCoC committees, works with the MCHSCoC Collaborative Applicant and HMIS Lead to fulfill three major duties:

1. **Operate the MCHSCoC, which must:**
   a) Hold meetings of the full MCHSCoC General membership, with published agendas, at least quarterly;
   b) Issue a public invitation for new member agencies or individuals within Mendocino County, at least annually with the assistance of the Membership Committee;
   c) Follow the written process to select board members. Lead the MCHSCoC in reviewing and updating the board selection process for approval of the MCHSCoC General membership at least once every 5 years;
   d) Establish additional committees, subcommittees, or workgroups;
   e) Each Governing Board member shall serve one year on a Standing Committee or Work Group as appointed by the Chair of the Governing Board;
   f) In consultation with the Collaborative applicant and the HMIS Lead, and with the assistance of the Strategic Planning Committee, further develop, follow, and update annually a governance charter, which includes all procedures and policies necessary to comply with CoC program requirements, as prescribed by HUD; and maintain a code of conduct and a recusal process for the Governing Board, its chair(s), and any person acting on behalf of the Governing Board;
   g) With the assistance of the Performance Measurement Committee, consult with recipients and sub-recipients of CoC funding to establish performance targets appropriate for population and program type, monitor recipient and sub-recipient performance, evaluate outcomes, and take action against poor performers;
   h) With the assistance of the Performance Measurement Committee, evaluate outcomes of projects funded under the Emergency Solutions Grants (“ESG”) program and the CoC program, and report to HUD;
   i) In consultation with recipients of ESG program funds within Mendocino County, and with the assistance of the Strategic Planning Committee, establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. Develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address
the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers; this system will comply with any requirements established by HUD by notice;

j) In consultation with ESG recipients within Mendocino County, and with the assistance of the Strategic Planning Committee, establish and consistently follow written standards for providing CoC assistance. At a minimum, these written standards, must include:

i. Policies and procedures for evaluating individuals’ and families’ eligibility for assistance under the CoC program (24 CFR Part 578);

ii. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;

iii. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid re-housing assistance;

iv. Policies and procedures for determining what percentage or amount of rent each program participant must pay while receiving rapid re-housing assistance;

v. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and

vi. If the MCHSCoC is designated a high-performing community, policies and procedures set forth in 24 CFR 576.400(e)((3)(vi), (e)(3)(vii), (e)(3)(viii), and (e)(3)(ix).

k) With the assistance of the Strategic Planning Committee and consistent with 24 CFR §578.15(b), designate an eligible applicant(s) to submit an application for grant funds in response to a NOFA published by HUD under 24 CFR §578.19. The designation must state whether the Governing Board is designating more than one applicant to apply for funds and, if it is, which applicant is being designated as the collaborative applicant. If only one applicant is designated to apply, that applicant must be designated as the collaborative applicant.

2. With the assistance of the Homeless Management Information Systems Committee, design and operate a Homeless Management Information System (HMIS)(24 CFR §578.7(b)):

a. Designate a single HMIS for Mendocino County;
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b. Designate an eligible applicant to manage the MCHSCoC’s HMIS, which will be known as the HMIS lead;

c. Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS;

d. Ensure consistent participation of recipients and sub-recipients in the HMIS;

e. Ensure that the HMIS is administered in compliance with HUD requirements.

3. With the assistance of the Strategic Planning Committee develop a Continuum of Care plan consistent with 24 §CFR 578.7(c), that includes:

a. Coordinating the implementation of a housing and service system within Mendocino County that meets the needs of the homeless individuals and families. The system must include:
   i. Outreach, engagement, and assessment;
   ii. Shelter, housing, and supportive services;
   iii. Prevention strategies.

b. Planning and conducting an annual point-in-time count of homeless persons that meets the requirements of 24 CFR §578.7(c)(2);

c. Conducting an annual gaps analysis of the homeless needs and services available within Mendocino County;

d. Providing information required to complete the Consolidated Plan within Mendocino County;

e. Consulting with State and local government Emergency Solutions Grants program recipients within Mendocino County on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and sub-recipients.

B. MCHSCoC Members:

The MCHSCoC membership has the following responsibilities:

1. Adopt and follow a written process to select a board (the Governing Board) consistent with 24 CFR §§578.5(b), 578.7(a)(3) and this Charter, and review,
update and approve the process for selection of the board at least once every 5 years;

2. Actively serve on or attend one committee or work group per year;

3. Comply with the conflict-of-interest requirements at 24 CFR §578.95;

4. Collaborate with other members to work toward the MCHSCoC mission, goals, and objectives;

5. Abide by the MCHSCoC Governance Charter;

6. Attend MCHSCoC meetings. Active members missing three consecutive meetings could be moved to Advisory Membership status;

7. Participate in Point-in-Time Studies, outreach endeavors, training sessions or actual counts.

C. COMMITTEES AND WORK GROUPS

Policy Statement: The MCHSCoC is committed to ensuring that each committee is comprised of members that are representative, and can and do represent, the diverse and vast geographic area of the MCHSCoC. The MCHSCoC is also committed to ensuring that the committees are representative of the diversity of the MCHSCoC service area.

1. Standing committees are comprised of MCHSCoC General Members. Each member serves a minimum of 1 year to a maximum of a 3 years staggered term.

   Each committee elects the Chair and Co-Chair of their respective committee as well as selecting a member who will report back to the full MCHSCoC General Membership at the regularly scheduled MCHSCoC meeting.

   One Governing Board member, assigned by the Chair of the Governing Board, must serve as a member of each Standing Committee or Work Group.

   The following are the Standing Committees:

   a. **Strategic Planning Committee:**

      The Strategic Planning Committee assists the Governing Board in the development and annual update of the Governance Charter, the development of the written standards for providing Continuum of Care assistance, and in making any recommendations for revisions to such standards. The committee also assists in the development of the
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Continuum of Care plan, and makes recommendations to the Board regarding implementation of and revisions to such plan. The committee assists the Governing Board in establishing either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The committee also assists the Governing Board in developing a specific policy consistent with the requirements established by HUD to guide the operation of the centralized or coordinated assessment system to address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim service providers.

The Strategic Planning Committee shall be comprised of a minimum of three but ideally five to seven MCHSCoC members in good standing. Two of the seats shall be filled by recipients/subrecipients of CoC funding.

b. Homeless Management Information Services (HMIS) Committee:

The HMIS committee is responsible for planning, coordinating, and evaluating the implementation of HMIS for the MCHSCoC. The committee is also responsible for data collection and processing (e.g. APR preparation), as well as for making recommendations to improve the local processes.

This committee is also responsible for reviewing, revising, and recommending to the Governing Board a privacy plan, a security plan, and the Data Quality Plan for the HMIS, and for ensuring consistent participation, including submission of data and data entry, by the recipients and sub-recipients in the HMIS.

The HMIS committee shall be comprised of a minimum of three and ideally five to seven MCHSCoC members in good standing who utilize the HMIS system.

c. Performance Measurement Committee:

The Performance Measurement Committee is responsible for recommending to the Governing Board performance targets for population and program type, assisting the Governing Board in monitoring recipient and sub-recipient performance and evaluating outcomes, allowing the Governing Board to take action against poor performers, and to report outcomes to HUD. The Committee shall also evaluate the outcome of any project(s) funded under the Emergency Solutions Grants program, allowing the Governing Board to report those outcomes to HUD.

The Performance Measurement Committee shall be comprised of a minimum of 3 and ideally five to seven MCHSCoC members in good
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standing of whom two or three should be recipients or sub-recipients of CoC funding.

d. **Coordinated Entry / Discharge Planning Committee:**
The Coordinated Entry/Discharge Planning Committee is responsible for:

1. ensuring that current and appropriate agreements are in place with local institutions that may release individuals into a situation of homelessness, and to work toward the outcome of successful release into a housed situation as opposed to homelessness, and

2. coordinated entry planning, development, recruitment and acts as a liaison between coordinated entry sites and the CoC.

3. acting as the coordinated entry review team as outlined in the Coordinated Entry policies and procedures manual.

   This committee makes recommendations to the Governing Board regarding discharge planning and the homeless system of care coordinated entry process.

e. The Coordinated Entry /Discharge Planning Committee shall be comprised of three and ideally five to seven MCHSCoC members in good standing who are discharging individuals or individuals or agency representatives who are working in the coordinated entry system and or who are receiving referrals for individuals that may be released into a situation of homelessness.

   **Survey/Point-In-Time Count Committee:**
The Survey/Point-in-Time Count committee is responsible for establishing the survey methods and tools for the annual homeless count in Mendocino County. In addition, this committee coordinates the annual homeless count ensuring that proper procedure is followed. The chair of this committee is also known as the “Census Coordinator” who will appoint, from this committee, a “Team Captain” for each geographical location of the County. Other team captains may be appointed, as needed, from the MCHSCoC general membership.

   This committee is responsible for the collection and consolidation of data, preparing point-in-time reports for completion of the Continuum of Care Plan and Consolidated Plan(s) and assists in the completion of a final report to the Collaborative Applicant for electronic submission to HUD.

   The Survey/Point-in-Time Committee shall be comprised of a minimum of three and ideally five to seven MCHSCoC members in good standing.

f. **Application Review Committee:**
The Application Review Committee is responsible for:

1. Developing a rating and ranking tool for all appropriate funding opportunities, including but not limited to the Continuum of Care program funds, the Emergency Solutions Grant program funds.

2. Creating a request for proposal process for funding opportunities as directed by the CoC governing board.

3. Reviewing and rating and ranking of applications submitted to the CoC for funding opportunities.

The Application Review Committee shall be comprised of a minimum of three and ideally five to seven MCHSCoC members in good standing.

g. Membership Committee:

The Membership Committee is responsible for accepting membership applications (as described in Section III.B.), reviewing for membership eligibility, and approving general MCHSCoC membership applications. The committee shall also issue a public invitation for new members, at least annually. Any recommendations for denial of general MCHSCoC membership must go before the Governing Board for final decision.

Along with the Governing Board Secretary, this committee is responsible for maintaining contact information for all MCHSCoC General Members and committee change forms for all committees.

The MCHSCoC is committed to ensuring that the MCHSCoC membership is representative of the diversity of Mendocino County’s residents experiencing homelessness. To that end, this committee shall engage in such outreach to any underrepresented communities.

The Membership Committee shall be comprised of a minimum of three but ideally to five to seven MCHSCoC members in good standing from the general membership.

h. Shelter and Solutions Committee:

The Shelter and Solutions Committee is responsible to address issues related to the current system of emergency shelter services and solutions for the geographic area of Mendocino County, including gaps in services, and any other shelter related issue or emerging problem.
The Shelter and Solutions Committee shall be comprised of a minimum of three, but ideally five to seven MCHSCoC members in good standing from the general membership.

2. **Ad-hoc Committees and Work groups:** Ad-hoc committees and workgroups shall be appointed by the Chair or Co-Chair and approved by vote of the Governing Board.

V. **MEETINGS**

A. **VOTING MEMBERS & VOTING**

For the purpose of this Governance Charter, “voting” means voting in the Governing Board, MCHSCoC general membership and committee meetings.

Names of individual voting members, agency/organization voting members, agency/organization voting alternates, and voting Governing Board members shall be on file with the Membership Committee. The Membership Committee must receive changes in writing.

1. **Governing Board Members:**
   
   Each voting member of the Governing Board shall have one vote in meetings at which they are present.

2. **MCHSCoC General Members:**
   
   a. All individual and agency/organization general members, except for Advisory Members as defined at Section III.B.3 of this Charter, shall have the right to one vote in meetings on matters appropriately addressed to and within the responsibilities of the MCHSCoC as stated in this Charter. Each agency/organization member shall designate a voting representative to exercise its one vote maximum;
   
   b. Each agency member may appoint in writing, telephone, or by e-mail, an alternate voting representative if the designated voting representative is unable to attend a meeting. The written proxy will be given to the Secretary prior to the meeting;

3. **Committee Members:**
   
   a. Each voting member serving on a committee shall have one vote in meetings of that committee.
   
   b. Committees may develop their own procedures that permit absentee, proxy, telephone, or email votes to effectively conduct their work.
B. **QUORUM**

Fifty-one (51%) percent of any Governing Board, full MCHSCoC general membership, or committee members entitled to vote must be present at the meeting to constitute a quorum. If less than a quorum is present, a meeting may be conducted, but no votes on action items or motions can be taken.

C. **MAJORITY CARRIES**

A simple majority of votes cast shall carry the motion in the meetings of the Governing Board, full MCHSCoC general membership, and committees, except as otherwise provided in this Governance Charter.

D. **OPEN MEETINGS**

Governing Board and full MCHSCoC general membership meetings shall be open to the public, except as otherwise provided for in this Governance Charter.

E. **NOTICE AND AGENDA**

Action items will be placed on the agendas of the meetings of the Governing Board, full MCHSCoC general membership and committees. Additional items may be added to the agenda at the beginning of the scheduled meeting, but may not be voted upon.

Agendas for the meetings of the Governing Board and full MCHSCoC general membership will be e-mailed to the Governing Board and to those on the MCHSCoC Membership List, and shall be posted at the scheduled location of the meeting five (5) days prior to the meetings.

F. **CONDUCT OF MEETINGS**

The Chair shall conduct Governing Board and full MCHSCoC general membership meetings. The meetings shall be ordinarily conducted in an informal manner, but may be conducted by Robert’s Rules of Order (revised edition), as deemed appropriate by the Chair. The Secretary or delegate representative shall record the minutes of every meeting.

G. **FREQUENCY**

Meetings of the Governing Board shall be held monthly, except as otherwise provided in this Governance Charter. Afternoon meetings (1:30-3:00) are the third Monday, unless there is a holiday, in which case it is the second Monday.

Meetings of the MCHSCoC general membership shall be held at least quarterly, except as otherwise provided in this Governance Charter (Jan, April, July, October).

Meetings of the Standing Committees shall be held at least quarterly, except as otherwise provided in this Governance Charter.
**H. SPECIAL MEETINGS OF THE MEMBERSHIP**

Special meetings, beyond regularly scheduled monthly meetings, may be called by a majority decision of the Governing Board. Special meetings shall cover only matters of business, which have been stated in the call to meeting. Members shall be provided with a minimum of forty-eight hours notice of a special meeting.

**I. EXECUTIVE SESSION**

Meetings of the Governing Board related to decisions to dismiss based on a Governing Board member’s breach of the code of conduct may be closed to the public if requested by the Board Member under review.

**VI. GOVERNANCE CHARTER REVIEW AND AMENDMENT**

A. **AMENDMENT**

This Charter may be amended at any combined meeting of the Governing Board and MCHSCoC general membership by a vote of the majority of the Governing Board.

B. **NOTICE**

Written notice of any proposed amendment to this Charter shall be mailed, (electronically is acceptable), to all MCHSCoC members at least five (5) calendar days prior to the meeting at which such action is proposed.

C. **ANNUAL REVIEW**

This Governance Charter must be reviewed and updated as needed by the Governing Board at least annually.

**VII. GOVERNING BOARD NOMINATION, OFFICERS AND TERMS**

A. **NOMINATION**

Nominations for the Governing Board shall be made by the MCHSCoC General Membership and nominees must be members of the MCHSCoC General Membership. Nominations for Officers of the Governing Board shall be made by the Governing Board and nominees must be members of the Governing Board. Nominations shall be made for each of the following seats of the Governing Board by the MCHSCoC General Membership (Figure 1):

- Collaborative Applicant – *One Seat*
- Homeless or Formerly Homeless Individual – *One Seat*
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- Shelter Representatives – Coast (One Seat), South County (One Seat), North/Inland County (One Seat)
- Public Housing Authority – One Seat
- Organization addressing the needs of the Homeless/Chronically Homeless – One Seat
- Organization addressing the needs of Unaccompanied or Transition Aged Youth – One Seat
- Organization addressing the needs of the elderly Population – One Seat
- Organization addressing the needs of the Seriously Mentally Ill – One Seat
- Organization serving persons with chronic substance abuse – One Seat
- Organization addressing the needs of Veterans – One Seat
- Organization addressing the needs of persons with HIV/AIDS – One Seat
- Organization addressing the needs of Victims of Domestic Violence – One Seat
- Organization providing health care to the homeless – One Seat
- County of Mendocino Health and Human Services Agency – One Seat
- Other Government Agency in Mendocino County that is either the authoring agency of the Consolidated Plan and/or addresses the needs of the homeless – One Seat
- Homeless of formerly homeless transitional aged youth

The Governing Board shall have a Chair, Co-Chair, and Secretary who are members of the Governing Board that shall be nominated and elected by the Governing Board. Each committee shall have a Chair, Co-Chair, and Reporter who are members of the committee who have volunteered for the Office and are approved by the committee. The Term of MCHSCoC Governing Board Membership is three (3) years.

B. LIST OF OFFICERS AND DUTIES

Governing Board Chair:
The term of office shall be one year. This officer is responsible for presiding over all meetings of the Governing Board and meetings of the full MCHSCoC General
Membership. This officer shall act as spokesperson for the Continuum of Care and have final approval on all publicly reported information regarding the CoC.

**Governing Board Co-Chair:**

The term of office shall be one year. In the absence of the Chair, this officer is responsible for presiding over meetings of the Governing Board and meetings of the full MCHSCoC General Membership.

This officer shall also be responsible for announcing funding opportunities and corresponding deadlines to the Governing Board and MCHSCoC General Membership. This officer shall be responsible for coordinating review by the Governing Board of APR’s and other required reports of the MCHSCoC as the CoC.

**Governing Board Secretary:**

The term of office shall be one year. This officer is responsible for recording minutes at all meetings, preparing the agenda for all meetings, and submitting these to the Chair for approval and distribution (as the Chair is generally an employee of HHSA, distribution and notification sits with the chair).

**Committee Chairs:**

The term of office shall be one year. These officers shall preside over Committee meetings and are responsible for scheduling meetings and creating the Agenda as stated in this Governance Charter. This officer shall be responsible for presenting Committee recommendations to the Governing Board.

**Committee Co-Chairs:**

The term of office shall be one year. These officers, in the absence of the Chair, are responsible for presiding over Committee Meetings as well as coordinating and communicating scheduling of meetings to Committee Members.

**Committee Reporters:**

The term of office shall be one year. These officers are responsible for recording minutes at all Committee Meetings and reporting to the Governing Board and MCHSCoC General Membership of Committee Meeting dates and times.
### ADDENDUM A, Figure 1
MCHSCoC GOVERNING BOARD MEMBERSHIP

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<thead>
<tr>
<th>Role</th>
<th>Organization/Agency/Individual</th>
<th>Sector</th>
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<td>Collaborative Applicant – <strong>One Seat</strong></td>
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<td>Homeless or Formerly Homeless Individual – <strong>One Seat</strong></td>
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<td>Shelter Representatives – Coast (<strong>One Seat</strong>), South (<strong>One Seat</strong>), North (<strong>One Seat</strong>)</td>
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<td>Public Housing Authority – <strong>One Seat</strong></td>
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<td>Organization addressing the needs of the Chronically Homeless – <strong>One Seat</strong></td>
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<td>Organization serving the needs of the Elderly Population – <strong>One Seat</strong></td>
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<tr>
<td>Organization addressing the needs of the Seriously Mentally III – <strong>One Seat</strong></td>
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<tr>
<td>Organization addressing the needs of persons with chronic substance abuse – <strong>One Seat</strong></td>
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<td>Organization addressing the needs of Veterans – <strong>One Seat</strong></td>
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<tr>
<td>Organization addressing the needs of persons with HIV/AIDS – <strong>One Seat</strong></td>
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<tr>
<td>Organization addressing the needs of Victims of Domestic Violence – <strong>One Seat</strong></td>
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<tr>
<td>Organization providing Health Care services to the Homeless – <strong>One Seat</strong></td>
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<tr>
<td>County of Mendocino, Health and Human Services Agency - <strong>One Seat</strong></td>
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</tbody>
</table>
### Mendocino County

**HOMELESS SERVICES CONTINUUM of CARE**

Other Government Agency in Mendocino County that is either the authoring agency of the Consolidated Plan and/or addresses the needs of the homeless - **One Seat**

Individual representing Transitional Aged Youth who is homeless of formerly homeless - **One Seat**

Total Seats: **18**

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### ADDENDUM A, Figure 2

**MCHSCoC MEMBERSHIP LIST**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Organization/Agency/Individual</th>
<th>Role</th>
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<tbody>
<tr>
<td>Non-Profit Homeless Assistance Providers</td>
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<tr>
<td>Victim Service Providers</td>
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<td>Faith-Based Organizations</td>
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<td>Governments</td>
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<td>Businesses</td>
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<tr>
<td>Advocates</td>
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<tr>
<td>Public Housing Agencies</td>
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<tr>
<td>School Districts</td>
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<tr>
<td>Social Service Providers</td>
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<tr>
<td>Mental Health Agencies</td>
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<tr>
<td>Hospitals/Health Care Providers</td>
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<td>Universities</td>
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<tr>
<td>Affordable Housing Developers</td>
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<tr>
<td>Law Enforcement</td>
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<tr>
<td>Organizations Serving Veterans</td>
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<tr>
<td>Organizations that serve Homeless or formerly Homeless Individuals</td>
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<td>Homeless or formerly Homeless Individual(s)</td>
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</tbody>
</table>
HMIS Policies and Procedures

I. HMIS Governance Charter/MOU (signed document outlining roles and responsibilities of HMIS and CoC)

II. HMIS Participating Agency MOU - We need to get an electronic copy of this from HHSA. We each have a copy that was signed by our agency but I would like to include a blank one for future use.

III. HMIS Policies and Procedures
   A. HMIS Participating Agency Agreement
   B. HMIS User Agreement
   C. HMIS Client Release of Information
   D. HMIS Privacy Notice
   E. HMIS Data Sharing Agreement (if interagency data sharing is allowed)
   F. Data Quality Plan
   G. Data Privacy Plan
   H. Data Security Plan
   I. Monitoring Plan and Checklist

I. HMIS Policies and Procedures
   A. HMIS Participating Agency Agreement
      1. **Purpose:** Establish minimum standards for agencies to collect and maintain records for every client receiving services to assure the accuracy and completeness of records in Mendocino County CoC HMIS
      2. **Agency Responsibilities:**
         a. Assure the accuracy of information entered into Mendocino County CoC HMIS. Any updates in information, error, or inaccuracy that comes to the attention of the agency will be corrected by such agency.
         b. Perform routine Data Quality Assurance procedures (see Table 1.1) then review and promptly correct inaccuracies.
      3. **Agency Confidentiality Responsibilities:**
         a. The agency agrees to abide by all present and future federal and state laws.
         b. The agency Executive Director must accept responsibility for the validity of all records entered into Mendocino County CoC HMIS by his/her agency. The Executive Director may designate an immediate subordinate staff member with supervisory responsibilities as an Agency Site Administrator who will be responsible for verifying the accuracy of information. The agency will provide Mendocino County CoC HMIS Administrator with the name(s), and title(s) of the staff member(s) authorized to supervise data entry personnel.
         c. **Data Tracking of Client Services:**
            i. The agency will implement a written policy for the delivery of services and tracking of clients that will include but not be limited to the process for determining and recording program specific outcomes and exits.
            ii. The agency will implement a written intake and client record keeping procedure
so that files will reflect:
Mendocino County
HOMELESS SERVICES CONTINUUM of CARE

✓ The intake interview process.
✓ How program eligibility was determined.
✓ All records of services provided.

d. All shelter and supportive housing programs will maintain an up-to-date resident/bed list that shall include but not be limited to the name of each person residing in the program.

e. Data Entry and Reporting Submission Deadlines:

f. Intake data should be entered into Mendocino County CoC HMIS as soon as possible but no later than **72 hours after the intake process**.

g. Shelter exits (emergency and transitional housing programs only)
   ✓ Housing status must be updated in Mendocino County CoC HMIS within 24 hours of program exit.

4. **Data Accuracy Responsibilities:**
   a. The agency will ensure that all clients entered into Mendocino County CoC HMIS will have a unique identification number, either a social security number or system-generated identification number, which matches the client files for tracking purposes.
   b. The agency will ensure that missing/unknown data in Mendocino County CoC HMIS will be **less than 5% per month in required variable fields**. For example, if the data for the variable veteran is ‘Don’t Know’ or ‘Refused’ for less than 5% of clients during the month, the data is accurate. If ‘Don’t Know’ or ‘Refused’ is greater than or equal to 5%, the data is inaccurate. The only exception is the variable Destination where ‘Unknown’ is acceptable.
   c. The agency will ensure data is compatible with their available programs in Mendocino County CoC. For example, a family cannot be entered at a single men’s shelter or a women’s shelter.
   d. Data in HMIS must accurately reflect client data recorded in the agency’s client file and known information about the client and services provided to the client. For example, ‘Exit Date’ in Mendocino County CoC HMIS should be the date the client physically exited the shelter.

5. **Data Quality Assurance Responsibilities:**
   a. The agency will have minimum data quality assurance policies and procedures to assure quality data collection, entry, and reporting.
   b. Agency Site Administrators will assure the following:

<table>
<thead>
<tr>
<th>Table 1.1</th>
<th>Agency Site Administrators Task List</th>
</tr>
</thead>
</table>
| 1.        | Run a Mendocino County CoC HMIS report for each program. Review number of open cases to verify that they equal the number of actual open cases.  
|          | ✓ Exit cases that should be closed.  
|          | ✓ Enter cases that should be open.  
|          | Monthly                             |
| 2.        | Pull 10% of paper files and compare with Mendocino County CoC HMIS data to verify that data is accurate.  
|          | Monthly                             |
### Mendocino County
HOMELESS SERVICES CONTINUUM of CARE

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<tbody>
<tr>
<td>3.</td>
<td>If an overnight shelter, then check Resident/Bed List to verify accuracy against paper shelter list.</td>
</tr>
<tr>
<td>4.</td>
<td>If shelter or transitional housing program, check Resident/Bed List to verify that number of open cases on Mendocino County CoC HMIS report equals the number of individuals and households on Resident/Bed List.</td>
</tr>
<tr>
<td>5.</td>
<td>Issue monthly Data Quality Assurance Report to agency Executive Director on status of quality assurance monitoring check.</td>
</tr>
</tbody>
</table>

### 6. Monitoring Responsibilities and Expectations:

a. The Mendocino County CoC HMIS Administrator will be responsible to contact and visit each agency to ensure data quality assurance at least once every twenty four (24) months.

b. The details of this Assurance Plan as well as HUD HMIS standards and thresholds will be checked with client files against Mendocino County CoC HMIS data to ensure agencies are meeting guidelines.

c. A report of the monitoring will be given to the agency. If corrective action is needed, a timeline will be given along with the report to the agency. Within the decided timeline, the agency will submit a corrective action plan to the Mendocino County CoC HMIS Administrator.

### 7. See Appendix C for HMIS Participating Agency Agreement Document

B. HMIS User Agreement
C. HMIS Client Informed Consent and Release of Information Authorization Form
D. HMIS Privacy Notice
E. HMIS Data Sharing Agreement (if interagency data sharing is allowed)
F. Data Quality Plan

#### 1. Why is Data Quality so Important

- Timely, accurate and complete data is central, critical to the success of an HMIS
- Data quality impacts every part of HMIS- for example, reporting is meaningless unless the supporting data is correct and timely
- Data quality can’t be delegated to HMIS-everyone from the Data Entry Staff, Case/Intake Workers and Executive Directors in the contributing HMIS organizations to the Chair of the Continuum of Care affect the quality of HMIS data.
- Bad data is worse than no data

#### 2. What is Data Quality

- Refers to the HMIS’s ability to describe the homeless people, services provided and program outcomes within the CoC.
- Data quality is quantitative - It can be measured and tracked over time:
Mendocino County
HOMELESS SERVICES CONTINUUM of CARE

- Compared to actual client and shelter records
  - Data can be compared to client’s ‘paper records’
  - HMIS attendance and PIT counts can be compared to the agency’s daily ‘head counts’
- Data quality can be evaluated using analytical tools
  - Bed utilization rates to test Entry/Exit accuracy

3. Who is responsible for Data Quality
   - The HMIS Lead Agency
     - Day to Day operation of the HMIS
     - User training and certification
     - Development and maintenance of HMIS policy and procedures, including a data quality plan, (subject to CoC approval)
   - Contributory HMIS Organizations (homeless and non-homeless service providers)
     - Provide adequate resources for accurate, timely data collection and entry into HMIS
     - Oversight of employees using HMIS
   - End Users
     - Collect and enter client information
     - Protect privacy of clients and follow all security requirements

4. Foundations for Data Quality - CoC
   - The CoC primary decision-making entity (Homeless Services Planning Group HSPG) is ultimately responsible for selection of the HMIS lead agency, the selection of HMIS software and accountability for and oversight of the HMIS, including adherence to all data and technical standards. The CoC must conduct appropriate oversight of the HMIS to ensure that it is compliant with the HMIS Standards and is meeting local needs.
   - The HMIS lead agency is Mendocino County Health and Human Services Agency, Social Services Branch, Adult and Aging Services Division. There is only one HMIS system in the CoC and the HMIS lead agency is responsible for operating that system. The software system the HMIS uses is ClientTrack, a Data System International web based product. The ClientTrack software system was selected by the CoC decision making entity and installed in 2007. ClientTrack training began December 2007 and agencies began to load HMIS data starting with October 2007 HMIS data in January 2008.
   - The HMIS lead agency is responsible for the day to day operation of the HMIS, user training and certification and development and maintenance of HMIS policy and procedures, including a data quality policy and procedure. The HMIS must be in compliance with all HUD HMIS standards (2004, 2010, HPRP)

5. The HMIS Lead Agency functions and responsibilities are assumed on the behalf of the CoC.
   - Manage the HMIS in a manner that meets HUD’s minimum standards for data quality, privacy and security.
   - Meet additional local standards for data quality, privacy and confidentiality.
   - Process universal data elements to generate and submit an unduplicated homeless count to the CoC.
6. The HMIS Data Standards are established and approved by HUD and must be adhered to
   according to 24 CFR 578. Users should utilize the most current HMIS Data Standards
   Manual and HMIS Data Standards Data Dictionary for specific guidance in regards to this
   policy.
7. HMIS Participating Agency Data Quality Agreements
   a. Assure the accuracy of information entered into the system. Any updates in
      information, error or inaccuracy that comes to the attention of the connecting agency
      will be corrected by such agency.
   b. Perform routine Quality Assurance procedures to monitor data quality and promptly
      correct inaccuracies.
   c. The connecting agency agrees to abide by all present and future federal and state laws
   d. The connecting agency Executive Director must accept responsibility for the validity of
      all records entered by his/her agency. The Executive Director may designate an
      immediate subordinate staff member with supervisory responsibilities for verifying the
      accuracy of information.
   e. The connecting agency implements a written plan for delivery of services and tracking
      of clients that includes the process for determining and recording outcome/exits.
   f. All services entered will be consistent with corresponding program.
   g. The client must be eligible to receive such services from the provider per program
      specific eligibility criteria.
   h. The agency implements a written intake and client record keeping procedures and files
      that include:
      • Intake Interview
      • Record of services provided
   i. Shelter and supportive housing programs maintain an up-to-date residence list that
      includes, at least, the name of each person residing in the program.
   j. Intake data should be entered into the HMIS within 24 hours of the intake process.
   k. Shelters only: Clients who stayed in shelter during the previous 24-hour period must be
      entered into HMIS daily by 9:00am.
   l. Complete and accurate data for the month must be entered into the HMIS by the
      fourth working day of the month following the reporting period.

G. Data Privacy Plan

H. Data Security Plan

I. Monitoring Plan and Checklist
The request letter will include a deadline date by which the applicant must notify the CDC of their continued interest, by mail or in person.

Notification of a change in address to the U.S. Post Office or sources other than the CDC is not considered compliance with the requirements to notify the CDC.

An applicant’s failure to check on their mail at the address given to CDC, whether the address is that of a family member, friend or PO Box, will not alleviate the applicant’s responsibility to update their application.

Applicants will be given ten (10) calendar days, from the date of the letter, to return the notice of continued interest. The CDC does not accept responsibility for mail delays.

If the CDC fails to receive the updated applicant information by the deadline date, the applicant’s name will be removed from the Waiting List.

B. LOCAL PREFERENCES

The CDC has elected to employ the following as local preferences:

- Date and time of receipt of a completed application;

- Veterans and Veteran’s families (100 points)

- Involuntary Displacement (Federal or State declared Disaster, Government Action, Inaccessibility, Property Disposition) (100 points);

- Residents who live and/or work in the CDC jurisdiction (100 points);

- Current Mendocino County Shelter Plus Care Program participants who have been participating in the Mendocino County Shelter Plus Care program for a minimum of three (3) consecutive years, have been in good standing for a minimum of three (3) consecutive years, and receive prior written recommendation from their current case manager. (600 points) (25 households meeting this preference may be assisted per calendar year)

CDC will take the preference points and adds them (cumulative). As stated in this Administrative Plan, the preferences must be supported by
documentation. Preferences must be valid at the time the applicant claims the preference and at the time of final determination of eligibility.

**Description** of these preferences and their “definitional elements”: (or sub-categories) follow.

**Veteran** ([California Health and Safety Code § 34322.2. “Priority shall be given within each preference category to families of veterans and servicemen (sic)”] )

Households containing a veteran or the surviving spouse of a veteran of one of the regular armed forces of the United States are eligible for this preference.

To claim a veteran’s preference, a copy of the DD214 showing Honorable Discharge or equivalent. If a surviving spouse of a veteran the applicant must submit to CDC a marriage certificate as well as a death certificate.

**Displacement by Government or Private Action** ([California Health and Safety Code §34322.2 (a) Preference categories shall be established to give priority to persons displaced by public or private action”])

Displaced applicants are applicants who have been involuntarily displaced within 90 days from the date the applicant claims the preference and are not living in standard, permanent replacement housing at the time of eligibility determination. Or, applicants who will be involuntarily displaced within no more than 90 days from the date the applicant claims the preference, and who have not found or are not living in standard, permanent replacement housing at the time of eligibility determination.

In order to receive the displaced preference, applicants who have been displaced must not be living in “standard permanent replacement housing.”

Standard replacement housing is defined as housing that is decent, safe and sanitary, according to Housing Quality Standards and local housing code is adequate for the family size, and the family is occupying pursuant to a written or oral lease or occupancy agreement.

Standard replacement housing does not include transient facilities, hotels, motels, or temporary shelters. It does not include any individual imprisoned or detained pursuant to State Law or an Act of Congress. Shared housing with family or friends is not considered temporary and is considered standard replacement housing, unless a severe overcrowding situation exists, as documented by the local code compliance agency or the non-related landlord. If the family is not on the lease and is/are not authorized
person(s) living in the unit, this preference will not be given to the applicant family.

Persons who reside as part of a family unit shall not be considered a separate household unless the head of household of the entire family unit has submitted a request to be considered as an applicant family separate from other households with other adult "heads or co-heads."

Families are considered to be involuntarily displaced if they have or will be required to vacate housing as a result of:

1. A family has been involuntarily displaced by government action or whose dwelling has been extensively damaged or destroyed and determined uninhabitable by the local code enforcement agency as a result of fire, flood or natural disaster. Such action was not the result or neglect or intentional act of the applicant or member of the applicant’s household.

   The applicant will be required to supply CDC with verification from the government entity or local code enforcement agency.

2. Federal, state or local government action related to code enforcement, public improvement or development. The applicant will be required to supply CDC with verification from the government entity or local code enforcement agency.

3. Individual families residing within the jurisdiction of the Housing Authority who have been or are involuntarily displaced as a result of their having been subjected to or victimized by violent acts from a member of their household within the past 90 days from the date the applicant claimed the preference. The Housing Authority will require evidence to be submitted which verifies the family has been displaced as a result of fleeing violence in the home. Evidence of displacement because of domestic violence from the local police department, social services agency, or court of competent jurisdiction, or a clergyman, physician, or public or private facility that provides shelter or counseling to the victims of domestic violence may be determined suitable to claim the displaced preference.

4. Families are also eligible for this preference if the applicant can provide CDC with evidence documenting that the family is currently living in a situation where they are being subjected to or victimized by violence in the home. The following criteria will be used to establish a family's eligibility for this preference:
• Actual or threatened physical violence directed against the applicant or applicant's family by a spouse or other household member who lives in the unit with the family. CDC will require evidence to be submitted verifying the actual or threatened physical violence.
• The actual or threatened violence must have occurred within the past 90 days from the date the applicant claims the preference and must be of a continuing nature.
• The abuser must still reside in the unit from which the victim was displaced.
• If the applicant is determined eligible for a Housing Choice Voucher they must certify the abuser will not reside within the applicant's home.

If the abuser returns to the family household after the preference was applied, CDC will remove the preference and deny assistance. If the abuser returns to the family household while the applicant is receiving assistance CDC may terminate the housing assistance for breach of this certification.

5. Action by a housing owner which is beyond an applicant's ability to control, and which occurs despite the applicant's having met all previous conditions of occupancy (see reasons below). This action must have occurred within the past 90 days from the date the applicant claims the preference, or will occur within 90 days from the date the applicant claims the preference. The applicant must have/must reside in the rental unit they are claiming to be displaced from as a tenant under a written agreement.

If the owner is a relative and there has been no previous written rental agreement and the applicant has been part of the owner's household immediately prior to application, the applicant will not be considered involuntarily displaced.

For the purpose of this definitional element, reasons for an applicant's having to vacate a housing unit include

• Written notice from the landlord/owner has been delivered to the applicant prior to claiming the preference verifying the applicants place of residence will be converted to a non-rental or non-residential use;

• Written notice from the landlord/owner has been delivered to the applicant prior to claiming the preference verifying the applicants place of residence will close.
RESOLUTION #1033-14 (4/24/2014)

- Written notice from the landlord/owner has been delivered to the applicant prior to claiming the preference notifying the family they must vacate a unit because the owner wants the unit for the owner's personal or family use or occupancy;

- Written notice has been delivered to the applicant prior to claiming the preference informing the family of the sale of a housing unit in which an applicant resides under a written agreement that the unit must be vacant when possession is transferred.

- Written notice has been delivered to the applicant prior to claiming the preference informing the family the place of residence in which they reside as tenants under a written agreement will be, or has been foreclosed upon.

6. To avoid reprisals because the family provided information on criminal activities to a law enforcement agency and, after a threat assessment, the law enforcement agency recommends re-housing the family to avoid or reduce risk of violence against the family.

   The family must be part of a Witness Protection Program, or the HUD Office or law enforcement agency must have informed the CDC that the family is part of a similar program.

   The CDC will take precautions to ensure that the new location of the family is concealed in cases of witness protection.

7. Displacement by non-suitability of the unit when a member of the family has a mobility or other impairment that makes the person unable to use critical elements of the unit and the owner is not legally obligated to make changes to the unit. Critical elements are:

   Entry and egress of unit and building;
   A sleeping area,
   A full bathroom,
   A kitchen if the person with a disability must do his or her own food preparation.

8. Due to HUD disposition of a multifamily project under Section 203 of the Housing and Community Development Amendments of 1978.
Residency Preference

Families who, at the time of selection from the waiting list, reside within Mendocino County, or include a member who works, or has been hired to work in Mendocino County. Applicants who have been hired to work in Mendocino County must supply CDC with verification of expected employment start date. Employment start date must be within 90 days from the date the applicant claims the preference.

Verification of Residency may include the following;
- Utility Bills in the name of the family;
- Telephone/cable bills;
- Verification from schools where children are enrolled;
- Landlord statements;
- Public social services verification
- Letter of hire from the employer.
- Current paycheck stubs verifying address of employment
- Photo Identification verifies the same address as the applicants mailing address listed on the application.

Mendocino County Shelter Plus Care Program Participants

Current Shelter Plus Care participants who have been participating in the Mendocino County Shelter Plus Care Program for a minimum of three (3) consecutive years. Families have been in good standing for a minimum of three (3) consecutive years. Good Standing may include, but is not limited to the following;
- Complying with the Shelter Plus Care Service Plan
- Remaining clean and sober
- No criminal activities
- No unauthorized adults living in the unit.
- Current with rent payments
- No serious or repeated lease violations

Shelter Plus Care Participants must supply CDC with prior written recommendation from their current Case Manager. The recommendation must include the Case Managers’ statement supporting the change to the Housing Choice Voucher subsidy, and documentation verifying the participant has been complying with case management requirements on a regular basis for a minimum of three (3) consecutive years.

C. ELIGIBILITY DETERMINATION

The CDC will accept applications from families whose head or spouse is at least 18 years of age, except for emancipated minors under State law.
Mendocino County Continuum of Care HMIS
Agency Partner Agreement

Mendocino County Continuum of Care Homeless Management Information System ("HMIS") is an information system that maintains information regarding the characteristics and service needs of Clients for a variety of reasons, including the provision of more effective and streamlined services to Clients and the creation of information which communities can use to determine the use and effectiveness of services.

Ultimately, when used correctly and faithfully by all involved parties, the HMIS is designed to benefit multiple stakeholders, including provider agencies, persons who are homeless, funders and the community through improved knowledge about people who are homeless, their services and service needs and a more effective and efficient service delivery system.

[Agency] has elected to participate in Mendocino County Continuum of Care HMIS.

Agency and Mendocino County Continuum of Care agree as follows:

1. General Understandings:

   a. In this Agreement, the following terms will have the following meanings:

      (i) "Client" refers to a consumer of services;

      (ii) "Partner Agency" refers generally to any Agency participating in Mendocino County Continuum of Care HMIS.

      (iii) "Agency staff" refers to both paid employees and volunteers.

      (iv) "HMIS" refers to the Mendocino County Continuum of Care HMIS system.

      (v) "Enter(ing)" or "entry" refers to the entry of any Client information into Mendocino County Continuum of Care HMIS.

      (vi) "Share(ing)", or "Information Share(ing)", refers to the sharing of information which has been entered in Mendocino County Continuum of Care HMIS with another Partner Agency.

      (vii) "Mendocino County Continuum of Care Homeless Services Planning Group Core Team" refers to Mendocino County Continuum of Care advisory body. The Homeless Services Planning Group Core Team is comprised of representatives from Mendocino County Continuum of Care at large members. The Homeless Services Planning Group Core Team serves in a consultative and counseling capacity to Mendocino County Continuum of Care as the system administrator.

      (viii) "Identified Information" refers to Client data that can be used to identify a specific Client. Also referred to as "Confidential" data or information.

      (ix) "Deidentified Information" refers to data that has specific Client demographic information removed, allowing use of the data without identifying a specific Client. Also referred to as "non-identifying" information.

   b. Agency understands that when it enters information into HMIS, such information will be available to the Mendocino County Continuum of Care staff who may review the data to administer HMIS; to conduct analysis; and to prepare reports which may be submitted to others in de-identified form without individual identifying Client information.

   c. Agency understands that Agency will have the ability to indicate whether information Agency entered into HMIS may be shared with and accessible to Partner Agencies in HMIS.
Mendocino County Continuum of Care HMIS
Agency Partner Agreement

system. Agency is responsible for determining and designating in HMIS whether information
may or may not be shared.

2. Confidentiality:

a. Agency will not
   (i) enter information into HMIS which it is not authorized to enter; and
   (ii) will not designate information for sharing which Agency is not authorized to share,
        under any relevant federal, state, or local confidentiality laws, regulations or other
        restrictions applicable to Client information. By entering information into HMIS or
        designating it for sharing, Agency represents that it has the authority to enter such
        information or designate it for sharing.

b. Agency represents that: (check applicable items)
   (i) it is _____; is not _____ a “covered entity” whose disclosures are restricted under
       HIPAA (45 CFR 160 and 164);
   (ii) it is _____; is not _____ a program whose disclosures are restricted under Federal
        Drug and Alcohol Confidentiality Regulations: 42 CFR Part 2;
   (iii) If Agency is subject to HIPAA, (45 CFR 160 and 164) or 42 CFR Part 2, a fully
        executed Business Associate or Business Associate/Qualified Service Organization
        Agreement must be attached to this agreement before information may be entered.
        Sharing of information will not be permitted otherwise.
   (iv) If Agency is subject to any laws or requirements which restrict Agency’s ability to
        either enter or authorize sharing of information, Agency will ensure that any entry it
        makes and all designations for sharing fully comply with all applicable laws or other
        restrictions.

c. To the extent that information entered by Agency into HMIS is or becomes subject to
   additional restrictions, Agency will immediately inform Mendocino County Continuum of
   Care in writing of such restrictions.

3. Display of Notice: Pursuant to the notice published by the Department of Housing and Urban
   Development (“HUD”) on July 30, 2004, Agency will prominently display at each intake desk (or
   comparable location) Mendocino County Continuum of Care HMIS Client Privacy Rights that explains
   the reasons for collecting Client identified information in the HMIS and the client rights associated to
   providing Agency staff with their identified data. Agency will post the Mendocino County Continuum
   of Care HMIS Client Privacy Rights document prominently to ensure client’s understanding of their
   rights. The current form is incorporated into this Agreement and may be modified from time to time by
   Mendocino County Continuum of Care.

4. Information Collection, Release and Sharing Consent:

   a. Collection of Client identified information: An agency may collect client identified
      information only when appropriate to the purposes for which the information is obtained or
      when required by law. An Agency must collect client information by lawful and fair means
      and, where appropriate, with the knowledge or consent of the individual.

   b. Obtaining Client Consent: In obtaining Client consent, Agency will post Mendocino
      County Continuum of Care HMIS Client Privacy Rights document at each intake desk (or
comparable location). Consent of the individual for data collection may be inferred from the circumstances of the collection:

(i) If a Client withdraws or revokes consent for Client identified information collection, Agency is responsible for immediately making appropriate data entries in HMIS to ensure that Client's personal identified information will not be shared with other Partner Agencies or visible to the Agency staff within the system.

(ii) This information is being gathered for the collection and maintenance of a research database and data repository. The consent implied is in effect until the client revokes the consent in writing.

c. **Designation for Sharing:** Prior to designating any information for sharing, Agency will provide the Client with a copy of the Agency’s release of information form. Following an explanation of the data use, the Agency will obtain the informed consent of the Client by having the Client sign the Agency’s release of information form.

(i) If a Client does not sign the release/sharing form as described above, information may not be shared with other Partner Agencies. It is the responsibility of Agency entering information about a Client to determine whether consent has been obtained; to make appropriate entries in HMIS to either designate the information as appropriate for sharing or prohibit information sharing; to implement any restrictions on information sharing; and to implement any revocation of consent to information sharing.

(ii) Agency will keep all copies of the Agency’s release of information form signed by Clients for a period of six years. Such forms will be available for inspection and copying by Mendocino County Continuum of Care at any time.

5. **No Conditioning of Services:** Agency will not condition any services upon or decline to provide any services to a Client based upon a Client's refusal to sign an Agency’s release of information form for the sharing of identified information or refusal to allow entry of identified information into HMIS.

6. **Re-release Prohibited:** Agency agrees not to release any Client identifying information received from HMIS to any other person or organization without written informed Client consent, or as required by law.

7. **Client Inspection/Correction:** Agency will allow a Client to inspect and obtain a copy of his/her own personal information except for information compiled in reasonable anticipation of, or for use in, a civil, criminal or administrative action or proceeding. Agency will also allow a Client to correct information which is inaccurate. Corrections will be made by way of a new entry which is in addition to but is not a replacement for an older entry.

8. **Security:** Agency will maintain security and confidentiality of HMIS information and is responsible for the actions of its users and for their training and supervision. Agencies will follow the *Mendocino County Continuum of Care Confidentiality Agreement HMIS System* which is incorporated into this agreement and may be modified from time to time. Among the steps Agency will take to maintain security and confidentiality are:

a. **Access:** Agency will permit access to HMIS or information obtained from it only to authorized Agency staff who need access to HMIS for legitimate business purposes (such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements). Agency will limit the access of such staff to only those records that are immediately relevant to their work assignments.

b. **User Policy:** Prior to permitting any user to access HMIS, Agency will require the user to sign a *Mendocino County Continuum of Care Confidentiality Agreement HMIS System*
Mendocino County Continuum of Care HMIS

Agency Partner Agreement

Participans (“User Policy”) which is incorporated into this agreement and may be amended from time to time by Mendocino County Continuum of Care. Agency will comply with, and enforce the User Policy and will inform Mendocino County Continuum of Care immediately in writing of any breaches of the User Policy.

c. Computers: Security for data maintained in Mendocino County Continuum of Care’ HMIS depends on a secure computing environment. Computer security is adapted from relevant provisions of the Department of Housing and Urban Development’s (HUD) “Homeless Management Information Systems (HMIS) Data and Technical Standards Notice” (Docket No. FR 4848-N-01; see http://www.hud.gov/offices/cpd/homeless/hmis). Agencies are encouraged to directly consult that document for complete documentation of HUD’s standards relating to HMIS. Agency will allow access to HMIS only from computers which are:

(i) physically present on Agency’s premises;
(ii) owned by Agency; or
(iii) approved by Agency for the purpose of accessing and working with HMIS; and
(iv) protected from viruses by commercially available virus protection software,
(v) protected with a software or hardware firewall,
(vi) maintained to insure that the computer operating system running the computer used for the HMIS is kept up to date in terms of security and other operating system patches, updates, and fixes,
(vii) accessed through web browsers with 128-bit encryption (e.g., Internet Explorer, version 6.0). Some browsers have the capacity to remember passwords, so that the user does not need to type in the password when returning to password-protected sites. This default shall not be used with respect to Mendocino County Continuum of Care’ HMIS; the end-user is expected to physically enter the password each time he or she logs on to the system,
(viii) staffed at all times when in public areas. When computers are not in use and staff are not present, steps should be taken to ensure that the computers and data are secure and not publicly accessible. These steps should minimally include: Logging off the data entry system, physically locking the computer in a secure area, or shutting down the computer entirely.

d. Passwords: Agency will permit access to HMIS only with use of a User ID and password which the user may not share with others. Written information pertaining to user access (e.g. username and password) shall not be stored or displayed in any publicly accessible location.

Passwords shall be at least eight characters long and meet industry standard complexity requirements, including, but not limited to, the use of at least one of each of the following kinds of characters in the passwords: Upper and lower-case letters, and numbers and symbols. Passwords shall not be, or include, the username, or the HMIS name. In addition, passwords should not consist entirely of any word found in the common dictionary or any of the above spelled backwards. The use of default passwords on initial entry into the HMIS application is allowed so long as the application requires that the default password be changed on first use. Passwords and user names shall be consistent with guidelines issued from time to time by HUD and/or Mendocino County Continuum of Care.
Mendocino County Continuum of Care HMIS

Agency Partner Agreement

e. **Training/Assistance:** Agency will permit access to HMIS only after the authorized user receives appropriate confidentiality training including that provided by Mendocino County Continuum of Care. Agency will also conduct ongoing basic confidentiality training for all persons with access to HMIS and will train all persons who may receive information produced from HMIS on the confidentiality of such information. Agency will participate in such training as is provided from time to time by Mendocino County Continuum of Care. Mendocino County Continuum of Care will be reasonably available during Mendocino County Continuum of Care defined weekday business hours for technical assistance (i.e. troubleshooting and report generation).

f. **Records:** Agency and Mendocino County Continuum of Care will maintain records of any disclosures of Client identifying information either of them makes of HMIS information for a period of six years after such disclosure. On written request of a Client, Agency and Mendocino County Continuum of Care will provide an accounting of all such disclosures within the prior six-year period. Mendocino County Continuum of Care will have access to an audit trail from HMIS so as to produce an accounting of disclosures made from one Agency to another by way of sharing of information from HMIS.

9. **Information Entry Standards:**

a. Information entered into HMIS by Agency will be truthful, accurate and complete to the best of Agency's knowledge.

b. Agency will not solicit from Clients or enter information about Clients into the HMIS database unless the information is required for a legitimate business purpose such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements.

c. Agency will only enter information into HMIS database with respect to individuals which it serves or intends to serve, including through referral.

d. Agency will enter information into the HMIS database within one month of data collection.

e. Agency will not alter or over-write information entered by another Agency.

10. **Use of Mendocino County Continuum of Care HMIS:**

a. Agency will not access identifying information for any individual for whom services are neither sought nor provided by the Agency. Agency may access identifying information of the Clients it serves and may request via writing access to statistical, non-identifying information on both the Clients it serves and Clients served by other Mendocino County Continuum of Care HMIS participating agencies.

b. Agency may report non-identifying information to other entities for funding or planning purposes. Such non-identifying information shall not directly identify individual Clients.

c. Agency and Mendocino County Continuum of Care will report only non-identifying information in response to requests for information from HMIS unless otherwise required by law.

d. Agency will use HMIS database or its legitimate business purposes only.
Mendocino County Continuum of Care HMIS

Agency Partner Agreement

e. Agency will not use HMIS in violation of any federal or state law, including, but not limited to, copyright, trademark and trade secret laws, and laws prohibiting the transmission of material, which is threatening, harassing, or obscene.

f. Agency will not use the HMIS database to defraud federal, state or local governments, individuals or entities, or conduct and illegal activity.

11. Proprietary Rights of the Mendocino County Continuum of Care HMIS:

   a. Agency shall not give or share assigned passwords and access codes for HMIS with any other Agency, business, or individual.

   b. Agency shall take due diligence not to cause in any manner, or way, corruption of the HMIS database, and Agency agrees to be responsible for any damage it may cause.

12. HMIS Homeless Services Planning Group Core Team: Mendocino County Continuum of Care will consult with the Homeless Services Planning Group Core Team from time to time regarding issues such as revision to the form of this Agreement. Written Agency complaints that are not resolved may be forwarded to the HMIS Homeless Services Planning Group Core Team, which will try to reach a voluntary resolution of the complaint.

13. Limitation of Liability and Indemnification: No party to this Agreement shall assume any additional liability of any kind due to its execution of this agreement of participation in the HMIS system. It is the intent of the parties that each party shall remain liable, to the extent provided by law, regarding its own acts and omissions; but that no party shall assume additional liability on its own behalf or liability for the acts of any other person or entity except for the acts and omissions of their own employees, volunteers, agents or contractors through participation in HMIS. The parties specifically agree that this agreement is for the benefit if the parties only and this agreement creates no rights in any third party.

14. Limitation of Liability. The Mendocino County Continuum of Care shall not be held liable to any member Agency for any cessation, delay or interruption of services, nor for any malfunction of hardware, software or equipment.

15. Disclaimer of Warranties. Mendocino County Continuum of Care makes no warranties, express or implied, including the warranties or merchandise ability and fitness for a particular purpose, to any Agency or any other person or entity as to the services of the HMIS system to any other matter.

16. Additional Terms and Conditions:

   a. Agency will abide by such guidelines as are promulgated by HUD and/or Mendocino County Continuum of Care from time to time regarding administration of the HMIS.

   b. Agency and Mendocino County Continuum of Care intend to abide by applicable law. Should any term of this agreement be inconsistent with applicable law, or should additional terms be required by applicable law, Agency and Mendocino County Continuum of Care agree to modify the terms of this agreement so as to comply with applicable law.

   c. Neither Mendocino County Continuum of Care nor Agency will transfer or assign any rights or obligations regarding Mendocino County Continuum of Care HMIS without the written consent of either party.

   d. Agency agrees to indemnify and hold Mendocino County Continuum of Care, its agents and staffs, and the City of Seattle harmless from all claims, damages, costs, and expenses, including legal fees and disbursements paid or incurred, arising from any breach of this Agreement or any of Agency’s obligations under this Agreement.

   e. This Agreement will be in force until terminated by either party. Either party may terminate this agreement at will with 20 days written notice. Either party may terminate this agreement
Mendocino County Continuum of Care HMIS

Agency Partner Agreement

immediately upon a material breach of this Agreement by the other party, including but not limited to the breach of the Mendocino County Continuum of Care Confidentiality Agreement HMIS System Participants by Agency.

f. If this Agreement is terminated, Agency will no longer have access to HMIS. Mendocino County Continuum of Care and the remaining Partner Agencies will maintain their right to use all of the Client information previously entered by Agency except to the extent a restriction is imposed by Client or law.

g. Copies of Agency data will be provided to the Agency upon written request of termination of this agreement. Data will be provided on CDs or other mutually agreed upon media. Unless otherwise specified in writing, copies of data will be delivered to Agency within fourteen (14) calendar days of receipt of written requests for data copies.

Signed,

Executive Director Signature

Print Executive Director Name

Date

Agency Name

Street Address

City

State

Zip Code

Mailing Address (Leave Blank If Same As Above)

City

State

Zip Code

Director Adult and Older Adult System of Care Mendocino County

Date
**FY2016 - Performance Measurement Module (Sys PM)**

**Summary Report for CA-509 - Mendocino County CoC**

**Measure 1: Length of Time Persons Remain Homeless**

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

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Previous FY</td>
<td>Current FY</td>
<td>Previous FY</td>
</tr>
<tr>
<td>1.1 Persons in ES and SH</td>
<td>422</td>
<td>223</td>
<td>40</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, and TH</td>
<td>494</td>
<td>324</td>
<td>76</td>
</tr>
</tbody>
</table>

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client’s “Length of Time on Street, in an Emergency Shelter, or Safe Haven” (Data Standards element 3.17) response and prepends this answer to the client’s entry date effectively extending the client’s entry date backward in time. This “adjusted entry date” is then used in the calculations just as if it were the client’s actual entry date.

**NOTE:** Due to the data collection period for this year’s submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year’s submission.

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Previous FY</td>
<td>Current FY</td>
<td>Previous FY</td>
</tr>
<tr>
<td>1.1 Persons in ES and SH</td>
<td>-</td>
<td>223</td>
<td>-</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, and TH</td>
<td>-</td>
<td>324</td>
<td>-</td>
</tr>
</tbody>
</table>
**Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness**

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

<table>
<thead>
<tr>
<th>Exit was from</th>
<th>Total # of Persons who Exit was from SO</th>
<th>Returns to Homelessness in Less than 6 Months (0 - 180 days)</th>
<th>Returns to Homelessness from 6 to 12 Months (181 - 365 days)</th>
<th>Returns to Homelessness from 13 to 24 Months (366 - 730 days)</th>
<th>Number of Returns in 2 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># of Returns</td>
<td>% of Returns</td>
<td># of Returns</td>
<td>% of Returns</td>
<td># of Returns</td>
</tr>
<tr>
<td>Exit was from SO</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from ES</td>
<td>51</td>
<td>9%</td>
<td>34</td>
<td>0%</td>
<td>34</td>
</tr>
<tr>
<td>Exit was from TH</td>
<td>34</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from SH</td>
<td>0</td>
<td>0%</td>
<td>0</td>
<td>0%</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from PH</td>
<td>46</td>
<td>0%</td>
<td>1</td>
<td>2%</td>
<td>4</td>
</tr>
<tr>
<td>TOTAL Returns to Homelessness</td>
<td>131</td>
<td>9%</td>
<td>7</td>
<td>5%</td>
<td>9</td>
</tr>
</tbody>
</table>
Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

<table>
<thead>
<tr>
<th></th>
<th>2015 PIT Count</th>
<th>Most Recent PIT Count</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Total PIT Count of sheltered and unsheltered persons</td>
<td>947</td>
<td>1242</td>
<td>295</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>112</td>
<td>117</td>
<td>5</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>40</td>
<td>75</td>
<td>35</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>152</td>
<td>192</td>
<td>40</td>
</tr>
<tr>
<td>Unsheltered Count</td>
<td>795</td>
<td>1050</td>
<td>255</td>
</tr>
</tbody>
</table>

Metric 3.2 – Change in Annual Counts

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Unduplicated Total sheltered homeless persons</td>
<td>503</td>
<td>332</td>
<td>-171</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>429</td>
<td>227</td>
<td>-202</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>93</td>
<td>112</td>
<td>19</td>
</tr>
</tbody>
</table>

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

Metric 4.1 – Change in earned income for adult system stayers during the reporting period
### FY2016 - Performance Measurement Module (Sys PM)

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>120</td>
<td>150</td>
<td>30</td>
</tr>
<tr>
<td>Number of adults with increased non-employment cash income</td>
<td>35</td>
<td>37</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>29%</td>
<td>25%</td>
<td>-4%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>120</td>
<td>150</td>
<td>30</td>
</tr>
<tr>
<td>Number of adults with increased total income</td>
<td>34</td>
<td>37</td>
<td>3</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>28%</td>
<td>25%</td>
<td>-3%</td>
</tr>
</tbody>
</table>

#### Metric 4.4 – Change in earned income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>41</td>
<td>65</td>
<td>24</td>
</tr>
<tr>
<td>Number of adults who exited with increased earned income</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>5%</td>
<td>6%</td>
<td>1%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>41</td>
<td>65</td>
<td>24</td>
</tr>
<tr>
<td>Number of adults who exited with increased non-employment cash income</td>
<td>5</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>12%</td>
<td>11%</td>
<td>-1%</td>
</tr>
</tbody>
</table>
FY2016 - Performance Measurement Module (Sys PM)

Metric 4.6 – Change in total income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>41</td>
<td>65</td>
<td>24</td>
</tr>
<tr>
<td>Number of adults who exited with increased total income</td>
<td>7</td>
<td>11</td>
<td>4</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>17%</td>
<td>17%</td>
<td>0%</td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Person with entries into ES, SH or TH during the reporting period.</td>
<td>510</td>
<td>435</td>
<td>-75</td>
</tr>
<tr>
<td>Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.</td>
<td>160</td>
<td>122</td>
<td>-38</td>
</tr>
<tr>
<td>Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)</td>
<td>350</td>
<td>313</td>
<td>-37</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Person with entries into ES, SH, TH or PH during the reporting period.</td>
<td>601</td>
<td>459</td>
<td>-142</td>
</tr>
<tr>
<td>Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.</td>
<td>176</td>
<td>131</td>
<td>-45</td>
</tr>
<tr>
<td>Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)</td>
<td>425</td>
<td>328</td>
<td>-97</td>
</tr>
</tbody>
</table>
FY2016 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in 2016.
**FY2016 - Performance Measurement Module (Sys PM)**

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

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons who exit Street Outreach</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of persons above, those who exited to temporary &amp; some institutional destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>% Successful exits</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons in ES, SH, TH and PH-RRH who exited</td>
<td>459</td>
<td>373</td>
<td>-86</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>82</td>
<td>47</td>
<td>-35</td>
</tr>
<tr>
<td>% Successful exits</td>
<td>18%</td>
<td>13%</td>
<td>-5%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2015</th>
<th>Current FY</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons in all PH projects except PH-RRH</td>
<td>393</td>
<td>369</td>
<td>-24</td>
</tr>
<tr>
<td>Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations</td>
<td>369</td>
<td>325</td>
<td>-44</td>
</tr>
<tr>
<td>% Successful exits/retention</td>
<td>94%</td>
<td>88%</td>
<td>-6%</td>
</tr>
</tbody>
</table>
This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

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

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.
# FY2016 - SysPM Data Quality

<table>
<thead>
<tr>
<th></th>
<th>All ES, SH</th>
<th>All TH</th>
<th>All PSH, OPH</th>
<th>All RRH</th>
<th>All Street Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of non-DV Beds on HIC</td>
<td>89</td>
<td>89</td>
<td>52</td>
<td>58</td>
<td>80</td>
</tr>
<tr>
<td>2. Number of HMIS Beds</td>
<td>88</td>
<td>88</td>
<td>24</td>
<td>0</td>
<td>28</td>
</tr>
<tr>
<td>3. HMIS Participation Rate from HIC (%)</td>
<td>98.88</td>
<td>98.88</td>
<td>46.15</td>
<td>0.00</td>
<td>35.00</td>
</tr>
<tr>
<td>4. Unduplicated Persons Served (HMIS)</td>
<td>824</td>
<td>598</td>
<td>429</td>
<td>227</td>
<td>50</td>
</tr>
<tr>
<td>5. Total Leavers (HMIS)</td>
<td>741</td>
<td>574</td>
<td>407</td>
<td>205</td>
<td>21</td>
</tr>
<tr>
<td>6. Destination of Don't Know, Refused, or Missing (HMIS)</td>
<td>186</td>
<td>248</td>
<td>218</td>
<td>69</td>
<td>0</td>
</tr>
<tr>
<td>7. Destination Error Rate (%)</td>
<td>25.10</td>
<td>43.21</td>
<td>53.56</td>
<td>33.66</td>
<td>0.00</td>
</tr>
</tbody>
</table>

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