

## Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

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

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

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

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

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.

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

For CoC Application Detailed Instructions click [here](#).

## 1A. Continuum of Care (CoC) Identification

### **Instructions:**

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

**1A-1. CoC Name and Number:** WI-502 - Racine City & County CoC

**1A-2. Collaborative Applicant Name:** Legal Action of WI, Inc.

**1A-3. CoC Designation:** CA

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

## 1B. Continuum of Care (CoC) Engagement

**Instructions:**

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

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

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

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

Current/former homeless on PIT committee/develop PIT street count procedures. DV, human trafficking, youth providers-input on CoC protocols to identify/assist youth & survivors of dv & human trafficking. Legal Services/SOAR provider input on development of general CoC policies/protocols & SOAR, identification of policies/procedures that criminalize homelessness. Cross membership in community coalitions-veterans, domestic violence, human trafficking, mental illness, financial fitness, housing, community development provides additional input & expertise & include law enforcement, local jail & public housing authority. CoC meetings not restricted to "members" & anyone can speak on issues @ meetings. Community surveys, focus groups, traditional & social media, advisory opinions from experts inside/outside CoC, current/former homeless involvement in all aspects used. Committees & workgroups open to anyone in community & include persons currently/formerly homeless, other subpops & expertise.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Safe Haven of Racine	Yes	Yes	Yes
Racine County Human Services Department	No	Yes	No

**1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area.**

**Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.**

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
Women's Resource Center	Yes	Yes
Catherine Marian Housing/Bethany Apartments	Yes	Yes
Legal Action of Wisconsin	Yes	Yes

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

The CoC continually seeks out new members to join and build capacity within the CoC. The local newspaper, Facebook & our website are used in addition to invitations. When the NOFA was released a notice was posted to the CoC website, and sent to a number of other organizations that have expressed interest in the past were notified. Grant planning & preparation meetings are also posted publicly so that interested individuals can attend & receive more information, & technical assistance if they desire to submit a new application. Because we desire high quality projects in our community our philosophy is to seek out possible new partners. The CoC has developed an objective process for evaluating renewal projects, and new project applications so a new project application is not at a disadvantage in the process.

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

## 1C. Continuum of Care (CoC) Coordination

**Instructions:**

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

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

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

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

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

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

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

The CoC participated in the City of Racine & State of Wisconsin Con Plan process. The State sent an e-mail & to the CoC with a questionnaire, which was completed and returned. Subsequent communication occurred as the plan was developed. CoC leadership & member agencies participated in several citizen input meetings by both jurisdictions. The City of Racine sent out e-mails, & discussed the plan with us at several CoC meetings. City Development staff attend CoC meetings, meet regularly with CoC agencies and leadership. Racine CoC has representation on the Interagency Workgroup which meets 6x/year & is convened by the State. Monthly contact occurs between the State & CoC leadership and agencies, and several times a month with the City. Homelessness issues & issues impacting homelessness – economic, housing, etc. – including policy & new program ideas are discussed. PIT data was provided to both jurisdictions, and other HMIS data is provided to them on an on-going basis.

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

CoC leadership & agencies have monthly contact with the City of Racine & State of Wisconsin. Both jurisdictions hold listening sessions & solicit information via e-mail & questionnaire. The application processes for both were developed with input from the CoC, including how allocations will be made. Both jurisdictions permit the CoC to determine the best allocation for the community. The ability to do this for both jurisdictions results in a more efficient allocation of funds in our community. HMIS data is provided to both jurisdictions to assist in the development of performance standards & evaluation outcomes. Data is discussed & decisions made jointly about performance standards & evaluation outcomes. City staff attend monthly CoC meetings, including committees. A CoC representative accompanies City and State staff when monitoring occurs, in addition to a separate evaluation done by the CoC. This allows for open discussion about performance & outcomes.

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

All agencies in the CoC have been trained in Trauma Informed Care, & receive

regular training & updates related to domestic violence, child abuse, sexual assault, stalking and human trafficking. Protocol in the CoC is to directly contact a victim services provider if someone indicates they do not feel safe or are a victim. There is also a CoC policy that a participant in any non-victim services housing program can continue to receive case management & services from the victim services agency. Victims always make the final decision as to where they will live when entering scattered site PSH, RRH or other PH. Victims are included in the CoC Prioritization listing but are assigned an identification number by the victim services provider to be used in the prioritization to maintain confidentiality. Only the victim services provider can connect the number with the name of the victim. Safety & empowerment are paramount when working with a victim, & understood by all providers.

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Housing Authority of Racine County	10.00%	No

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

The State of Wisconsin Low Income Housing Tax Credit (LIHTC) qualified allocation plan includes a 10% set aside for supportive housing units, and 50% of those units must be allocated to households that are chronically homeless or prone to homelessness. There are set aside units in Racine County. A private landlord operates a site based apartment complex that have 71 section 8 subsidized units. The landlord sets aside 10% of these units for persons experiencing homelessness. There are at least 2 other subsidized projects in the community that works with the CoC to provide units to persons experiencing homelessness by waiving some of the admission criteria. These individuals would otherwise not meet eligibility criteria and would not be admitted. HALO, the CoCs largest general shelter & provider of PSH, works with a local developer to rehab properties & make them available to persons experiencing



homelessness.

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

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
<b>Other:(limit 1000 characters)</b>	
Law Enforcement receives yearly training from NAMI or another mental health provider on crisis intervention	<input checked="" type="checkbox"/>
Meetings with downtown businesses to discuss particular issues & concerns that may result in police being contacted.	<input checked="" type="checkbox"/>
Legal Action of WI - educational presentation developed for providers for identification of policies, procedures, protocols, practices & law that may criminalize the homeless. Project to re-open convictions & dispositions to waive forfeitures or obtain community services in lieu of forfeiture so not jailed for non-payment.	<input checked="" type="checkbox"/>

## 1D. Continuum of Care (CoC) Discharge Planning

**Instructions:**

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

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

Foster Care:	<input type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

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

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

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

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

No response required as there is coordination.

## 1E. Centralized or Coordinated Assessment (Coordinated Entry)

**Instructions:**

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

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

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

The CoCs CE process

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

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Confere ncing	Does not Participate	Does not Exist
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Law Enforcement</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Local Jail(s)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Hospital(s)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>EMT/Crisis Response Team(s)</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Mental Health Service Organizations</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Substance Abuse Service Organizations</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Affordable Housing Developer(s)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Public Housing Authorities</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Non-CoC Funded Youth Homeless Organizations</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>School Administrators/Homeless Liaisons</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Non-CoC Funded Victim Service Organizations</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Street Outreach Team(s)</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Homeless or Formerly Homeless Persons</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Collaborative Applicant/SOAR Provider/Legal Services Provider</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Veteran Assistance Provider</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Employment Service Provider</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

### Instructions

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

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

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	12
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	3
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	9
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

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

<b>Performance outcomes from APR reports/HMIS:</b>	
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
<b>Monitoring criteria:</b>	
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
<b>Need for specialized population services:</b>	

Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

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

A threshold APR review was done to determine the % of participants entering the project with disabilities, from the street or shelter, chronically homeless, and youth. The first threshold review was to assure that project eligibility requirements were met regarding literal homelessness, disability, CH, youth, etc. Projects not having those eligibility requirements or target populations were reviewed to assure that at least 50% of those served were disabled, came from the streets or shelter, or chronically homeless. A penalty of 5 points is assessed for any project not meeting these standards. All projects met minimum standards and no penalty points were assessed.

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

The initial notification and review & selection criteria were posted on the CoC website on July 27, 2016. On August 31, 2016 the CoC website was updated. The preliminary ranking was posted on the website on September 7, 2016. On September 10, 2016 a Facebook posting was done. On September 12, 2016 the final ranking was posted to the CoC website.

**1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the** 09/13/2016

**public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached).**

**1F-5. Did the CoC use the reallocation process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)** Yes

**1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)** 08/31/2016

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



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

## Instructions

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

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

The CoC reviews HMIS data on a monthly basis for each project. Data reviewed includes utilization rates, characteristics of participants such as disability, chronic homelessness, homeless status at entry, income and mainstream benefits status. APRs are also reviewed. Drawdown and spending information is obtained from the Field Office. Monthly, or more often if necessary, the CoC President has a telephone conference with the Field Office regarding project status and concerns of Field Office Staff. At least once per year a random request is made for draw down requests and back up. Accompany Field Office on site when they are doing monitoring. On site visits include review of policies and procedures, participant files and financial records. Interviews with participants, if willing, may be done. A review of the non-profit status and compliance with 501(c)(3) requirements is also reviewed periodically on the State of Wisconsin DFI website and Guide Star website.

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

## **2A. Homeless Management Information System (HMIS) Implementation**

**Intructions:**

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

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

**2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA.** HMIS MOU pgs. 4 - 8

**2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application.** Yes

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

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

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

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

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

### Instructions

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

**2B-1. Select the HMIS implementation coverage area:** Statewide

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

### 2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$438,190
ESG	\$32,783
CDBG	\$0
HOME	\$0
HOPWA	\$0
<b>Federal - HUD - Total Amount</b>	<b>\$470,973</b>

### 2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$8,211
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$91,739
Other Federal	\$0
<b>Other Federal - Total Amount</b>	<b>\$99,950</b>

### 2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$0
State	\$13,940
<b>State and Local - Total Amount</b>	<b>\$13,940</b>

**2B-2.4 Funding Type: Private**

Funding Source	Funding
Individual	\$0
Organization	\$46,059
<b>Private - Total Amount</b>	<b>\$46,059</b>

**2B-2.5 Funding Type: Other**

Funding Source	Funding
Participation Fees	\$124,800
<b>Other - Total Amount</b>	<b>\$124,800</b>

<b>2B-2.6 Total Budget for Operating Year</b>	<b>\$755,722</b>
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## 2C. Homeless Management Information System (HMIS) Bed Coverage

**Instructions:**

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

**2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy):** 05/03/2016

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

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	203	25	164	92.13%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	104	32	72	100.00%
Rapid Re-Housing (RRH) beds	29	0	29	100.00%
Permanent Supportive Housing (PSH) beds	134	9	94	75.20%
Other Permanent Housing (OPH) beds	0	0	0	

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

There are 31 HUD VASH beds that are not in HMIS. The Housing Authority of Racine County (HARC) agreed in November 2015 to have staff person trained to enter in HMIS. However, the individual resigned and the beds were never entered into HMIS. HARC has agreed to designate another person to be trained to use WISP and the beds will be entered into HMIS. The target deadline is by PIT in January 2017. With the addition of these beds into HMIS, our HMIS coverage rate will be 100% for non-DV beds.

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

VA Grant per diem (VA GPD):	<input type="checkbox"/>
VASH:	<input checked="" type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input type="checkbox"/>

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

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

**Instructions:**

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

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

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	0%	16%
3.3 Date of birth	1%	0%
3.4 Race	2%	0%
3.5 Ethnicity	2%	0%
3.6 Gender	1%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	0%	0%
3.9 Residence prior to project entry	0%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	5%	0%
3.16 Client Location	1%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	3%	0%

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

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
VA SSVF, RHY, Eport, PATH APR/QPR	<input type="checkbox"/>



None	<input type="checkbox"/>
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**2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?** 12

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

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

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

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input checked="" type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

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

Not applicable.

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

**Instructions:**

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

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

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

**2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy)** 01/27/2016

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

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

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

**Instructions:**

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

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

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

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

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input type="checkbox"/>
Interview of sheltered persons:	<input checked="" type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

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

The methodology selected was a complete census count utilizing HMIS and interviews of sheltered persons. This methodology was selected as we believe it provides the most accurate count of sheltered persons, and the most accurate

data. By comparing the results of interviews with HMIS data we are able to identify any discrepancies in the count and data in HMIS to assure the most accurate and up to date information. The interview of sheltered persons also allows us to obtain accurate data from domestic violence/victim service programs that do not utilize HMIS.

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

Not applicable as we did not change the methodology.

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

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

Not applicable as we did not change provider coverage.

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

**Instructions:**

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

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

Training:	<input checked="" type="checkbox"/>
Follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

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

Not applicable as there were no changes to implementation of the sheltered PIT count.

## 2H. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count

### Instructions:

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

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

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

**2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy):** 01/27/2016

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

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

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

**Instructions:**

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

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

Night of the count - complete census:	<input checked="" type="checkbox"/>
Night of the count - known locations:	<input checked="" type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

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

The methodology selected by the CoC includes a complete census that incorporates several visits during the count to known locations. The count is also done on the same day and same time as the other CoCs in the state of Wisconsin. Teams are assigned to designated geographical areas in Racine County for the broadest coverage possible. Teams are also assigned to go to known location several times over the designated hours of the PIT. We believe that this methodology provides us with the greatest accuracy and likelihood of locating persons who are unsheltered. Data collected by the teams is then compared manually and with sheltered data in HMIS to assure that a person was not counted twice or did not subsequently enter shelter at some point during the count.

**2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)**

Not applicable as there were no changes in methodology.

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

**2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)**



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

**Instructions:**

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

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

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input checked="" type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey questions:	<input checked="" type="checkbox"/>
Enumerator observation:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

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

Not applicable as there were not changes to implementation.

## 3A. Continuum of Care (CoC) System Performance

### Instructions

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

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

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

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

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	168	196	28
Emergency Shelter Total	82	124	42
Safe Haven Total	0	0	0
Transitional Housing Total	75	71	-4
Total Sheltered Count	157	195	38
Total Unsheltered Count	11	1	-10

#### 3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	909
Emergency Shelter Total	822
Safe Haven Total	0
Transitional Housing Total	95

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

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

**(limit 1000 characters)**

The CoC maintains a strong prevention & diversion emphasis. Legal representation and rental assistance is an effective collaborative intervention and diversion strategy for those at risk or imminent risk of homelessness. There is coordination with ResCare, TANF provider, for emergency assistance funds used to prevent eviction or move a household into new housing so they do not enter the homeless system. Financial education is coordinated with the Financial Fitness Coalition. The CoC has examined prevention data collected over a period of years to identify commonalities of households that have a repeated need for prevention assistance. Loss of income, mental illness, physical disability, lack of transportation, and no HS diploma/GED are the primary identified common factors. Additionally, persons with several evictions in one year are likely to enter the homeless system at some point without services being provided to address the factors underlying their housing instability.

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

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

**(limit 1000 characters)**

The CoC has increased the number of Rapid Re-Housing units, and has developed relationships with landlords and affordable housing developers to increase the number of units available in the community that the homeless can access. HALO has developed a number of units with a local developer. Efforts to increase employability have increased, including overcoming barriers to employment such as driver license recovery & occupational licensing reinstatement. Staff have been added to a SOAR project to increase the speed with which applications can be submitted & a source of income obtained to obtain housing. The CoC utilizes HMIS data to identify those with the longest length of time homeless. This is also part of the prioritization criteria.

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

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

**3A-4a. Exits to Permanent Housing Destinations:**

**Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent supportive housing.**

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	249
Of the persons in the Universe above, how many of those exited to permanent destinations?	168
% Successful Exits	67.47%

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

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	80
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	73
% Successful Retentions/Exits	91.25%

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

The CoC uses HMIS data, household interviews and data from other sources to identify commonalities in those households returning to homelessness. Reports have been developed in HMIS to identify shelter returns, including aggregate data on numbers and characteristics. Identification of the most common factors has resulted in working groups within the community to increase resources available in the community to provide an adequate level of services, for example to persons with mental illness and substance abuse. TANF funds are available to assist families with children who have a sudden temporary loss of income with one month of rent which prevents many of these families from returning to homelessness. A Rent Smart program that educates tenants and landlords on rights and responsibilities has been enhanced with involvement from the City of Racine.

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

The CoC has a targeted 3 track approach. Persons believed to be disabled are

referred to a legal services provider, also a SOAR provider, to apply for SSI/SSDI benefits. Applicants have the option to participate in services offered by the State of Wisconsin Division of Vocational Rehabilitation to determine if they can enter some type of employment rather than SSI/SSDI. Persons not disabled needing additional soft skills training, targeted job placement or re-entry services are referred to non-profit employment assistance program. Legal services program addresses driver license & occupational license barriers. Job training available through apprenticeships & training in community. Persons job ready assisted by workforce development & private employment placement agencies located next door to the largest shelter in our CoC, or at shelter to provide services. These services can be utilized by all CoC funded projects, as well as ESG funded.

**3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.  
(limit 1000 characters)**

ResCare, the SNAP Employment and Training contractor, for the CoC geographic area attends CoC meetings. A representative has regularly scheduled enrollment times at the CoC's largest shelter provider, which is also the CoC's largest PSH and TH provider. Access to GED courses, workshops, on the job training, work placements and other types of training is provided through ResCare. ResCare has also contracted with Legal Action to provide legal assistance to help recipients have driver license suspensions lifted and criminal record expungement, both of which serve as barriers to employment and access to higher paying jobs. ResCare also coordinates employment and training opportunities with the Workforce Investment Board provider in Racine County, and various apprenticeship and training programs. Several private employment agencies provide services at the shelters.

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

The CoC did not exclude any geographic areas for the CoC's unsheltered PIT count. The CoC covered the entire geographic area.

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

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

The CoC did not completely exclude any geopgraphic areas for the most recent PIT count.

**3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached.  
(mm/dd/yyyy)** 08/05/2016

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

Not applicable - submitted on time.

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

### Objective 1: Ending Chronic Homelessness

**Instructions:**

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

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

- 1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;**
- 2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and**
- 3. The highest needs for new and turnover units.**

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	10	2	-8
Sheltered Count of chronically homeless persons	6	2	-4
Unsheltered Count of chronically homeless persons	4	0	-4

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

The overall reduction of 8 persons has been accomplished by moving CH persons into permanent housing, decreasing the length of time homeless and emphasis on ending returns to homelessness. The use of CE has greatly improved the ability to quickly identify & house anyone who is CH. The specialized training of the PATH outreach team has been instrumental in engaging those with mental illness & getting them into housing & keeping them in housing. A SOAR & companion physical disability project obtain benefits quickly for the CH. Faith based community has teamed with the CoC to provide parish nursing, food, case management, housing & spiritual services to the CH. All of these have increased our ability to house & keep CH stable.

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

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	31	9	-22

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

Beds currently occupied by a chronically homeless person & some prioritized were incorrectly reported as dedicated in prior years. There are only 9 beds in the CoC dedicated for use by the chronically homeless pursuant to contractual obligation with HUD. However, all CoC beds are prioritized for CH, and the CoC prioritization policy requires that a CH person be taken before anyone else in the CoC when there is an available bed - even if being used as a place holder until more appropriate housing is available. For example, may be placed in RRH or TH until PSH or PH is identified.

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

**3B-1.3a. If “Yes” was selected for question 3B-1.3, attach a copy of the CoC’s written** PSH 1-2



**standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found.**

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

This question will not be scored.

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

CoC policy prioritizes CH households - including CH families. When a bed - any bed - becomes available it must be filled by a CH household unless there are no CH households. RRH & TH beds are used as temporary placeholders if there are no PSH beds available until a PSH or PH bed & adequate services are available. Outreach includes hospitals, jails, streets. Outreach staff place CH person on the CE immediately & housing is actively sought out at that point that includes private landlords, subsidized units & wrap around services rather than waiting for a CoC funded bed to open. SSVF, HUD-VASH quickly accessed by identified CH veterans. TBRA prioritizes CH. Partnering with faith based community and municipal services. Use of diversion & prevention assistance such as legal services funded by SSVF & VOCA, as well as other VOCA funded services, DOJ funded re-entry services, & TANF.

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

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

**Instructions:**

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

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

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

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input checked="" type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
Child with disability	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

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

A Rapid Re-Housing prioritization policy has been developed, which includes the administration of the VI-SPDAT. The VI-SPDAT should be administered within 7-10 days of entering a shelter, or identifying on the street or place not meant for human habitation if shelter is refused. A landlord registry is being developed, and we currently have several landlords that are regularly contacted to secure units. However, the registry needs to increase the number of landlords to assure quick access to units. A CoC Housing Navigator position has been created to work with landlords and CoC providers. Each family has a case manager and the family, case manager and Housing Navigator all work together to place the family into housing.

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

	2015	2016	Difference
RRH units available to serve families in the HIC:	11	29	18

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

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input checked="" type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input checked="" type="checkbox"/>
Training on Fair Housing, ADA, Civil Rights - yearly	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

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

**PIT Count of Homelessness Among Households With Children**

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
--	--	------	------------

Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	20	22	2
Sheltered Count of homeless households with children:	20	22	2
Unsheltered Count of homeless households with children:	0	0	0

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

There was a minimal net increase of 2 households that is accounted for by a decrease in TH of 2, and ES increase of 4. There were 0 unsheltered households in the last 2 PIT counts. The CoC is of the opinion that we have good prevention and diversion practices in place that is stabilizing this number. We have also implemented employment & housing strategies that have helped households to recover quickly so that periods of homelessness are relatively short for them. We have also increased the total number of ESG RRH funded beds that can be used for families. We have added HUD CoC funded RRH beds that have just become operational & it is likely that the number will begin to decrease next year rather than be stable as in the last few years.

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

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

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

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>
Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input checked="" type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>

Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

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

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

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

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	14	12	-2

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

The identified youth were all between the age of 18 - 24.This age group tends to

bounce around between family & friends, & end up on the street before finding their way to shelter. They often do not enter shelter until found by a street outreach worker, have some type of medical emergency - including a drug overdose, or some type of police contact. Although this decrease (2) is minimal it may be a reflection of increased efforts to provide information to this age group so they know there is a shelter option & to try to locate those at risk more quickly - before they spend time on the street. SAFE Haven Youth Shelter has also worked with Racine County to address youth aging out of foster care & finding options that will lead to increased stability so they do not become homeless.

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

	Calendar Year 2016	Calendar Year 2017	Difference
<b>Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):</b>	\$317,967.00	\$358,522.00	\$40,555.00
<b>CoC Program funding for youth homelessness dedicated projects:</b>	\$28,967.00	\$69,522.00	\$40,555.00
<b>Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):</b>	\$289,000.00	\$289,000.00	\$0.00

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

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	9
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	45
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	27

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

The McKinney-Vento liaison from the largest school district in Racine County is a regularly attending member of the CoC. Contact with other liaisons in Racine County occurs at least annually. SAFE Haven Youth Shelter, HALO and WRC (DV) shelters depend on the assistance of the liaisons to assure that the school district provides the required educational services while the child is homeless. There is also collaboration between the CoC and school districts with meetings and presentations regarding homeless youth. The CoC and homeless liaison also provide a forum to show the documentary 16:49 to educators. The CoC also works with CESA 1, including agency staff attending meetings and training regarding programming for homeless, runaway and trafficked youth, as well as

general education issues.

**3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow.  
(limit 2000 characters)**

Each CoC agency has a designated staff person assigned to notify participants of the eligibility requirements, and coordinate with the homeless liaison to assure access. A referral form has been developed, and each time a student enters shelter, TH, PSH or RRH, it is required that the referral be sent to the homeless liaison for the child's school district, followed by a telephone call. If difficulty is experienced obtaining required educational services, SAFE Haven Youth Shelter has been designated as the initial point of contact to assist with intervention with the school district. If that fails, Legal Action is to be contact so one of its attorneys can intervene when services are denied or otherwise impaired.

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

The SAFE Haven SAFE Passage Parenting Project -agreement with Family Smart/Kid Friendly and Parents as Teachers Home Visitation project which are early childhood programs. Head Start policies include priority for homeless children in CoC (HUD funded) projects. UW Extension provides preference for homeless children in shelters (HUD funded)for early childhood activities. CESA has agreements with various agencies for training and resource development.

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

### Objective 3: Ending Veterans Homelessness

**Instructions:**

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

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

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	29	33	4
Sheltered count of homeless veterans:	29	33	4
Unsheltered count of homeless veterans:	0	0	0

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

No change - no unsheltered veterans in the last 2 PIT counts. All veterans are immediately referred to Center for Veterans(CVI) issues for assessment. In addition to the VI-SPDAT being administered and the individual being placed on the CoC Prioritization listing, all veterans are entered into a registry maintained by CVI. This gives them access to housing such as SSVF, per diem, and HUD-VASH vouchers as well as many other veteran's services. The immediate referral and availability of SSVF, per diem and HUD VASH vouchers are the primary reasons for the reduction.



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

All veterans are immediately referred to Center for Veterans(CVI) issues for assessment. In addition to the VI-SPDAT being administered and the individual being placed on the CoC Prioritization listing, all veterans are entered into a registry maintained by CVI.This gives them access to housing such as SSVF, per diem, and HUD-VASH vouchers as well as many other veteran's services.In addition to CVI, VAF operates a transitional housing facility. It is located next to a VA satellite clinic & case workers from the VA are regularly on site at VAF. There is also a group that has been meeting including reps from CVI, VAF, State of WI DVA, VA, HUD Field Office & CoC to evaluate current practices & identify best practices, needs. Staff from the VA attend monthly CoC meetings. The CoC holds one meeting a year devoted to presentations from the VA, CVI, & VAF.

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

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	36	33	-8.33%
Unsheltered Count of homeless veterans:	0	0	0.00%

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

This question will not be scored.

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

We will continue to use the strategies that we are currently using. In the City of Racine we have reached functional zero. There is a 30 bed THg facility outside of the City of Racine that accounts for the bulk of homeless veterans. The bulk of that number come from outside of our CoC & generally return to the community from where they were living before entering the TH facility. We will continue to work with other CoCs to assess the available housing & options for

these individuals, as well as continue to make available to them the housing & services in our community. The strategies we have been using have been discussed previously but use of CE, a registry, immediate referral to a veterans service organization that assesses for other veteran's programs, use of SSVF & HUD-Vash, regular meetings with the CoC, government leaders, VA & veterans organizations will all be strategies we continue to utilize.

## 4A. Accessing Mainstream Benefits

**Instructions:**

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

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

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

### FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	12
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	12
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

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

Wheaton Franciscan HealthCare, Racine Kenosha Community Action Agency, Racine County Human Services Agency & HealthCare Network all provide enrollment assistance to access Medicaid, Medicare, & ACA options. Legal Action provides SOAR & non-SOAR services for SSI/SSDI including assistance with Medicaid/Medicare & issues that may arise later involving alleged over payments, incorrect payments, and also claim denials including private insurance. etc. There are few participants that do not have some type of health coverage as a result of these efforts. We do not have a FQHC in our

community, but Health Care Network provides medical services to those who do not qualify for other types of health care assistance.

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

<b>Educational materials:</b>	<input checked="" type="checkbox"/>
<b>In-Person Trainings:</b>	<input checked="" type="checkbox"/>
<b>Transportation to medical appointments:</b>	<input checked="" type="checkbox"/>
Case Manager support for medical appointment coordination	<input checked="" type="checkbox"/>
Monitor referrals to assure that they are in network/will be paid	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
<b>Not Applicable or None:</b>	<input type="checkbox"/>

## 4B. Additional Policies

**Instructions:**

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

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

### FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	10
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	10
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	100%

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

### FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	10
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	10
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	100%

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

Direct outreach and marketing:	<input style="width: 30px; height: 20px;" type="checkbox"/>
--------------------------------	---

Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input checked="" type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

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

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	11	29	18

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

**4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135? (limit 1000 characters)**

Not applicable.

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

**4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons**

**defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)**

Not applicable.

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

**4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)**

Not applicable.

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

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

This response does not affect the scoring of this application.

CoC Governance:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input checked="" type="checkbox"/>

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

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



## 4C. Attachments

**Instructions:**

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

Document Type	Required?	Document Description	Date Attached
13. HDX-system Performance Measures	Yes	HDX System Perfor...	08/23/2016
14. Other	No	None	09/13/2016
15. Other	No	None	09/13/2016
06. CoC's Governance Charter	Yes	Governance Charter	09/13/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	rating and review	09/13/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No	Not applicable	09/13/2016
05. CoCs Process for Reallocating	Yes	Re-allocation	09/13/2016
11. CoC Written Standards for Order of Priority	No	CH Prioritization...	09/13/2016
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA No Preference	09/13/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	WI HMIS Governanc...	08/18/2016
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies and...	08/23/2016
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	Rating and selection	09/13/2016
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No	Not applicable	09/13/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	Website posting	09/13/2016
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	No rejections	09/13/2016

## **Attachment Details**

**Document Description:** HDX System Performance Measures

## **Attachment Details**

**Document Description:** None

## **Attachment Details**

**Document Description:** None

## **Attachment Details**

**Document Description:** Governance Charter

## **Attachment Details**

**Document Description:** rating and review

## **Attachment Details**

**Document Description:** Not applicable

## **Attachment Details**

**Document Description:** Re-allocation

## **Attachment Details**

**Document Description:** CH Prioritization for PSH

## **Attachment Details**

**Document Description:** PHA No Preference

## **Attachment Details**

**Document Description:** WI HMIS Governance Charter 2016

## **Attachment Details**

**Document Description:** HMIS Policies and Procedures Manual

## **Attachment Details**

**Document Description:** Rating and selection

## **Attachment Details**

**Document Description:** Not applicable

## **Attachment Details**

**Document Description:** Website posting

## **Attachment Details**

**Document Description:** No rejections

## Submission Summary

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

Page	Last Updated
<b>1A. Identification</b>	09/01/2016
<b>1B. CoC Engagement</b>	09/10/2016
<b>1C. Coordination</b>	09/13/2016
FY2016 CoC Application	Page 61
	09/13/2016

<b>1D. CoC Discharge Planning</b>	09/01/2016
<b>1E. Coordinated Assessment</b>	09/10/2016
<b>1F. Project Review</b>	09/13/2016
<b>1G. Addressing Project Capacity</b>	09/10/2016
<b>2A. HMIS Implementation</b>	09/10/2016
<b>2B. HMIS Funding Sources</b>	08/23/2016
<b>2C. HMIS Beds</b>	09/13/2016
<b>2D. HMIS Data Quality</b>	09/12/2016
<b>2E. Sheltered PIT</b>	09/13/2016
<b>2F. Sheltered Data - Methods</b>	09/13/2016
<b>2G. Sheltered Data - Quality</b>	09/13/2016
<b>2H. Unsheltered PIT</b>	09/13/2016
<b>2I. Unsheltered Data - Methods</b>	09/13/2016
<b>2J. Unsheltered Data - Quality</b>	09/13/2016
<b>3A. System Performance</b>	09/13/2016
<b>3B. Objective 1</b>	09/13/2016
<b>3B. Objective 2</b>	09/13/2016
<b>3B. Objective 3</b>	09/13/2016
<b>4A. Benefits</b>	09/13/2016
<b>4B. Additional Policies</b>	09/10/2016
<b>4C. Attachments</b>	09/13/2016
<b>Submission Summary</b>	No Input Required

# Performance Measurement Module (Sys PM)

## 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.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		767		47			20	
1.2 Persons in ES, SH, and TH		854		82			26	

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.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	-	-	-	-	-	-	-
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-

## Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	18	2	11%	1	6%	2	11%	5	28%
Exit was from ES	101	11	11%	5	5%	2	2%	18	18%
Exit was from TH	43	0	0%	1	2%	3	7%	4	9%
Exit was from SH	0	0		0		0		0	
Exit was from PH	30	4	13%	1	3%	1	3%	6	20%
TOTAL Returns to Homelessness	192	17	9%	8	4%	8	4%	33	17%



# Performance Measurement Module (Sys PM)

## Measure 3: Number of Homeless Persons

### Metric 3.1 – Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	210	168	-42
Emergency Shelter Total	97	82	-15
Safe Haven Total	0	0	0
Transitional Housing Total	102	75	-27
Total Sheltered Count	199	157	-42
Unsheltered Count	11	11	0

### Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		909	
Emergency Shelter Total		822	
Safe Haven Total		0	
Transitional Housing Total		95	

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

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		32	
Number of adults with increased earned income		0	
Percentage of adults who increased earned income		0%	

## Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		32	
Number of adults with increased non-employment cash income		6	
Percentage of adults who increased non-employment cash income		19%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		32	
Number of adults with increased total income		6	
Percentage of adults who increased total income		19%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		17	
Number of adults who exited with increased earned income		1	
Percentage of adults who increased earned income		6%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		17	
Number of adults who exited with increased non-employment cash income		4	
Percentage of adults who increased non-employment cash income		24%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		17	
Number of adults who exited with increased total income		4	
Percentage of adults who increased total income		24%	

## Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		789	
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.		137	
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)		652	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		859	
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.		161	
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.)		698	

### 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.

## Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		42	
Of persons above, those who exited to temporary & some institutional destinations		12	
Of the persons above, those who exited to permanent housing destinations		23	
% Successful exits		83%	

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

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		837	
Of the persons above, those who exited to permanent housing destinations		322	
% Successful exits		38%	

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

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		86	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		80	
% Successful exits/retention		93%	



The Continuum of Care  
For the City and County of Racine, U.A.

## GOVERNANCE CHARTER

1. Organization
2. Geographic Area
3. Purpose
4. Responsibilities of the Racine CoC
  - 4.1. Operation of the CoC
  - 4.2. Homeless Management Information System (HMIS)
  - 4.3. Continuum of Care Planning
  - 4.4. Preparation of a CoC Application for Funds
5. CoC Membership
  - 5.1. Open Membership and New Members
  - 5.2. Responsibilities of Members
  - 5.3. Membership Meetings
  - 5.4. Notice of Meeting
  - 5.5. Quorum and Voting
6. Board
  - 6.1. Responsibilities of the Board
  - 6.2. Board Membership
    - 6.2.1. Composition
    - 6.2.2. Term of Office
    - 6.2.3. Nomination and Voting
    - 6.2.4. Resignation and Removal
    - 6.2.5. Vacancies
  - 6.3. Officers and Terms
    - 6.3.1. Officers
    - 6.3.2. Election and Term
    - 6.3.3. President/Chair and Vice President/Vice Chair
    - 6.3.4. Secretary
    - 6.3.5. Resignation of Officers
    - 6.3.6. Officer Vacancies
7. Rules of Governance for the Board
  - 7.1. Quorum and Voting
  - 7.2. Proxies
  - 7.3. Action without a Meeting
8. Committees and Working Groups
  - 8.1. Standing Committees
    - 8.1.1. Steering Committee
    - 8.1.2. Performance and Outcome Evaluation Committee
    - 8.1.3. CoC Resource Development Committee
    - 8.1.4. HMIS/Data Committee
    - 8.1.5. Coordinated Assessment and Prioritization Committee
    - 8.1.6. Other Committees and Working Groups
9. Appointment of Collaborative Applicant and Designation of HMIS
  - 9.1. Collaborative Applicant
  - 9.2. HMIS Lead

- 9.3. HMIS Designation
  - 9.4. HMIS Governance Charter
  - 10. Code of Conduct and Conflicts of Interest
    - 10.1. Conduct and Attendance
    - 10.2. Conflict of Interest
      - 10.2.1. Rules Regarding Conflict
      - 10.2.2. Disclosure
      - 10.2.3. Abstention from Decision-Making
      - 10.2.4. Annual Conflict of Interest Acknowledgement Form
      - 10.2.5. Conflict Of Interest – CoC Application and Other Funding Application Decisions
  - 11. Approval of Governance Charter and Subsequent Amendments
- 

## **1. Organization**

- a. The Continuum of Care for the City and County of Racine, U.A. is the name of this organization. It is an unincorporated association organized in the State of Wisconsin. HUD's designation is Continuum of Care for the City and County of Racine, and WI-502. Racine CoC will be used throughout this document.
- b. This organization was formerly known as the Homeless Assistance Coalition, and until such time as this Governance Charter is approved by a majority of the members of the Racine CoC, the operating policies and procedures of the Homeless Assistance Coalition shall remain in full force and effect as set forth in the legal document forming the Racine CoC.

## **2. Geographic Area**

The Racine CoC covers the entirety of Racine County, Wisconsin.

## **3. Purpose**

The purpose of the Racine CoC is to:

- a. Assess the needs of the community;
- b. Develop a county wide system to prevent and end homelessness;
- c. Promote and coordinate a county wide system of services with the goal of preventing and ending homelessness;
- d. Evaluate the services provided in the community;
- e. Facilitate the allocation of funding to best address the goals of preventing and ending homelessness; and
- f. Encourage participation in the CoC by all members of the community.

## **4. Responsibilities of the Racine CoC**

The Racine CoC has the following responsibilities:

### **4.1. Operation of the CoC**

- a. Hold meetings of the full membership, with published agendas, at least semi-annually;
- b. Issue a public invitation at least annually for new members within Racine County;
- c. Adopt and follow a written process to select a CoC Board and review, update, and approve the process at least once every 5 years;
- d. Appoint additional committees, subcommittees, and workgroups;
- e. Adopt, follow, and update annually a governance charter in consultation with the collaborative applicant and the HMIS lead;
- f. For CoC and ESG grants:
  - 1.) Establish performance targets appropriate for population and program type in consultation with recipients and sub-recipients,

- 2.) Monitor recipient and sub-recipient performance,
- 3.) Evaluate outcomes,
- 4.) Take appropriate action to address poor performance, and
- 5.) report as required to HUD;
- g. Establish and operate a centralized or coordinated assessment system in consultation with recipients of ESG Funds; and
- h. Establish and follow written standards for providing CoC assistance in consultation with recipients of ESG Funds. At a minimum, these written standards must include:
  - 1.) Policies and procedures for evaluating household eligibility for assistance;
  - 2.) Policies and procedures for determining and prioritizing which households will receive permanent supportive housing, rapid rehousing and transitional housing; and
  - 3.) Policies and procedures for determining the duration of assistance and rent households must pay while receiving rapid rehousing assistance.

#### **4.2. Homeless Management Information System (HMIS)**

- a. Designate a single HMIS for the Racine CoC geographic area and designate a Lead Agency to manage the HMIS system;
- b. Ensure that the HMIS is administered in compliance with HUD requirements.
- c. Enter into an MOU with the HMIS Lead Agency that includes at a minimum:
  - 1. Review, revise, and approve privacy, security, and data quality plans; and
  - 2. Ensure consistent participation in HMIS; and

#### **4.3. Continuum of Care Planning**

- a. Coordinate implementation of a housing and service system;
- b. Conduct, at least biennially, a Point-in-Time count of homeless persons that meets HUD requirements;
- c. Conduct an annual gaps analysis of homelessness needs and services;
- d. Provide information required to complete the Consolidated Plan(s) for the City of Racine and State of Wisconsin;
- e. Consult with State of Wisconsin and City of Racine ESG recipients on the plan for allocating ESG funds and reporting/evaluating performance of ESG programs.

#### **4.4. Preparation of a CoC Application for Funds**

- a. Design, operate, and follow a collaborative process for the development of applications
- b. Approve project applications in response to a CoC Program Notice of Funding Availability (NOFA);
- c. Establish priorities for ranking and funding projects;
- d. Designate the collaborative applicant to submit the application;
- e. The collaborative applicant is responsible for facilitating the collection of information for the application, preparation of the application, and submitting the application;
- f. The collaborative applicant will apply for planning grant funds when made available in the NOFA.

### **5. CoC Membership**

#### **5.1. Open Membership and New Members**

- a. Membership is open to all stakeholders, including nonprofit homeless assistance providers, victim service providers, faith-based organizations, government entities, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, higher education institutions, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals;
- b. The Racine CoC shall issue a public invitation at least annually for any interested person to become a member of the CoC. The invitation will be sent to relevant organizations,

- posted on the Racine CoC website and Facebook page, and be published in the Racine Journal Times; and
- c. New members may join at any time during the year.

## **5.2. Responsibilities of Members**

The Board, with input from membership, shall conduct the business of the Racine CoC except:

- a. This Governance Charter and any changes to it must be voted on by the entire membership;
- b. At a minimum, the Governance Charter will be reviewed by the entire membership every five (5) years following initial approval; and
- c. The entire membership must vote on the Board and Officers except where there is an appointment by the Board of a director to complete a term when there is vacancy.

## **5.3. Membership Meetings**

- a. The full membership shall meet at least quarterly. The meetings shall include a report on the CoC's activities, funding, and progress toward goals.
- b. The last meeting of the year shall be designated as the Annual Meeting. The Annual Meeting may be delayed once by up to a 90 day period by a majority vote of the membership. The agenda for the Annual Meeting will include:
- c. Election of Board Members to fill expiring terms;
- d. A review of any proposed changes to this Governance Charter followed by a vote on any changes;
- e. Any other business the Board chooses to put before its members; and
- f. Any other business the members bring to the attention of the membership.

## **5.4. Notice of Meeting**

Notice of the place, date and time of each General Meeting, including the Annual Meeting, shall be sent to members on the CoC listserv – currently Wiggio – and posted on the Racine CoC website at least 48 hours before the meeting date, along with the proposed agenda for the meeting.

## **5.5. Quorum and Voting**

The members present at any General Meeting, including the Annual Meeting, that complies with the notice requirement set forth in section 5.4 shall constitute a quorum. A majority of the members present is required to pass any issue before it that requires a vote.

## **6. Board**

The Racine CoC shall be governed by a Board, which will provide oversight and accountability for all Racine CoC responsibilities.

### **6.1. Responsibilities of the Board**

Except for those responsibilities assigned to the Racine CoC members in paragraph 5.2 above, the Board will act on behalf of the Racine CoC to fulfill the regulatory duties of a Continuum of Care set forth in 24CFR§578. The Board shall be responsible for approval and implementation of all CoC policies and procedures.

### **6.2. Board Membership**

#### **6.2.1. Composition**

- a. The Board will consist of an odd number of Directors totaling no less than 15 and no more than 31.



- b. The Board must be representative of the stakeholder organizations identified in paragraph 5.1 and must include a representative of the CoC Collaborative Applicant and the HMIS Lead, as well as representatives of each of the following four groups: 1) Government and Quasi-Government; 2) Nonprofit Homeless Service Providers; 3) Consumers and Advocates; and 4) Community Stakeholders.
- c. The Board must, at all times, include at least one homeless or formerly homeless individual. A Board member may represent more than one required area.
- d. Examples of each of the four Categories are provided below.
  - Government Representatives
    - City of Racine
    - County of Racine
    - State of Wisconsin
    - Federal Government Agencies
  - Nonprofit Homeless Assistance Providers
    - Youth services provider
    - Emergency Solutions Grant (ESG) provider
    - AIDS/HIV services provider
    - Veterans services provider
    - Domestic Violence services provider
  - Consumers and Advocates
    - Homeless/formerly homeless person
    - Health Care Network or Community Health Centers
    - Community advocacy groups
    - Community Action Agency
    - Legal Services Provider
  - Community Stakeholders
    - Hospitals, clinics and medical providers
    - Banks and Credit Unions
    - Universities, colleges and extension offices
    - Businesses

### **6.2.2. Term of Office**

- a. Directors will serve staggered terms of three years so that approximately one-third of Directors will stand for election each year at the Annual Meeting;
- b. In the first year, newly-elected Directors will draw lots to determine the length of their term—one, two, or three years;
- c. A Director may serve a maximum of 11 consecutive years, but is eligible for additional periods totaling 11 consecutive years after a continuous 12 month absence from the Board;
- d. If the Annual Meeting is delayed pursuant to Section 5.3, the term will be extended for a corresponding period of time; and
- e. A new term of office under these circumstances shall be deemed to have begun as of the date had the meeting not been delayed.
- f. A person representing the CoC Collaborative Applicant or HMIS Lead may serve without limit.

### **6.2.3. Nomination and Voting**

Each year the Board will solicit recommendations from CoC members and present a slate of candidates for Membership approval. The Membership will vote for open Board positions at the Annual Meeting.

### **6.2.4. Resignation and Removal**

- a. Any Director may resign at any time by giving written notice to the President or Chair; and

- b. Directors may be removed from the Board by a majority vote of remaining Board members for repeated absence, misconduct, failure to participate, or violation of conflict of interest.

#### **6.2.5. Vacancies**

When a Director resigns or is removed from the Board or cannot serve his/her full term for any reason, the Board may appoint another Racine CoC member to fill the unexpired term.

### **6.3. Officers and Terms**

#### **6.3.1. Officers**

The officers of the Racine CoC shall be a President or Chair, Vice-President or Vice Chair, Secretary and Treasurer.

#### **6.3.2. Election and Term**

- a. The officers shall be elected by the Racine CoC Members annually, at the Annual Meeting;
- b. Each officer shall hold office until the last day of the month of the next Annual Meeting;
- c. A Term shall begin on the 1<sup>st</sup> day of the month following the Annual Meeting; and
- d. No person may hold more than one office.

#### **6.3.3. President or Chair and Vice President or Vice Chair**

- a. The President or Chair is responsible for scheduling meetings of the Racine CoC, ensuring that the Racine CoC meets regularly or as needed, and for setting the agenda for meetings in collaboration with the Steering Committee; and
- b. In the absence of the President or Chair, the Vice President or Vice Chair assume the duties of the President or Chair.

#### **6.3.4. Secretary**

- a. The Secretary shall keep accurate records of the proceedings of all meetings of the CoC Board and General Meetings, including the Annual Meeting, or shall designate another person to do so at each meeting, including documenting all actions taken without a meeting;
- b. Such records will include the names of those in attendance;
- c. The Secretary shall give all notices required by law, the CoC regulations and this Governance Charter.
- d. The Secretary shall perform such other duties as the Racine CoC may designate, and shall chair Racine CoC meetings in the case of the absence of the President or Chair and Vice President or Vice Chair.

#### **6.3.5. Resignation of Officers**

- a. Any officer may resign at any time by giving written notice to the President or Chair or the Secretary; and
- b. Any resignation shall take effect at the time specified within the written notice or if the time is not specified upon its acceptance by the Racine CoC.

#### **6.3.6. Officer Vacancies**

Vacancies among the officers may be filled for the remainder of the term by a vote of the majority of the Directors at any meeting at which a quorum is present.

## **7. Rules of Governance for the Board**

### **7.1. Quorum and Voting**

- a. A number equal to a majority of the Board shall constitute a quorum for the transaction of business at any meeting;
- b. At all meetings, business items may be decided by arriving at a consensus;
- c. If a vote is necessary, all votes shall be by voice or ballot at the will of the majority of those in attendance at a meeting with a quorum represented;
- d. Each representative seat shall have one vote and
- e. No member may vote on any item which presents a conflict of interest.

### **7.2. Proxies**

- a. Directors may have non-voting non-director proxies attend meetings in their place, and the individual appearing as proxy will not be counted for purposes of determining a quorum;
- b. Directors may give voting proxies to another Director;
- c. The proxy must be in writing and must include the date of the meeting the proxy is intended to cover, the name of the Board member to be given the voting proxy and must be signed and dated by the Board member giving the proxy; and
- d. A Director may only vote one proxy in addition to their own vote.

### **7.3. Action without a Meeting**

Any action that may be taken at any meeting of the Racine CoC Board may be taken without a meeting if that action is approved, in writing (e.g. letter, email) by a majority of Racine CoC Directors who would be entitled to vote if a meeting was held for such purpose.

## **8. Committees and Working Groups**

- a. The Racine CoC will carry out its responsibilities through the work of a number of Committees and Working Groups;
- b. All CoC Members may participate on Committees and Working Groups, with the exception of the Steering Committee, which must be made up of members of the Board of Directors; and
- c. Policies and policy decisions made by Committees and Working Groups must be approved by the Board before taking effect.

### **8.1. Standing Committees**

The Racine CoC shall have four standing committees:

#### **8.1.1. Steering Committee**

- a. The Steering Committee shall set agendas for Board meetings and shall carry out the work of the Racine CoC between Board Meetings;
- b. The Committee shall be made up of the representative of the Collaborative Applicant, the Board President or Chair, the Board Vice President or Vice Chair, the Board Secretary, the Board Treasurer and up to three additional members of Board; and
- c. A homeless or formerly homeless person must be included as a member of the Steering Committee.

#### **8.1.2. Performance and Outcome Evaluation Committee**

The Performance and Outcome Evaluation Committee shall include a minimum of 3 Board members, 3 ESG sub-recipients, 3 CoC recipients and shall:

- a. Review PIT and HIC data, conduct a gaps analysis, and make recommendations for Board approval as to the priorities to be used in ranking requests for CoC funding;
- b. Establish performance targets appropriate for population and program type in consultation with recipients and sub-recipients, monitor recipient and sub-recipient performance, evaluate outcomes, and recommend to the Board action to be taken for sub-standard performance;
- c. Develop performance measures to evaluate progress and success in the elimination and prevention of homelessness, using guidance available from HUD, USICH and other resources, and making changes necessary to incorporate new regulations or guidance;
- d. Establish written standards and performance measures for ESG assistance and providers;
- e. Evaluate outcomes of projects funded under the ESG and CoC Program, and provide outcome data to be reported to HUD; and
- f. Consult with state and local government agencies, homeless service providers, private funders, and other relevant entities and organizations to evaluate available resources and reach a consensus as to the most effective allocation and implementation to eliminate homelessness.

#### **8.1.3. CoC Resource Development Committee**

The CoC Resource Development Committee shall include a minimum of 3 Board members in addition to other CoC members, and shall

- a. Oversee the collaborative process, along with the Collaborative Applicant, for developing a collaborative application for CoC program funding;
- b. Oversee the collaborative process, along with the City of Racine and State of Wisconsin for a collaborative application for ESG program funding;
- c. Identify other funding, technical assistance, resources and opportunities for the Racine CoC;
- d. Identify, develop and implement training and professional opportunities for Racine CoC agency staff and the Racine community;
- e. Review findings of the Performance and Outcomes Committee, program priorities established by the Board and HUD, and the applications for new programs or projects, and make recommendations to the Board as to which programs/projects to include in the CoC and other collaborative applications, including a ranking process;
- f. Develop and oversee an appeal process for applications that are not selected for collaborative funding opportunities.

#### **8.1.4. HMIS/Data Committee**

The HMIS Committee shall include the Racine CoC representative serving on the statewide HMIS Advisory Board unless there is none and a representative from the HMIS Lead Agency, and shall

- a. Review annually the statewide HMIS Policies and Procedures and Governance Agreement, and shall make recommendations to the statewide HMIS Advisory Board regarding the privacy and security provisions, and the data quality plan for the HMIS, as well as any other HMIS policies and procedures required by HUD;
- b. Recommend additional policies and procedures within the Racine CoC;
- c. Recommend and implement a plan for monitoring the HMIS to ensure that:
  - 1. Recipients and sub-recipients participate in HMIS;
  - 2. Agencies are complying with regulations and notices issued by HUD;
  - 3. The HMIS Lead is fulfilling the obligations of the HMIS Governance Charter and Agreement with the Racine CoC;
- d. Oversee and monitor HMIS data collection and reports including:

1. Monthly sheltered point-in-time count;
  2. Housing Inventory Chart;
  3. Annual Homeless Assessment Report (AHAR);
  4. Annual Performance Reports (APRs);
  5. Point in Time (PIT) Data; and
- e. Oversee a Point in Time Planning Sub-Committee which shall :
1. Plan the Point in Time in January and July;
  2. Provide required forms and training;
  3. Compile data;
  4. Prepare reports; and
  5. Perform other functions necessary to obtain an accurate Point in Time count.

#### **8.1.5 Coordinated Assessment and Prioritization Committee**

The Coordinated Assessment and Prioritization Committee shall include a representative of the HMIS Lead Agency, the Collaborative Applicant, either the City of Racine or State of Wisconsin ESG recipient, HMIS/Data Committee in addition to other Racine CoC members, and shall be responsible for the

- a. Development, implementation and oversight of the Racine CoC coordinated assessment and prioritization system;
- b. Evaluation of the coordinated assessment and prioritization system;
- c. Ensure that those persons with the greatest need and barriers within the CoC receive priority to access housing;
- d. Ensure that CoC agency staff are trained in the administration of the VI-SPDAT and are utilizing it as determined by the Racine CoC for coordinated assessment and prioritization;
- e. Shall identify, evaluate and recommend policies and procedures for street outreach, shelter, transitional housing, rapid re-housing and permanent supportive housing that will result in shorter shelter stays, rapid access to housing and stabilization once in that housing;
- f. Ensure that HUD and USICH policies and procedures, including Housing First, are being followed within the Racine CoC;
- g. Develop and coordinate best practices for diversion and prevention within the Racine CoC; and
- h. Report any deficiencies of the system or agency staff within the Racine CoC to the Board.

#### **8.1.6 Other Committees and Working Groups**

The Racine CoC may establish committees or working groups as it deems necessary.

### **9. Appointment of Collaborative Applicant and Designation of HMIS**

#### **9.1. Collaborative Applicant**

Legal Action of Wisconsin, Inc. is designated as the Collaborative Applicant for the Racine CoC and is authorized to submit the CoC application.

#### **9.2. HMIS Lead**

The Institute for Community Alliances is designated as the HMIS Lead for the Racine CoC.

#### **9.3. HMIS Designation**

Wisconsin Service Point, Bowman Systems, is the designated HMIS for the Racine CoC.

#### **9.4. HMIS Governance Charter**

The Racine CoC is a signatory on the statewide HMIS Governance Charter that covers the four (4) HUD recognized continua in the State of Wisconsin and the Institute for Community

Alliances. The President or Chair is authorized to execute the document on behalf of the Racine CoC.

## **10. Code of Conduct and Conflicts of Interest**

### **10.1. Conduct and Attendance**

- a. Officers, Board members, committee members and other persons given the authority to act on behalf of the Racine CoC must exercise care, diligence and prudence when acting on behalf of the Racine CoC;
- b. These individuals must timely and competently complete work they have agreed to undertake on behalf of the Racine CoC; and
- c. They must regularly attend Board and committee meetings and be prepared to discuss matters and make decisions.

### **10.2. Conflict of Interest**

#### **10.2.1. Rules Regarding Conflict**

- a. Officers, Directors, committee members and other persons may not participate in or influence discussions concerning the award of a grant, other funds, or decisions that will benefit any organization that they or an immediate family member represents or is affiliated with, or any organization from which they or a member of their immediate family will receive a benefit, whether financial or otherwise;
- b. When one is aware of a financial interest or any other personal interest in a matter coming before the Board, a committee, or general membership they must fully disclose the nature of the interest and potential conflict; and withdraw from discussing and voting on the matter.

#### **10.2.2. Disclosure**

If a Board member or other member believes there is an item on the agenda of a meeting they are attending that may be a conflict of interest, it should be disclosed immediately.

#### **10.2.3. Abstention from Decision-Making.**

The meeting minutes shall reflect the disclosed potential or actual conflict and that the individual abstained from voting.

#### **10.2.4. Annual Conflict of Interest Acknowledgement Form**

A Conflict of Interest form shall be completed and signed annually by any Board or committee member or other person if they will be given the authority to make decisions on behalf of the Racine CoC.

#### **10.2.5. Conflict Of Interest – CoC Application and Other Funding Application Decisions**

An ad hoc committee will be convened each year for the purpose of making final CoC application ranking and funding decisions.

- a. Members serving on the committee shall not be affiliated with an organization that is a current recipient of CoC funding or an applicant for CoC funding;
- b. Having an immediate family member affiliated with such an organization would also disqualify one from serving on the committee; and
- c. A person would also be disqualified from serving on the committee if there were circumstances that would interfere with the ability to be an objective, fair and impartial committee member.

## **11. Approval of Governance Charter and Subsequent Amendments**

- a. This Governance Charter and any amendment to it must be approved by a majority of the Racine CoC;
- b. The Board will review the Governance Charter annually and recommend changes that are necessary to comply with CoC and other regulations and law, as well as those that would assist in the efficient operation of the organization and meeting goals;
- c. Input from members will also be solicited; and
- d. No less than every five (5) years a special committee shall be convened composed of any interested CoC members and the Board to thoroughly review and discuss the Governance Charter, and recommend changes to the Racine CoC membership.



The Continuum of Care  
For the City and County of Racine, U.A.

## RE-ALLOCATION PROCEDURE

Re-allocation includes reduction. A project may voluntarily agree to full re-allocation or a partial (reduction) re-allocation of its funds. Likewise, the CoC may require a project to fully re-allocate or reduce funds.

1. Voluntary Re-allocation: CoC members may make voluntary re-allocations for the following purposes:
  - a. Any project may voluntarily re-allocate all or a portion of funds to be used for a new PSH, RRH, SSO-Coordinated Assessment or HMIS project. The NOFA should be reviewed to determine the requirements for each of these projects. Only ICA is eligible to apply for a HMIS project. Re-allocation of partial funding cannot result in decreased quality of services. The project must be able to operate at an adequate level.
2. Involuntary Re-allocation: The CoC may require a project to re-allocate, or surrender its funding, based on the following:
  - a. Overall performance plus additional criteria such as number of persons served, spending, timeliness implementing the project, year round CoC timeliness, quarterly APR results. A project receiving a score of less than 50% will be required to re-allocate.
  - b. Upon notification that re-allocation will be required, the project may agree to voluntarily re-allocate and will fall under #1 of the procedure.
  - c. A project that does not agree to voluntarily re-allocate under these circumstances will have its funding taken away and new projects will be proposed.
  - d. The CoC will select projects based on pre-determined criteria to apply for the funds. The selected project(s) will be placed in Tier 2 and will be ranked based on their selection scores.
3. Project Submission Deadlines
  - a. All projects must be submitted for initial review no later than August 14, 2015 @ 5 pm.
  - b. All projects will be notified no later than August 31, 2016 of acceptance or rejection.



## COORDINATED ENTRY PRIORITIZATION - Chronically Homeless PSH and Chronically Homeless

### COORDINATED ENTRY: PRIORITIZATION POLICY

The Racine Continuum of Care for the City and County of Racine revises the current prioritization policy to conform with HUD Notice CPD 16-11 effective September 1, 2016.

#### COORDINATED ENTRY

All projects receiving CoC or ESG funds are required to comply with this policy. The prioritization list is compiled and maintained in Wisconsin Service Point (WISP). A non-WISP prioritization list will be maintained for survivors of domestic violence that will be coordinated with the WISP prioritization list when there is a housing opening.

1. Available units/beds must be reported to the CoC within 48 hours of availability.
2. Chronically homeless will be prioritized using the VI-SPDAT to measure severity of service needs and the longest history of homelessness.
3. Units/beds dedicated for chronically homeless will only be referred chronically homeless households with documentation of a disabling condition and length of homelessness meeting the chronically homeless definition.
4. Non-dedicated PSH units/beds must be used to prioritize the chronically homeless.
5. If a PSH unit is not available, but RRH units are available, the RRH unit should be utilized to house a chronically homeless household pending an available PSH unit.
6. Housing openings must be reported to the CoC within 48 hours.

#### ORDER of PRIORITY

1. All PSH units/beds not dedicated for the chronically homeless shall be prioritized for the chronically homeless.
2. Current project grant agreements will be followed regarding subpopulations.
3. If there are no chronically homeless households eligible for the program, based only on criteria in the current grant agreement, a referral shall be made using the following order of priority designated by HUD Notice CPD -16-11.
  - a. Household has documented homelessness on the streets, shelter or a safehaven for at least 12 months but less than 4 occasions with severe service needs.
  - b. Household has documented homelessness on the streets, shelter or a safehaven for less than 12 months total with severe service needs (by longest length of time homeless).
  - c. Household on streets, in shelter, or in a safehaven without severe service needs (by longest length of time homeless).
  - d. Households coming from transitional housing based on length of time homelessness and severity of service needs.

#### ADDITIONAL POLICY

1. If a non-chronic household is referred to a PSH project, documentation must be maintained in the household case file that there were no chronically homeless households at the time or that there were chronically homeless households but they did not meet the subpopulation designation in the contract between HUD and the project.
2. Projects cannot impose eligibility requirements beyond those specified in the HUD contract, and cannot impose barriers that would deny access to housing.
3. Projects cannot discriminate or otherwise violate Fair Housing, Americans with Disabilities Act, Civil Rights, Section 504 of the Rehabilitation Act, or other applicable Federal, State or local laws.

Priority	Disabling Condition	Current Residence	Total Length of Time Homeless	Severe Service Needs	Episodes Homeless
1	Disabling Condition	Living in a place not meant for habitation, safe haven, or emergency shelter	12 months or more	Severe Service Needs	Less than 4 episodes
2	Disabling Condition	Living in a place not meant for habitation, safe haven, or emergency shelter	--	Severe Service Needs	--
3	Disabling Condition	Living in a place not meant for habitation, safe haven, or emergency shelter	--	Severe Service Needs	--
4	Disabling Condition	Transitional Housing (prior residence was street, ES or SH). Includes those in TH who were fleeing DV prior.	--	--	--

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## **Governance Charter for the Wisconsin Homeless Management Information System**

City of Madison/Dane County CoC  
Milwaukee City/County CoC  
Racine City/County CoC  
Wisconsin Balance of State CoC  
Institute for Community Alliances

### **A. Purpose and Scope**

The purpose of this Governance Charter is to confirm agreements between the four Wisconsin Continua of Care – Balance of State, Dane, Milwaukee and Racine – and the Institute for Community Alliances (hereinafter HMIS Lead Agency) in connection with the shared governance of the Wisconsin Homeless Management Information System (hereinafter HMIS). As such, the Governance Charter sets forth the general understandings, and specific responsibilities of each party relating to key aspects of the governance and operation of the Wisconsin Homeless Management Information System. This Governance Charter is effective upon execution by the Institute for Community Alliances, Wisconsin Balance of State, Dane, Milwaukee, and Racine Continua of Care.

### **B. Background**

The Wisconsin HMIS is a collaborative project of the four Wisconsin Continua of Care (CoC) – Balance of State, City of Madison/Dane County, Milwaukee City/County, and Racine City/County – the HMIS Lead Agency, and participating Partner Agencies. HMIS is an internet-based data collection application designed to capture information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness over time. Use of HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care, Emergency Solutions Grant, and Housing for Persons with AIDS funds, and by the U.S. Department of Veterans Affairs for agencies receiving Supportive Services for Veteran Families and Grant Per Diem funds.

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

collaborating to end homelessness and successfully implementing and operating HMIS in the State of Wisconsin.

## **C. General Understandings**

### 1. Continuum of Care Governance

The four Wisconsin Continua of Care are responsible for shared governance of the Wisconsin HMIS. The CoCs are the lead-planning groups for efforts to end homelessness and for implementing and operating homeless service delivery systems in the State of Wisconsin. As such and under HUD policy (24 CFR part 580), the CoCs are responsible for HMIS oversight and implementation, including planning, software selection, HMIS Lead Agency designation and setting up and managing the HMIS in compliance with HUD's national HMIS Standards. The CoC's oversight and governance responsibilities are carried out by the HMIS Advisory Board (described below), which reviews and approves all HMIS policies and procedures.

### 2. HMIS Lead Agency Designation

Collectively, the Wisconsin CoCs designate the HMIS Lead Agency to manage HMIS operations on its behalf, and to provide HMIS administrative functions at the direction of the CoCs through the HMIS Advisory Board.

### 3. Homeless Management Information System Advisory Board

The CoC members and HMIS Partner Agencies actively participate with the HMIS Lead Agency through the HMIS Advisory Board in the management of the HMIS. The HMIS Advisory Board is responsible for establishing policies, procedures, and protocols for functions essential to the viability and success of the HMIS, including, but not limited to, data privacy, data quality, analysis, reporting, data sharing protocols. All Wisconsin CoCs will be represented on the HMIS Advisory Board to ensure shared governance. Representation will also take into account HMIS user diversity by considering the following attributes: HMIS user level; geographic location of the agency where the Board member is employed; population density of the location of the Board member's agency; size or client volume of the Board member's agency or program; type of service or program provided by the Board member's agency; and the special interest or demographic served by the Board member's agency.

#### *3.1 Advisory Board Requirements*

- a. Meetings - Advisory Board meetings will be held quarterly. Important HMIS policy items that emerge in between meetings will be handled by the Board via email, conference call, or an online meeting.
- b. Attendance - Advisory Board members are required to attend all meetings. Members who are absent from two consecutive meetings will be asked to resign from the Advisory Board, unless a majority of the Advisory Board members determine there are extenuating circumstances. If the member does not resign within 30 days after being requested to do so by the Advisory Board, a majority of the Advisory Board may vote to remove the member. A majority of the Advisory Board is one half plus one of the members present at the meeting when the vote is taking place.
- c. Accessibility - Board members will be publicly identified and available for contact by HMIS users and agencies throughout the state.

- d. Policies and Procedures - Approval of policy, procedures and HMIS protocols will be attempted through consensus and conversation, but will ultimately be decided by simple majority.
- e. Member Agreements - All members of the Advisory Board must sign Member Agreements. The agreements list the responsibilities of the Advisory Board members and describe the membership term.
- f. Length of Member Term - Advisory Board members serve two-year terms on the Wisconsin HMIS Advisory Board. Membership may be renewed for additional terms upon agreement by HMIS Lead Agency, the Advisory Board and the member seeking reappointment.
- g. Voluntary Board Membership – Advisory Board members are volunteers and are not compensated for their participation. Advisory Board members may receive reimbursement for costs incurred while attending Advisory Board meetings.

#### 4. Funding

Funding for the software and operations of the Wisconsin HMIS shall be provided by the four Wisconsin CoCs, through a HUD Continuum of Care program HMIS grant, or other funding from the CoC. Funding shall also be provided from agencies operating programs federally required to enter data into HMIS. Partner Agencies may be required to pay user fees for the HMIS software and reporting licenses assigned to their agency. In the event there is a shortfall in funding for the software or operation of the HMIS, the HMIS Advisory Board will explore options to increase revenue.

#### 5. Software and Hosting

The CoCs have selected a single software product to serve as the sole HMIS software application in Wisconsin. All Partner Agencies agree to use the product as configured for the Wisconsin HMIS.

#### 6. Compliance with Homeless Management Information System Standards

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

#### 7. Operational Policies and Agreements

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

#### 8. Data Ownership

The data entered into the Wisconsin HMIS is owned by the Partner Agency responsible for entering the client-level information. The HMIS Lead Agency and Partner Agencies are jointly responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission and destruction of data, comply with the HMIS privacy, security and confidentiality policies

and procedures. The Partner Agencies have the final authority to approve or disapprove the use of the data that is contained in the Wisconsin HMIS.

#### **D. Specific Responsibilities of the Parties**

##### 1. Dane, Milwaukee, Racine and Wisconsin Balance of State Continua of Care

The four Wisconsin Continua of Care – Balance of State, Dane, Milwaukee and Racine - serve as the HMIS governance body, providing oversight, project direction, policy setting, and guidance for the HMIS project. It is the responsibility of the CoCs to:

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

##### 2. HMIS Advisory Board

The Wisconsin HMIS operates under a model of shared governance of the four Wisconsin Continua of Care. The CoCs exercise the following responsibilities for HMIS governance through the HMIS Advisory Board.

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

### 3. Wisconsin HMIS Lead Agency

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

#### *I. General*

- a. Obtain and maintain the contract with the selected software vendor.
- b. Determine the parameters of the HMIS as it relates to continuity of service, ability to limit access to the data, hosting responsibilities, general security and maintenance issues, data storage, back-up and recovery, customization, compliance with HUD Data standards, reporting needs, training and technical support.
- c. Provide overall staffing for the operation of the HMIS.
- d. Develop and maintain all HMIS operational agreements, policies and procedures, including a written privacy notice.
- e. Obtain signed Partner Agency Agreements and User Agreements.
- f. Invoice Partner Agencies and jurisdictions for HMIS fees approved by the HMIS Advisory Board.
- g. Monitor Partner Agencies and users to ensure compliance with HMIS operational agreements, policies and procedures on behalf of, and at the direction of, the HMIS Advisory Board.
- h. Convene a minimum of four meetings of the HMIS Advisory Board annually.
- i. Participate as a voting or non-voting member of the four Wisconsin CoC's Board of Directors or equivalent decision making body.
- j. Attend the HMIS or Data Committee meetings of the four Wisconsin Continua.
- k. Provide and maintain the HMIS website.
- l. Comply with federal HMIS Standards (including anticipated changes to the HMIS Standards) and all other applicable laws.
- m. Apply as the project applicant for all HUD CoC Program HMIS Projects within Wisconsin.
- n. Serve as the liaison with HUD regarding HUD HMIS grants.

#### *II. Administer the software, including:*

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

#### *III. Administer HMIS end users, including:*

- a. Provide and manage end user licenses, including authorizing usage and the level of access to HMIS for all users.

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

#### *IV. Ensure Data Quality*

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

#### *V. Reporting*

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

#### *VI. Satisfactory Assurances Regarding Confidentiality and Security:*

It is understood that the HMIS will contain client information that may be subject to the privacy and security protections and requirements of federal HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. The HMIS Lead Agency hereby agrees that it will use protected client information only for purposes permitted by agreement with Partner Agencies and



as permitted by the applicable law and Standards. Further, the HMIS Lead Agency agrees it will make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

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

#### 4. Software Vendor

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

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

### **E. Period of Agreement and Modification/Termination**

#### 1. Period of Operation and Termination

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

#### 2. Amendments

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

The signatures of the parties indicate their agreement with the terms and conditions set forth in this document.

**Madison/Dane Continuum of Care:**

DocuSigned by:  
Torrie Kopp Mueller 8/10/2016  
00000203001400...  
Torrie Kopp Mueller, President  
Madison/Dane CoC Board of Directors

**Wisconsin Balance of State Continuum of Care:**

DocuSigned by:  
Robyn Thibado 8/4/2016  
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Robyn Thibado, President  
Balance of State CoC Board of Directors

**Milwaukee City/County Continuum of Care:**

DocuSigned by:  
John Stibal 8/10/2016  
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John Stibal, Chair  
Milwaukee CoC Executive Board

**Institute for Community Alliances:**

DocuSigned by:  
David Eberbach 8/4/2016  
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David Eberbach, Executive Director

**Racine City/County Continuum of Care:**

DocuSigned by:  
Ron Thomas 8/15/2016  
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Ron Thomas, President  
Continuum of Care for the City and County of  
Racine, U.A.

# Wisconsin Statewide

## Homeless Management Information System

### Policies and Procedures

Institute for Community Alliances

2016

# Contents

1. Introduction .....	4
1.1 HMIS BENEFITS .....	4
2. Requirements for Participation .....	6
2.1 RESPONSIBILITIES OF HMIS USERS.....	6
2.2 PARTNER AGENCY REQUIREMENTS.....	6
2.4 USER TRAINING REQUIREMENTS .....	8
2.5 HMIS USER LEVELS .....	9
2.6 HMIS VENDOR REQUIREMENTS .....	11
2.7 MINIMUM TECHNICAL STANDARDS .....	12
2.8 HMIS LICENSE FEES .....	12
Table 1: Example HMIS License Fees.....	13
2.9 HMIS OPERATING POLICIES VIOLATION .....	13
3. Privacy and Security .....	15
3.1 DATA ASSESSMENT AND ACCESS.....	15
3.2 DATA REPORTING PARAMETERS AND GUIDELINES .....	16
3.3 RELEASE OF DATA FOR GRANT FUNDERS .....	17
3.4 BASELINE PRIVACY POLICY .....	17
3.5 USE OF A COMPARABLE DATABASE BY VICTIM SERVICE PROVIDERS.....	20
3.6 USER CONFLICT OF INTEREST .....	21
3.7 SECURITY PROCEDURE TRAINING FOR USERS.....	21
3.8 VIOLATION OF SECURITY PROCEDURES .....	21
3.9 PROCEDURE FOR REPORTING SECURITY INCIDENTS .....	21
3.10 DISASTER RECOVERY PLAN.....	22
4. Data Requirements.....	24
4.1 MINIMUM DATA COLLECTION STANDARD.....	24
4.2 PROVIDER NAMING CONVENTION .....	24
4.3 DATA QUALITY PLAN .....	24
4.4 XML IMPORTS .....	24
4.5 HMIS DATA PROTECTION.....	25
5. Glossary .....	26
6. Appendices .....	28

6.1 USER MANUALS ..... 28  
6.2 DATA DICTIONARY AND DATA MANUAL ..... 28

# 1. Introduction

The Wisconsin Homeless Management Information System (HMIS) is a collaborative project of the four Wisconsin Continua of Care (CoC) – Balance of State, Dane, Milwaukee, and Racine – the Institute for Community Alliances (ICA), and participating Partner Agencies. HMIS is an internet-based database that is used by homeless service organizations across Wisconsin to record and store client-level information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness. Bowman Internet Systems administers the central server and HMIS software, and ICA administers user and agency licensing, training and compliance.

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

Guidance for the implementation of Wisconsin's HMIS is provided by a broad-based advisory board that is committed to understanding the gaps in services to consumers of the human service delivery system in an attempt to end homelessness.

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

## 1.1 HMIS BENEFITS

Use of HMIS provides numerous benefits for service providers, homeless persons and the State of Wisconsin.

Benefits for service providers

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

- Better able to evaluate the effectiveness of specific interventions and programs, and services provided.

#### Benefits for homeless persons

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

## 2. Requirements for Participation

### 2.1 RESPONSIBILITIES OF HMIS USERS

#### Agency Administrators

1. Edit and update agency information in HMIS.
2. Ensure that the participating agency obtains a unique user license for each user at the agency.
3. Establish the standard report for each specific program created.
4. Maintain a minimum standard of data quality by ensuring the Universal Data Elements are complete and accurate for every individual served by the agency and entered into HMIS.
5. Maintain the required universal data elements and program specific data elements for each program in accordance with the 2014 HMIS Data Standards, and maintain data elements required by the HMIS Advisory Board and/or the CoC in which the program operates.
6. Ensure agency staff persons receive required HMIS training, and review the Wisconsin HMIS Policies and Procedures, the Agency Partnership Agreement and any agency policies which impact the security and integrity of client information.
7. Ensure that HMIS access is granted only to staff members that have received training, have completed the Wisconsin User Agreement and are authorized to use HMIS.
8. Notify all users at their agency of interruptions in service.
9. Provide a single point of communication between users and HMIS staff at the Institute for Community Alliances.
10. Administer and monitor data security policies and standards, including:
  - User access control;
  - The backup and recovery of data; and
  - Detecting and responding to violations of the policies and procedures or agency procedures.

#### Users

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

### 2.2 PARTNER AGENCY REQUIREMENTS



### Participation Agreement Documents

Partner Agencies must complete the following documents:

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

### User Access to the System

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

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

### User Requirements

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

### Users who are also Clients Listed in HMIS

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

### Passwords

- **Creation:** Passwords are automatically generated from the system when a user is created. The Agency Administrator will communicate the system-generated password to the user.
- **Use:** The user will be required to change the password the first time they log onto the system. The password must be at least 8 characters and alphanumeric. Passwords should not be able to be easily guessed or found in a dictionary. Passwords are the individual's responsibility and users cannot share passwords. Users may not keep written copies of their password in a publicly accessible location.

- Storage: Any passwords that are written down are to be stored securely and must be inaccessible to other persons. Users are not to store passwords on a personal computer for easier log on.
- Expiration: Passwords expire every 45 days. Users may not use the same password consecutively. Passwords cannot be re-used until 2 password selections have expired.
- Unsuccessful logon: If a user unsuccessfully attempts to log-on 3 times, the User ID will be “locked out,” and access permission will be revoked rendering the user unable to gain access until his/her password is reset.

### Inputting Data

Agencies participating in the HMIS must meet the minimum data entry requirements established under the 2014 HMIS Data Standards.

### Tracking of Unauthorized Access

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

### Agency Administrator

Agencies with 10 or more users must designate one person to be the Agency Administrator. Agencies with fewer than 10 users may forego designating an Agency Administrator. ICA HMIS staff will perform Agency Administrator responsibilities for these agencies.

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

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

### Client Release of Information (ROI)

In addition to posting the HMIS Consumer Notice, agencies must obtain client consent prior to sharing client data with other agencies when data sharing is appropriate for client service delivery. Agencies are required to ensure clients know what data are being collected about them, and be given the opportunity to make choices about what personal and program related information is shared in HMIS and with whom that data is shared. Agencies may use the [Client Release of Information](#) form on the ICA website, or use their own form that includes language commensurate with the ICA ROI. The form requires clients to authorize the electronic sharing of their personal information, and allows for clients to have more control over their own information. Agencies are required to obtain client consent at each level listed on the form. Clients have the right to refuse any level of shared data.

### Data Protocols

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

## 2.4 USER TRAINING REQUIREMENTS

### New User Training Requirements

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

Once a new user begins the HMIS new user training series, the user has 15 days to complete the training series and all required assignments. ICA staff will review the user's homework and determine if corrections are needed. Users will have an additional 15 days to make all corrections. If the user fails to complete all requirements within 30 days, the user will need to retake the training series. ICA staff may determine that a new user failed to grasp the necessary data entry concepts based on the quality of the user's homework. ICA staff may use their discretion to require new users to repeat new user training. If a new user fails to successfully complete the homework requirements for data entry after repeated attempts, ICA staff may use their discretion to determine that the new user is not capable of accurate and complete data entry, and may refuse to issue the new user a Wisconsin HMIS user license.

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

If a user requesting a new user license had a license for the Wisconsin HMIS in the past, the user will be required to re-take the training series, with few exceptions. ICA has sole discretion to waive the requirement to attend new user training. ICA will consider the user's familiarity with the HMIS and the need for the user to learn about potential system updates and changes during new user training when making its decision to waive the new user training requirement.

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

### Ongoing User Training Requirements

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

All users are required to attend at least two general HMIS trainings annually. The new user training series will count as one training toward the general training requirement. New users taking the new user training series in December will be except from completing an additional training during that calendar year.

All users with licenses for the reporting platform embedded in HMIS are required to attend at least two reporting trainings annually in addition to the required general HMIS trainings.

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

## 2.5 HMIS USER LEVELS

HMIS user roles are listed on the ICA website. [HMIS User Roles](#)

### Resource Specialist I

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

#### Resource Specialist II

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

#### Resource Specialist III

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

#### Volunteer

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

#### Agency Staff

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

#### Case Manager I

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

#### Case Manager II

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

#### Case Manager III

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

#### Agency Administrator

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

### Executive Director

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

### System Operator

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

### System Administrator I

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

### System Administrator II

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

## 2.6 HMIS VENDOR REQUIREMENTS

### Physical Security

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

### Firewall Protection

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

### User Authentication

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

### Application Security

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

### Database Security

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

### Technical Support

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

### Technical Performance

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

#### Hardware Disposal

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

## 2.7 MINIMUM TECHNICAL STANDARDS

#### Minimum Computer Requirements

- A PC with a 2 Gigahertz or higher processor, 40GB hard drive, 512 MB RAM, and Microsoft Windows 7 or 8
- The most recent version of Google Chrome, Safari or Firefox. No additional plug-in is required.  
It is recommended that your browser have a 128 cipher / encryption strength installed. The browser's cache should be set to "Check for new version of the stored pages: Every visit to page."
- A broadband Internet connection or LAN connection. Dial-up modem connections are not sufficient.
- Virus protection updates
- Mobile devices used for HMIS data entry must use the Mozilla Firefox, Google Chrome or Apple Safari internet browsers. Apple Safari must be used on the latest version of iOS.

#### Additional Recommendations

##### Memory

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

##### Monitor

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

##### Processor

- A Dual-Core processor is recommended

## 2.8 HMIS LICENSE FEES

#### Annual Wisconsin HMIS License Fees

Agencies may purchase licenses at any time. License fees are calculated on a sliding scale. Agencies purchasing 20 or fewer licenses will be charged \$60 per license. Agencies purchasing more than 20 licenses will be charged \$60 for the first 20 licenses and \$50 per license for each additional license. License fees are listed on Table 2 below. The amount of a user license may change depending on the operating costs of the Wisconsin HMIS. All changes in amounts charged for user licenses will be approved by the HMIS Advisory Board.

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

### Non-use Fee

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

**Table 1: Example HMIS License Fees**

Number of Users	Annual License Fee	Number of Users	Annual License Fee	Number of Users	Annual License Fee
1	\$60	9	\$540	17	\$1020
2	\$120	10	\$600	18	\$1080
3	\$180	11	\$660	19	\$1,140
4	\$240	12	\$720	20	\$1,200
5	\$300	13	\$780	21	\$1,250
6	\$360	14	\$840	22	\$1,300
7	\$420	15	\$900	23	\$1,350
8	\$480	16	\$960	24	\$1,400

### Fees for Programs Mandated to Use HMIS

Funding shall be provided from agencies operating programs required by federal and state agencies to enter data into HMIS as needed to fully fund the operation of the HMIS. The amount charged will be a set dollar amount or a percentage allocation of the funding source, to be determined by ICA based upon various criteria.

### HMIS Reporting Platform Licenses

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

## 2.9 HMIS OPERATING POLICIES VIOLATION

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

- First Violation – the user and Partner Agency will be notified of the violation in writing by ICA. The user's license will be suspended for 30 days, or until the Partner Agency notifies ICA of action taken to remedy the violation. ICA will provide necessary training to the user and/or Partner Agency to ensure the violation does not continue. ICA will notify

the HMIS Advisory Board of the violation during the next scheduled Advisory Board meeting following the violation.

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

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

#### Notifying the HMIS Lead Agency of a Violation

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

#### Violations of Local, State or Federal Law

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

#### Multiple Violations within a 12-Month Timeframe

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



### 3. Privacy and Security

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

#### 3.1 DATA ASSESSMENT AND ACCESS

All HMIS data will be handled according to the following major classifications: Shared or Not Shared Data. HMIS staff will assess all data, and implement appropriate controls to ensure that data classified as shared or not shared are handled according to the following procedures.

##### Shared Data

Shared data is unrestricted information that has been entered by one provider and is visible to other providers using HMIS. Wisconsin's HMIS is designed as a shared system that defaults to allow shared data. Providers have the option of changing their program settings to not share client data.

##### Data that is Not Shared

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

##### Procedures for transmission and storage of data

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

Whenever confidential data is accessed:

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

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

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

#### Aggregated Public Data

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

#### Unpublished Restricted Access Data

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

#### Procedures for Transmission and Storage of Data

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

## 3.2 DATA REPORTING PARAMETERS AND GUIDELINES

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

#### Principles for Release of Data

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

### 3.3 RELEASE OF DATA FOR GRANT FUNDERS

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

### 3.4 BASELINE PRIVACY POLICY

#### Collection of Personal Information

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

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

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

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

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

Personal information may also be collected from:

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

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

#### Use and Disclosure of Personal Information

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

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

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

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

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

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

#### Inspection and Correction of Personal Information

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

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

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

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

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

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

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

#### Limits on Collection of Personal Information

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

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

#### Limits on Partner Agency Use of HMIS Client Information

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

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

#### Complaints and Accountability

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

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

### 3.5 USE OF A COMPARABLE DATABASE BY VICTIM SERVICE PROVIDERS

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

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

### 3.6 USER CONFLICT OF INTEREST

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

### 3.7 SECURITY PROCEDURE TRAINING FOR USERS

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

### 3.8 VIOLATION OF SECURITY PROCEDURES

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

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

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

### 3.9 PROCEDURE FOR REPORTING SECURITY INCIDENTS

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

## 3.10 DISASTER RECOVERY PLAN

### Bowman Systems Disaster Recovery Plan

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

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

### Standard Data Recovery

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

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

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

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

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



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

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

#### Wisconsin HMIS Disaster Recovery Plan

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

## 4. Data Requirements

### 4.1 MINIMUM DATA COLLECTION STANDARD

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

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

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

### 4.2 PROVIDER NAMING CONVENTION

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

### 4.3 DATA QUALITY PLAN

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

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

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

### 4.4 XML IMPORTS

While HMIS databases are required to have the capacity to accept XML imports, ICA reserves the right to not allow XML imports into Wisconsin's HMIS. Allowing XML imports will impact data integrity and increase the likelihood of duplication of client files in the system.

## 4.5 HMIS DATA PROTECTION

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

## 5. Glossary

**Agency Administrator** – the individual responsible for HMIS use at each partner agency that has ten or more HMIS users.

**Aggregated Public Data** – data that is published and available publicly. This type of data does not identify clients listed in the HMIS.

**Not Shared Data** – information entered by one provider that is not visible to other providers using HMIS.

**Confidential Data** – contains personal identifying information.

**ICA** – the Institute for Community Alliances, which is the HMIS Lead Agency.

**HMIS – Homeless Management Information System** – an internet-based database that is used by homeless service organizations across Wisconsin to record and store client-level information about the numbers, characteristics and needs of homeless persons and those at risk of homelessness.

**HMIS Advisory Board** – the group of HMIS users who are responsible for approving and implementing the HMIS Policies and Procedures, and for working to make improvements to Wisconsin's HMIS.

**HMIS License Fee** – the annual fee paid by partner agencies to allow each HMIS user at their agency continued access to the database.

**HMIS User Level** – HMIS users are assigned a specific user level that limits the data the user is able to access in the database.

**HMIS Vendor** – the Wisconsin HMIS software vendor is Bowman Systems. The HMIS vendor designs the HMIS and provides ongoing support to the System Administrators.

**Minimum Data Entry Standards** – a minimum set of questions that must be completed for each client to provide data for use in aggregate analysis.

**Open Data** – does not contain personal identifying information.

**Partner Agencies** – the homeless service organizations that use HMIS.

**System Administrators** – staff at the Institute for Community Alliances who are responsible for overseeing HMIS users and use in Wisconsin. The System Administrators allow users HMIS access and provide training; ensure user compliance with HMIS policies and procedures; and make policy recommendations to the Steering Committee.

**Shared Data** – unrestricted information that has been entered by one provider and is visible to other providers using HMIS.

**Unpublished Restricted Access Data** – information scheduled, but not yet approved, for publication.

**Victim Service Provider** – a nonprofit agency with a primary mission to provide services to victims of domestic violence, dating violence, sexual assault, or stalking.

## 6. Appendices

### 6.1 USER MANUALS

The 5.8 Manuals for General Users provide the protocol for data entry workflow for Wisconsin HMIS users. The User Manuals include the data entry workflow requirements to document valid program entry and exit dates in the HMIS.

#### Manuals

1. 5.8 Manual for General Users – Part 1
2. 5.8 Manual for General Users – Part 2

### 6.2 DATA DICTIONARY AND DATA MANUAL

The [HMIS Data Standards Manual](#) is intended to serve as a reference and provide basic guidance on HMIS data elements for CoCs, HMIS Lead Agencies, HMIS System Administrators, and users. The companion document to the HMIS Data Manual is the [HMIS Data Dictionary](#).

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

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



1. A project at the bottom of Tier 1 may be moved into Tier 2 to minimize funding loss in Tier 1 where it is necessary to straddle Tier 1 and Tier 2 or request less funding in Tier 1 than allocated.
2. A SSO ranked in Tier 1 with a higher ranking than a PSH or RRH project may be placed below the PSH or RRH as long as it remains in Tier 1.
3. A project with a ranking of 50% will be required to reallocate funds unless there are no other project applications. In that case, the project will be placed in Tier 2 and must agree to technical assistance to improve performance.
4. New projects will be placed in Tier 1 below renewals that are scored but above first time renewals. They will be ranked in this order: PSH, RRH, HMIS, SSO. If there is more than 1 of the same type the one targeting a priority population will be ranked higher. If there is more than one project with target populations, they will be ranked in order of 1.) multiple year requests and then 2.) largest budget to smallest budget.

## **CRITERIA EXPLANATION**

### **SECTION 1: PENALTY for NON-COMPLIANCE - APR, POINT IN TIME, COORDINATED ASSESSMENT/PRIORITIZATION PARTICIPATION**

1. Timely Submission of APR: HUD requires the APR to be submitted within 90 days of the last day of the project's operating year. The failure to submit an APR not only jeopardizes the project but the CoC. (Not used in 2016)
2. Coordinated Assessment/Prioritization: HUD requires all CoCs to implement Coordinated Assessment/Prioritization. All projects are required to comply with the Coordinated Assessment/Prioritization plan. An organization that is not in compliance with the requirements, which include training, implementation by a designated date, and administration of the VI-SPDAT to program participants will be penalized.
3. PIT-January and July Participation: HUD requires each CoC funded project/agency to participate in the January PIT. The Racine CoC requires each agency receiving CoC, City of Racine ESG or State of Wisconsin ETH to participate in the PIT street count either on the night of or day after in January and July.
4. PSH-Compliance with CH, Disability and Homeless Status: HUD places eligibility requirements on some PSH projects in the NOFA under which the project was created. Because these projects were created specifically to assist individuals HUD has prioritized as being the most in need and with the most barriers, a project that is not in 100% compliance not only fails to fulfill the requirements of its grant, but jeopardizes the ability of the CoC to address the needs of the most needy. This is a threshold requirement.

### **SECTION 2: CoC PROJECT REQUIREMENTS and HMIS DATA REQUIREMENT**

5. Use of Federal Funds: Project spending is reflective of an organization's ability to effectively provide outreach to identify those in need and provide a service in the community that the CoC has identified. While projects may not spend all funds allocated in a give year, the amount of

funding that is not expended is a reflection of outreach efforts, need for the services provided , project effectiveness and project management.

6. Utilization of Units: The utilization rate of a PSH, RRH or TH project is reflective of an organization's ability to manage the project. While projects may not spend all funds allocated in a given year, the amount of funding that is not expended is a reflection of project need and management.
7. Data Completeness: HUD has mandated the data elements that must be collected and entered into HMIS. HUD has set forth minimum standards that must be met for data completeness. A project that does not meet minimum standards jeopardizes the quality of data within the CoC and the points awarded in the CoC funding competition.

### **SECTION 3: PERFORMANCE MEASURES**

8. PERFORMANCE: HUD sets specific performance criteria for CoC funded projects. PSH, RRH and TH projects are expected to meet those criteria. There is also an expectation within the CoC that SSOs contribute to the overall performance criteria in the CoC. The goal for SSOs is to achieve the same performance measure expectations. It is also recognized that an SSO provides a specific service to an individual that is expected to enhance the individual's success in achieving housing stability, increasing total income or mainstream benefits, but the full impact of those services may not be measured until well after the individual has exited the SSO project. Therefore, SSOs are expected to have an impact on fewer individuals at time of exit and are scored differently.





### 1. COMPLIANCE REQUIREMENTS

CRITERIA	COMPLIANCE	PENALTY
Timely submission of APR (not used FY2016 due to HUD revising esnaps)	0	-5
Coordinated Assessment/Prioritization - agency not trained or not using	0	-5
PIT – JANUARY STREET COUNT PARTICIPATION	0	-5
PIT – JULY STREET COUNT PARTICIPATION	0	-5
PSH Eligibility Requirements or 50% of those served for non PSH–CH, Disability, Literally homeless	0	-5

### 2. CoC PROJECT REQUIREMENTS and HMIS DATA COMPLETENESS REQUIREMENT

CRITERIA	5	4	3	2	1
USE OF FEDERAL FUNDS (Spending/Drawdown)	90%+	80-89%	70-79%	60-69%	<69%
UTILIZATION OF UNITS (scored each quarter)	96%+	90-95%	80-89%	70-79%	<79%
DATA COMPLETENESS: % Don't Know, Missing, Refused	0-1%	1.1-2%	2.1-3%	3.1-4%	>4.1%

### 3. PERFORMANCE MEASURES

CRITERIA	5	4	3
HUD Goal: Housing Stability (PSH projects) 80%	>79%	75-79%	71-74%
HUD Goal: Housing Stability (TH projects) 65%	>65%	61-65%	57-60%
Housing Stability (SSO projects) 50%	>49%	45-49%	41-44%
HUD Goal: Increase Earned Income (PSH and TH) 20%	>19%	15-19%	11 -14%
HUD Goal: Increase Income All Sources (PSH and TH) 54%	>53%	49-53%	45-48%
SSO - Increase Income All Sources Or Increase Earned Income (Score based on higher of the two criteria) 10%	>9%	7-9%	4-6%

Max Point: PSH & TH: 45, SSO : 20