Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: LA-502 - Shreveport, Bossier/Northwest Louisiana CoC

1A-2. Collaborative Applicant Name: HOPE Connections, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: HOPE Connections, Inc.

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

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

Other:(limit 50 characters)		
Homeless Prevention Providers	Yes	Yes
Churches that provide any relevant services	Yes	No

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.
(limit 2,000 characters)

The CoC Membership consists of eight Sub-population Networks, which meet on a quarterly basis. These Networks seek to strategically create solutions to homelessness in their areas of expertise around preventing and ending homelessness. These Sub-population Networks each elect two representatives to serve on the NWLA CoC Board. Therefore, CoC policies, strategies, and governance are directly guided by CoC Membership, which is made up of those with interest and expertise in solutions to preventing and ending homelessness.

CoC Membership is open the every person interested in preventing and ending homelessness. Although CoC Membership has an annual fee of $150 annually, ANY individuals and agencies/organizations are invited to participate in CoC Membership Meetings. Additionally, contribution to quarterly Sub-population Network Meetings does not require paid CoC Membership. CoC Membership fees are waived for those who are currently or formerly experiencing homelessness.

1B-2.Open Invitation for New Members. Applicants must describe:
(1) the invitation process;
(2) how the CoC communicates the invitation process to solicit new members;
(3) how often the CoC solicits new members; and
(4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.
(limit 2,000 characters)

1. Prior to every one of ten annual CoC Membership Meetings, a notification email is sent to the CoC email listing of over 200 people with information about the details and contents of the upcoming meeting. The notification also contains an open invitation to every person and/or organization interested in solutions to end homelessness. The notification/invitation is also posted on the CoC's Facebook page. CoC membership has an annual fee of $150, however, CoC Membership Meetings are open to all interested parties.

2. As stated above, the invitation process is communicated by email and on social media.

3. A CoC Membership drive is conducted each December for the upcoming calendar year. CoC Membership is advertised as broadly as possible by email and social media. Additionally, the CoC Subpopulation Networks are asked to personally invite regional agencies/organizations who could contribute to the participants they serve.

4. CoC Membership fee is waived for all persons who are currently or formerly experiencing homelessness. CoC and ESG funded agencies, as well as, the CoC Board are asked to contribute the names of any current or former participants who could advocate for those experiencing homelessness as CoC Members and/or Board Members.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals.
(limit 2,000 characters)

The RFP for the annual HUD CoC Competition clearly states all CoC member agencies are invited to apply for CoC funding. The RFP, along with a link to the CoC Program page on the HUD Exchange, was sent out by email, social media, and posted on the CoC website on July 6, 2018. Additionally, for the FY2018 Competition, the email included System Performance guidance to encourage new applicants about contributing to the greater housing/services system.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	No
Funding Collaboratives	Not Applicable
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:
(1) consulted with ESG Program recipients in planning and allocating ESG funds; and
(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
(limit 2,000 characters)

1. The CoC is asked to confirm contribution to the homeless system for all applicants to State and Federal entitlement ESG funding. The Louisiana Housing Corporation, which solicits applications for the State ESG, meets quarterly with CoC Leads from all regions in the state. A portion of these meetings is set aside for discussion of ESG priorities and policies. The CoC also attends all public hearings and contributes written input concerning priorities of local jurisdiction community development departments.
2. The CoC Collaborative Applicant also serves as the regional HMIS System Lead. The CoC Director of System Outcomes produces HMIS project performance reporting and assists with system reporting for the ESG CAPER in the IDIS System. The CoC Board is currently writing policies for implementation/best practices for ES, PSH, RRH, and Homeless Prevention. These policies/best practices will be applicable to CoC and ESG funded housing projects, which will then be used as further evaluation of the projects.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes to both
1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?	Yes

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:
(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

1. The CoC has a workflow for housing projects that encounter participant domestic violence and related violence issues. However, most DV/sexual assault issues among those experiencing homelessness are encountered at the HOPE Connections homeless one-stop and on street outreach. Many times, a person experiencing DV is interviewed through Coordinated Assessment, provides information about the violence, and the offender is at the site with the survivor. All one-stop staff is trained to call in the LCSW staff, who will then assist the survivor to make decisions regarding safety and resources. If the survivor agrees, staff will call Project Celebration, the State Designated Regional DV provider, and arrange safe, confidential transfer to an alternate location where housing arrangements can be made.
2. Several CoC funded PSH scattered site projects accept DV/sexual assault survivors, but client choice is limited, and the majority of survivors do not need PSH. While safety and confidentiality are a top priority, these agencies do not specialize in the specific needs of DV/sexual assault survivors.

**1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking.
(limit 2,000 characters)**

Each year, the CoC devotes one CoC Membership Meeting to information, safety policies, and workflow regarding serving survivors of domestic violence, dating violence, sexual assault, stalking, and sex trafficking. The annual meeting is led by the State Designated Regional DV Provider, Project Celebration. All agencies related to DV services are asked to serve on a Q&A Panel and be part of creating workflow for the CoC.

Since Coordinated Assessment staff is more likely to encounter those experiencing any of the above listed violence issues, they have frequent communication and planning sessions with Project Celebration, the State Designated Regional DV Provider, and the newly created Family Justice Center, which is a one-stop for legal issues related to all forms of personal violence.

**1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database.
(limit 2,000 characters)**

The CoC uses Coordinated Assessment interviews and DV shelter stays of the State Designated Regional DV Provider to document the number of people experiencing homelessness and domestic violence, dating violence, sexual assault, stalking, and sex trafficking. We can assume that since Coordinated Assessment interviews are self-reported information, the data is under reported.

1C-4. DV Bonus Projects. Is your CoC applying for DV Bonus Projects? Yes

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	
RRH	X
Joint TH/RRH	

1C-4b. Applicants must describe:
(1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;
(2) the data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

1. Currently, 301 individuals and family head of households who have identified as DV survivors are being served by all projects in the CoC.
2. HMIS Entry/Exit Data for current project participants was used for the calculation.
3. The CoC used data entered by project staff at project entry.

1C-4c. Applicants must describe:
(1) how many domestic violence survivors need housing or services in the CoC's geographic area;
(2) data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

1. For the calendar year 2017, 269 people reported a history of Domestic Violence, and of those, 50 reported fleeing Domestic Violence in Coordinated Assessment interviews. Additionally, 135 households were served at the regional State Designated DV Shelter. We can reasonably assume that a minimum there are 200 households are domestic violence survivors experiencing homelessness annually.

2. and 3. The CoC has used data collected through standard questions asked as part of Coordinated Assessment interviews conducted in HMIS. However, since Coordinated Assessment data is all self-report, the CoC predicts that the numbers are under reported. Data was also provided by the State Designated Regional DV Provider on DV Shelter stays.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:
(1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;
(2) quantify the unmet need for housing and services for DV survivors;
(3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and
(4) describe how the CoC determined the unmet need for housing and services for DV survivors.
(limit 3,000 characters)

1. The CoC has very little RRH, which is the type of housing most DV survivors need according to VI-SPDAT assessments. Additionally, DV survivors have very specific needs related to safety, legal issues, and trauma. A housing provider with expertise in assisting survivors to resolve these issues is needed to expedite housing stability for this population.
2. We have quantified the unmet need for permanent housing and services for DV survivors at 100 households annually.
3. Data used to make this estimation was from Coordinated Assessment interviews and DV shelter stays.
4. The CoC determined that the number of households fleeing DV reported in Coordinated Assessment interviews was 50. Of those, 43 scored in the VI-SPDAT range suggesting RRH solutions. Additionally, we determined that approximately 50% of those 135 households served at the regional DV shelter need RRH.

**1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors.
(limit 2,000 characters)**

The applicant for the DV Bonus Project, Project Celebration, has nearly 20 years of experience serving DV survivors. They also serve as the State Designated Regional DV Provider. They have expertise in assisting DV survivors with emergency shelter, safety issues, legal issues, and mental health issues resulting from trauma. They will provide all services provided by their agency and partner agencies to those participants in their RRH project.

**1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:
(1) rate of housing placement of DV survivors;
(2) rate of housing retention of DV survivors;
(3) improvements in safety of DV survivors; and
(4) how the project applicant addresses multiple barriers faced by DV survivors.
(limit 4,000 characters)**

1. The applicant for the DV bonus project has had to rely on family diversion and non-designated CoC funded housing for those with low or no income exiting the DV shelter. Exit destination was not a required data element for their shelter funding, however, they estimate that they assisted 50% of survivors to obtain permanent housing.
2. The applicant was not tracking housing retention of DV survivors, since the housing all provided by other individuals or agencies.
3. The applicant, Project Celebration, serves as the State Designated Regional DV Provider. In that role, they are able to connect survivors with all legal issues and create safety plans with them. They have nearly 20 years experience in assisting DV/sexual assault survivors.
4. The applicant currently provides and will provide to RRH participants the necessary assistance with income, mainstream benefits, safety, and trauma care to ensure housing stability.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas: (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission; (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Shreveport Housing Authority		No	No
Housing Authority of Bossier City		No	No
Bossier Parish Housing Authority		No	No
DeSoto Parish Police Jury		No	No
Webster Parish Police Jury		No	No

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

None of the PHAs in our region have a written homeless admission preference. The CoC works closely with the Shreveport Housing Authority, which also operates the Housing Authority of Bossier City, and we are close to reaching an agreement for a preference for those in PSH who no longer need intensive supportive services. We could not have gotten this far in the process without data from Coordinated Assessment, which documents our region's flow issues. The primary flow issue at this time is with those who no longer need supportive services moving on from PSH.

The Shreveport Housing Authority is the largest PHA in our region, and we hope to replicate the policy with other PHAs.

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? No

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)

The CoC Board voted to add the Equal Access/Gender Identity ruling as an attachment to the CoC Governance Charter along with other Fair Housing Regulations. This was an attempt to educate providers and emphasize the importance of these changes. The CoC has provided some training on the Equal Access Rule at the CoC Membership Mtg., however, the questions raised were outside the scope of the CoC leadership.

The CoC Director attended a training hosted by the Louisiana Balance of State CoC in Spring 2018 and will work with materials provided by trainer, David Canavan, to create a training locally and to work one-on-one with agencies who may not be in compliance. Additionally, the Louisiana Housing Corporation is hosting a Housing Conference in April 2019, where David Canavan will again train on this Rule.

The CoC Collaborative Applicant operates the Street Outreach Team, Day Shelter, and Coordinated Assessment Project. HOPE Connections, the CoC Collaborative Applicant, leads by example and has fully trained all staff at the HOPE Connections Homeless One-Stop on these issues. The CoC Executive Director was part of a team led by Project Celebration that started support groups for LGBT DV survivors.

Coordinated Assessment Navigators educate providers on Equal Access/Gender Identity compliance as needed when providers attempt to deny access citing program policy.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X

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

1C-8. Centralized or Coordinated Assessment System. Applicants must:
(1) demonstrate the coordinated entry system covers the entire CoC geographic area;
(2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
(3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
(4) attach CoC's standard assessment tool.
(limit 2,000 characters)

1. The CoC serves the 7 most Northwest Parishes of Louisiana which surround the Shreveport/Bossier City Metropolitan Area. Therefore, Coordinated Assessment must cover a large rural area and mid-sized cities. There is a Coordinated Assessment site at the HOPE Connections One-Stop, which is co-located with the regional homeless day shelter, Street Outreach Team offices, and the region's largest soup kitchen. Assessment Navigators conduct interviews onsite 7 days a week and at off-site locations such as shelters, hospitals, jails, etc 5 days a week. The Street Outreach Team conducts rural outreach one day a week, covering the entire region on a monthly basis. Rural Outreach primarily builds relationships and provides contact information for targeted sites in each parish so that the Street Outreach can be called out to conduct Assessments when a person or family experiencing homelessness is identified.
2. The other 4 days a week, the Street Outreach Team visits places not meant for human habitation within the Shreveport/Bossier City area to identify, build relationships, and assess those who are the least likely to request assistance. Day Shelter staff also runs weekly reports of participants to identify those people who have not been assessed. They attempt to build trust with those persons in an effort to encourage them to be assessed.
3. The CoC utilizes a pre-screen, VI-SPDAT, Family VI-SDAT, and will soon implement the Youth VI-SPDAT. The pre-screen is used to identify those experiencing unsheltered homelessness or currently staying in emergency shelter. Those people are prioritized for documentation of homelessness, which is required prior to an Assessment interview. Documentation of homelessness can usually be obtained the same day or within a week of pre-screen.
4. All assessment tools are attached.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:
(1) objective criteria;
(2) at least one factor related to achieving positive housing outcomes;
(3) a specific method for evaluating projects submitted by victim services providers; and
(4) attach evidence that supports the process selected.

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

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
(1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
(2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.
(limit 2,000 characters)

1. The CoC considers project priority of all of the following needs and vulnerabilities during the rating/ranking process: survivors of all violence issues; disabilities such as substance abuse, mental illness, HIV/AIDS, and other chronic physical disabilities; criminal history; chronic homelessness; and low or no income.

2. The above listed needs and vulnerabilities are considered in several questions on the scoring tool, however, the percentage of participants accepted from Coordinated Assessment is the ultimate measure. Coordinated Assessment utilizes the VI-SPDAT to prioritize individuals and families on a By-Name List. Each week, housing providers, including all CoC funded projects, meet for a Housing Placement Committee Meetings. Projects present housing vacancies and accept the next participant that meets project criteria from the prioritized By-Name List. Additionally, the CoC awarded extra points to projects that selected 3 or more disabilities on the Participant Sub-population screen, with one of these being Physical Disability (eSNAPS Screens 3B and 5B). This was done in an effort broaden project criteria.

1E-3. Public Postings. Applicants must indicate how the CoC made public:
(1) objective ranking and selection process the CoC used for all projects (new and renewal);
(2) CoC Consolidated Application–including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and
(3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	X	CoC or other Website	X
Email	X	Email	X
Mail		Mail	
Advertising in Local Newspaper(s)		Advertising in Local Newspaper(s)	
Advertising on Radio or Television		Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	X	Social Media (Twitter, Facebook, etc.)	

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: Yes

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:
(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline–attachment required;
(2) rejected or reduced project application(s)–attachment required; and
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline–attachment required. :

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Did not reject or reduce any project
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.	Yes
2A-1a. Applicants must: (1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and (2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).	CoC Governance Charter, Attachment I, HMIS Policies and Procedures p. 4
2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.	Yes
2A-3. HMIS Vender. What is the name of the HMIS software vendor?	Mediware/ServicePoint
2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.	Statewide HMIS (multiple CoC)

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and
(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	320	22	226	75.84%
Safe Haven (SH) beds	25	0	25	100.00%
Transitional Housing (TH) beds	61	0	61	100.00%
Rapid Re-Housing (RRH) beds	172	0	172	100.00%
Permanent Supportive Housing (PSH) beds	538	0	305	56.69%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months.
(limit 2,000 characters)

The CoC will continue to work diligently with the non-HUD funded Emergency Shelter in hopes that it will understand the importance of entering and reporting data into the HMIS system. However, due to adamant refusal to use HMIS, an extreme lack of transparency concerning the nature of housing type (ES vs. TH), and an unwillingness to participate in the Coordinated Assessment System; the NWLA CoC Board has voted to no longer include the non-HUD funded, Shreveport-Bossier Rescue Mission in the annual Housing Inventory Count and/or annual Point in Time count. During those important events, most of the participants that reside overnight in that specific shelter will be counted at one of the three Day Shelters and the local Soup Kitchen in our area.

The CoC has successfully engaged the HUD-VASH project to begin entering data into the HMIS database. Veteran Affairs and HCHV program have been very cooperative in gathering data and participating with the CoC during this process.

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 12

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).	01/22/2018
2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).	04/30/2018

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results.
(limit 2,000 characters)

Not Applicable.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? No

2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC's 2018 sheltered PIT count? No

2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.	No
2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?	Yes

2C-5a. If "Yes" was selected for question 2C-5., applicants must describe:
(1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;
(2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and
(3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.
(limit 2,000 characters)

1)During the planning process, youth stakeholders were engaged by the CoC in annual PIT meeting held to discuss the tool and methodology. The discussion consisted of all homeless youth agency for participation in the 2018 PIT count.
2) Two out of three homeless youth stakeholders participated in allowing volunteers to complete surveys with homeless youth with the shelter. Stakeholders were instrumental in providing times for youth to be readily available for surveys.
The third youth stakeholder is an active user of the HMIS database. This allowed the CoC to have a count of those youth within that project on the night of the PIT Count.
3) The CoC requested that all of the youth experiencing homelessness during the 2018 count be interviewed face to face. All of the youth that participated in the survey process were receptive to answering survey questions with the volunteers.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:
(1) individuals and families experiencing chronic homelessness;
(2) families with children experiencing homelessness; and
(3) Veterans experiencing homelessness.
(limit 2,000 characters)

The CoC and all ES/SH/PSH/PH/Street Outreach/Day Shelter stakeholders discussed utilizing the Civilian and Veteran Master List to provide essential information such as participant location and homeless status to be counted in the 2018 PIT count.
On the night and allowable days afterward of the PIT count, the list was shared with the PIT volunteers to actively engage those participants for survey completion.
Both the Civilian and Veterans By Name list are living documents which are updated on a weekly basis with the most current and accurate data from weekly meetings and HMIS. Those individuals and families experiencing chronic homelessness, families with children experiencing homelessness and Veterans experiencing homelessness hold the top prioritize for the CoC. Street Outreach and Coordinated Assessment Project continues to monitor the status and locations of these participants for PIT count and newly available housing opportunities.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	1,183

3A-1a. Applicants must:
(1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
(2) describe the CoC's strategy to address individuals and families at risk of becoming homeless; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.
(limit 2,000 characters)

1. The CoC uses pre-screen data elements, the demographic/income/disability data collected from those seeking homeless prevention assistance, and Coordinated Assessment data of those who sought prevention assistance and were later assessed as experiencing homelessness. The following risk factors were identified: a. diversion is not a viable option, b. little to no income and c. not being actively engaged with medical and/or behavioral health providers.
2. When individuals or families present as being at risk of becoming homeless, the Coordinated Assessment staff completes a pre-screen to assess needs along assistance creating a diversion plan, if needed. Assessment staff provides referrals to local community partners that assist with applications for mainstream services and financial assistance. With homeless prevention resources being scarce, and the inability to accurately predict homelessness among those presenting as being at risk; the CoC has selected a progressive engagement model with this population.
3. Northwest Louisiana CoC Board and Coordinated Assessment Project

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:
(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
(2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;
(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
(4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.
(limit 2,000 characters)

1. The average length of time individuals and persons in families remained homeless in ES and SH was 60 days.
2. A. The CoC has identified a flow issue regarding people moving on from PSH when they no longer need case management. While strategic planning around all System Performance Measures will be held in early 2019, the following solutions can be implemented:
i. CoC policies/best practices for PSH will include mandatory justification in HMIS for those remaining in PSH after 18 months. Justification will need to be accompanied by documented housing case management still being provided at least monthly. While there are participants who will need long-term PSH, most participants are able to live independently after receiving supportive services that assist them to make decisions for themselves that create housing stability.
ii. The CoC will work with the PHA to fully implement a Move-On Plan to prioritize those who are stably housed and no longer need case management into PHA housing programs.
B. As part of a larger strategy to serve families, the CoC awarded extra points to project applicants who designated PSH family units as DedicatedPLUS. Our CoC rarely has a family who qualifies as chronically homeless, and if that occurs, the family will be prioritized. However, this will hopefully expedite placement for families who score on the VI-SPDAT as needing PSH as housing providers are reluctant to prioritize non-chronic families over chronic individuals.
3. The CoC maintains and monitors a prioritized By-Name List for PSH housing providers along with our newly implemented prioritized By-Name List for RRH providers. Length of time homeless is one of the primary prioritization elements. The list is updated on a weekly basis to identify those persons/families that have fallen into chronic status or obtained other housing.
4. NWLA CoC Board and Coordinated Assessment Project

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:
(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and
(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	29%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	95%

3A-3a. Applicants must:
(1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and
(2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.
(limit 2,000 characters)

1. The CoC no longer has safe haven or transitional housing, however, the CoC strategy to increase the rate of permanent housing placement from emergency shelters includes Coordinated Assessment intakes within 3 days of entry, assisting participants with applications for mainstream services, and creating a relationship with the Street Outreach Team in the the event the participants cannot remain in shelter past the 7-days of free shelter.
For RRH projects, the CoC Coordinated Assessment Project maintains and updates to the RRH prioritized By-Name List, which the Coordinated Assessment will begin utilizing in late October 2018. By utilizing the RRH By-Name List to guide prioritized placements within the newly implemented RRH Housing Placement Committee, the CoC ensures that all individuals and families scoring within the RRH range on the VI-SPDAT have equal access to RRH Assistance. And, as with the PSH Housing Placement Committee, RRH projects will need to present cases where a participant's involuntary eviction and/or discharge from project. The HPC members assist each other by offering suggestions of services that may help the participant remain stably housed. The CoC's policy and procedures for those participants in RRH projects ensure that proper case management and referrals to local community stakeholders such as employment and mainstream resources are at the forefront of services are needed to ensure successfully exits to permanent housing.
2. Case Management both in project stay and follow up is a crucial component in assisting participants with life skills, employment and money management to exit and maintain permanent housing.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	7%

3A-4a. Applicants must:
(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;
(2) describe the CoC's strategy to reduce the rate of additional returns to homelessness; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.
(limit 2,000 characters)

1. The common factors of individuals and persons in families who return to homelessness are assessed during the weekly housing placement meeting. Each project has agreed to bring forth those participants that are experiencing difficulties in maintaining their current housing opportunity. Many of the factors that have been found to contribute would be the participants lack of commitment to accessing and maintaining mental healthcare, staying on task with paying their portion of the rental cost if applicable, and cooperating with project's case management staff.
2) The CoC provides monthly training that empower agency staff with the tools that will positively impact the relationship between participants and staff member. We continue to make successfully connections with key community partners such as mental health providers, career building and money management classes, and local Public Housing Authority and landlords. These partnerships allow for those common factors to be assessed and giving the proper attention prior to an individual or persons in families having the need to return to homelessness.
3)NWLA CoC Board- Sub Committee-Emergency Housing/Services

3A-5. Job and Income Growth. Applicants must:
(1) describe the CoC's strategy to increase access to employment and non-employment cash sources;
(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
(3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.
(limit 2,000 characters)

1. The CoC Membership has identified employment assistance on-site at the HOPE One-Stop as a need for participants. Goodwill Industries currently provides employment services for participants at their sites, however, data has shown that people experiencing homelessness are much more likely to access services at the One-Stop. Non-employment cash sources can be also be applied for at the One-Stop. The CoC has a SOAR certified employee that assist qualified participant with disability applications.
2. The CoC continues to cultivate relationships with employment agencies in the community to assist participants to increase income. There are several agencies within our CoC that offer GED classes and technical career training for participants that are interested in furthering their education to increase their case income.
3) NWLA CoC Board, Sub-Population Network - Employment, Education, and Benefits

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)	05/31/2018

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:
(1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and
(2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

Total number of beds dedicated as DedicatedPLUS	114
Total number of beds dedicated to individuals and families experiencing chronic homelessness	208
Total	322

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required. Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	X
Number of previous homeless episodes	X
Unsheltered homelessness	X
Criminal History	X
Bad credit or rental history	
Head of Household with Mental/Physical Disability	X

3B-2.2. Applicants must:
(1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
(2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
(3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 2,000 characters)

1. In the FY2017 Competition, the CoC lost a poor performing RRH project, but was awarded a RRH Bonus Project to one of the CoC's highest performing agencies. No agency in our region has shown expertise at providing effective RRH, but the CoC Board, RRH projects, and ESG funders are in the process of creating policies and best practices that guide how RRH is operated in CoC and ESG projects. These policies will limit the length of assistance, taper down the amount of assistance as income increases, and require written justification to continue assistance to those families that are not making progress after 6 months of assistance in increasing income to sustain the housing. This will enable more families to be rapidly rehoused.
2) The CoC policies and best practices will support the use of RRH assistance to end homelessness quickly and provide the needed supports to increase income to a level where the participant is able to successfully support the housing using their own resources by connecting participants to education, employment, and benefits application resources as quickly as possible.
3) NWLA CoC Board, Sub-Population Network - Family & Youth Housing and Services

3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	X
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	X
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	X
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth includes the following:

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

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

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

3B-2.6. Applicants must describe the CoC's strategy to increase:
(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)

1. The CoC will convene a Youth Homelessness Task Force to meet short-term to assist Youth Outreach Services and The Brandon Transitional Home for Boys to obtain funding to meet full capacity and/or expand their beds.
2. The CoC has identified a model used in Monroe-Northeast LA CoC to engage and provide services to unsheltered youth. The Family & Youth Sub-Population Network will work to implement the model.

3B-2.6a. Applicants must:
(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;
(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and
(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.
(limit 3,000 characters)

1. Evidence will be current beds funded vs. beds funded by June 1, 2019. For strategy 2, The CoC will identify an agency to lead the project, create a project plan, and assist in creating and funding advertising/PR materials by June 1, 2019
2. The only way to measure these strategies is to set achievable goals that will have an impact and set target dates.
3. The CoC

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:
(1) youth education providers;
(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);
(3) school districts; and
(4) the formal partnerships with (1) through (3) above.
(limit 2,000 characters)

1. The Director of the largest school board homeless program in the region serves on the CoC Board.
3. The staff of the McKinney-Vento Homeless Programs attend CoC Membership Meetings.
4. Formal partnerships exist between CoC and ESG family housing providers with local school board homeless programs.

3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.
(limit 2,000 characters)

The CoC Governance Charter contains the following policy on XI. A. c., page 13:

Agencies must ensure that all school age children or youth are connected as quickly as possible with a Homeless Program Liaison to ensure that children are able to access all of the things needed to attend the most appropriate school including transportation.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	No
Head Start	No	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No

Public Pre-K	No	No
Birth to 3 years	No	No
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 2,000 characters)

The CoC works actively with the Veteran's Affairs to identify, assess and refer Veterans experiencing homelessness. Currently, a key employee of the Homeless Veterans Healthcare team has been trained to access the Coordinated Assessment Project, conduct the VI-SPDAT and additional assessments within the HMIS system. Prior to the bi- monthly meetings, the Director of Housing Placement and a member of the HVHC staff add newly found Veterans experiencing homelessness. A bi-monthly meeting is held which include several members of the VA staff from different departments, Coordinated Assessment staff and VA housing providers (ES, SH, TH, PSH, and SSVF) to discuss the active Veteran By Name list. During this meeting, new data from both HOMES, HMIS and case management is discussed and added to to the list for updates. This allows the those in meeting to place participants into the correct and most suitable housing opportunities available.

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

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

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

3B-5. Racial Disparity. Applicants must: (1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance; (2) if the CoC conducted an assessment, attach a copy of the summary.	Yes

3B-5a. Applicants must select from the options below the results of the CoC's assessment.

People of different races or ethnicities are more or less likely to receive homeless assistance.	
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	
There are no racial disparities in the provision or outcome of homeless assistance.	X
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	

3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.

The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	X
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	
The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	X
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	X
The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.	X
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	X
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	X
Other:	

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:
(1) assists persons experiencing homelessness with enrolling in health insurance; and
(2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.

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

4A-1a. Mainstream Benefits. Applicants must:
(1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;
(2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits.
(limit 2,000 characters)

1. The HOPE Connections Homeless One-Stop is an approved Medicaid Application Site, and one of the Coordinated Assessment Navigators was hired for her knowledge and skill at assisting participants with Medicaid applications. The Food Bank of NWLA provides staff at the One-Stop to assist participants with SNAP Food Stamp applications, and a CoC employee is SOAR certified to assist homeless participants with Disability applications. All individuals and families receiving Coordinated Assessment services are further assisted with application follow up and document submission.
2) The CoC staff attend weekly staff meeting where mainstream resource provider agencies invited to give details and information regarding programs and resources. All of the CAP staff have contacts at each of these agencies are able to update the resource page with new and discontinued information. The CoC accesses the LINCC website which provides a comprehensive detailed list of resources within our local community.

4A-2.Housing First: Applicants must report:
(1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and
(2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	10
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach–meaning that the project quickly houses clients without preconditions or service participation requirements.	10
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

4A-3. Street Outreach. Applicants must:
(1) describe the CoC's outreach;
(2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;
(3) describe how often the CoC conducts street outreach; and
(4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.
(limit 2,000 characters)

1)The CoC Street Outreach Team is PATH funded, operated out of the HOPE Connections One-Stop, and employs two full time Outreach Navigators.
2)The Street Outreach Team covers 100% of the CoC's region. They conduct Rural Outreach one day a week, which is primarily creating relationships at targeted locations in each parish and providing information about services that can be provided if a person/family experiencing homelessness is identified. The Outreach Team is able to travel to an identified person/family experiencing homelessness when called to provide assessment services and assist with identifying emergency housing and services.
3)Street Outreach is conducted four days a week, with one of those being Rural Outreach Day. The other day is partially spent on data entry and partially spent in the Day Shelter engaging with participants (Inreach).
4)The Street Outreach Team goes out at 5:30 am two mornings a week to locate people living in cars, abandoned buildings, and encampments. They provide 3rd-party homeless verification for Coordinated Assessment Project and conduct assessments for those that are unwilling or unable to be assessed at the HOPE Connections One-Stop. The Outreach Team continually seeks the location of new encampments and locations of people sleeping in abandoned buildings from the strong relationships they have built with current or past participants. They also receive information from community members and law enforcement regarding the location of people sleeping in a place not meant for human habitation.

4A-4. Affirmative Outreach. Applicants must describe:
(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and
(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)

1. The CoC Governance Charter has policies regarding Fair Housing regulation in an effort to emphasize the importance and exact nature of the regulations. Additionally, the Coordinated Assessment weekly Housing Placement Committee Mtgs allow the opportunity for CoC and ESG project staff to remind each other of Fair Housing issues when discussing participant intake and when discussing the possibility of involuntary project discharge. The HOPE Homeless One-Stop has Fair Housing signage posted.
2. The One-Stop Staff is trained to explain many types of policies and regulations to participants with developmental disabilities, reading issues, etc. Signage is also posted in Spanish for participants with limited English proficiency.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	209	172	-37

4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting $200,000 or more in funding for housing rehabilitation or new construction?	No
4A-7. Homeless under Other Federal Statutes. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes?	No

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No		
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Coordinated Asses...	09/13/2018
1E-1. Objective Critiera–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	FY2018 CoC Projec...	09/13/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes	Public Posting of...	09/18/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Posting of...	09/13/2018
1E-4. CoC's Reallocation Process	Yes	CoC Reallocation ...	09/14/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Notification to A...	09/17/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Statement of No P...	09/13/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Public Posting of...	09/13/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC HMIS Governan...	09/14/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	LSNDC Statewide H...	09/14/2018
3A-6. HDX–2018 Competition Report	Yes	HDX-2018-SPM-CoC ...	09/12/2018
3B-2. Order of Priority–Written Standards	No	CoC Gov Charter P...	09/14/2018

3B-5. Racial Disparities Summary	No	First Steps to Co...	09/17/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Coordinated Assessment Screening Tools

Attachment Details

Document Description: FY2018 CoC Project Rating Ranking

Attachment Details

Document Description: Public Posting of CoC Competition Submissions

Attachment Details

Document Description: Public Posting of RFP with Scoring Elements

Attachment Details

Document Description: CoC Reallocation Process X. H. p.12

Attachment Details

Document Description: Notification to Applicants of Project Acceptance and Ranking

Attachment Details

Document Description: Statement of No Projects Rejected or Reduced

Attachment Details

Document Description: Public Posting of CoC Competition Dates

Attachment Details

Document Description: CoC HMIS Governance X. B. p.9

Attachment Details

Document Description: LSNDC Statewide HMIS Policies and Procedures

Attachment Details

Document Description: HDX-2018-SPM-CoC Competition

Attachment Details

Document Description: CoC Gov Charter Prioritization Policy

Attachment Details

Document Description: First Steps to CoC Racial Disparity Research

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

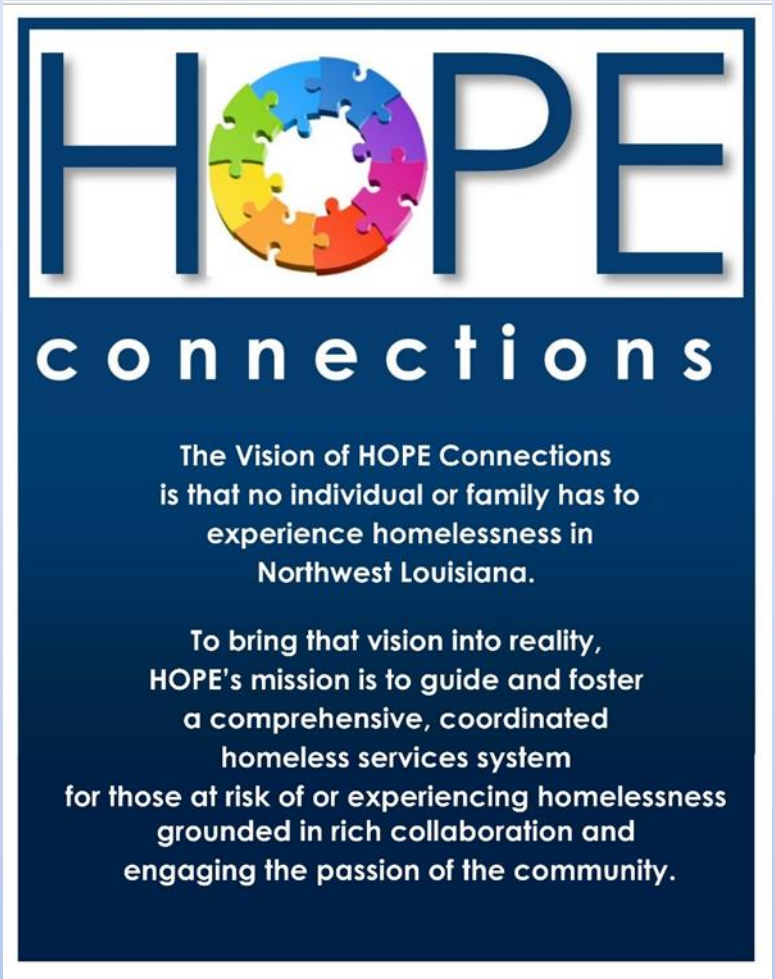
Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/17/2018
1B. Engagement	09/17/2018
1C. Coordination	09/18/2018
1D. Discharge Planning	09/17/2018
1E. Project Review	09/17/2018
2A. HMIS Implementation	09/17/2018
2B. PIT Count	09/17/2018
2C. Sheltered Data - Methods	09/17/2018
3A. System Performance	09/18/2018
3B. Performance and Strategic Planning	09/17/2018
4A. Mainstream Benefits and Additional Policies	09/17/2018
4B. Attachments	09/18/2018

Submission Summary	No Input Required



Governance Charter and Operating Policies of the Housing Crisis Continuum of Care

Approved July 2014
Revised Section XI. B. and C., October 21,2015
Revised Section V., VII. B., April 2016
Revised Section XI. D., E. & G., July 2017
Revised Section VII. A. January 2018
Entire Document Reviewed and Updated, August 2018

Table of Contents

I. Purpose of Governance Charter 3

II. Review of Charter 3

III. Purpose and Overview of the Continuum of Care 3

IV. History of HOPE Connections 4

V. CoC Governance Structure 4

VI. HOPE Board of Directors. 5

VII. NWLA CoC Board 6

VIII. CoC Membership 7

IX. Code of Conduct Statement 8

X. Responsibilities of the CoC Collaborative Applicant 8

XI. Responsibilities of HUD CoC and ESG Funded Agencies 10

I. Purpose of Governance Charter

This Charter identifies the purpose, history, composition, governance structure, responsibilities, and policies of the HOPE Connections Continuum of Care.

II. Review of Charter

The Northwest Louisiana CoC Board will review this charter annually to ensure it remains consistent with the objectives and responsibilities of the CoC in accordance with the HEARTH Act and HUD regulations.

III. Purpose and Overview of the Continuum of Care

The purpose of the Continuum of Care, as defined in the HEARTH Act Interim Rule, is to "promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effective utilization of mainstream programs by homeless individuals and families; and optimize self- sufficiency among individuals and families experiencing homelessness."

The homeless services system in Northwest Louisiana is composed of coordinated access point, street outreach team, drop-in center, emergency shelter, transitional housing, permanent supportive housing for disabled persons, permanent housing, rapid rehousing, homeless prevention, supportive services, and HMIS.

The HOPE Connections Continuum of Care will have a Board of Directors that governs the agency and a CoC Board that governs the homeless system, Sub-Population Networks consisting of CoC members, and an Executive Director to accomplish the responsibilities of the Continuum of Care, as defined in the HEARTH Act Interim Rule. HOPE may also have additional programming that provide services directly to the member agencies of the CoC or that connects clients to the agencies of the CoC.

HOPE currently serves as the Collaborative Applicant in the CoC Application Process and the HMIS Lead Agency. Additionally, HOPE serves as the "Front Door" to the system by operating the Coordinated Access Point, Street Outreach Services, Day Shelter Services, and managing the homeless one-stop for the region.

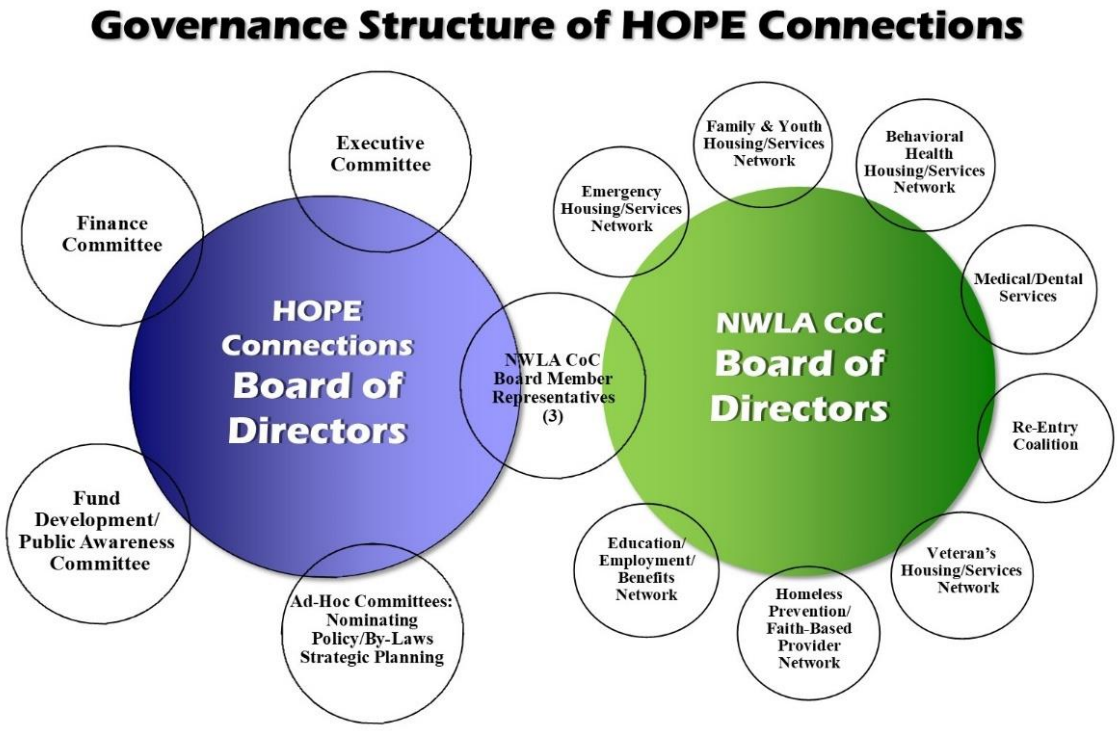
HOPE Continuum of Care Members voted in 2012 to pursue becoming a Unified Funding Agency. HOPE is currently creating the infrastructure to adequately take on this role.

IV. History of HOPE Connections

HOPE is the result of years of dedicated volunteers who strived to convene funding, policies, missions, resources, and organizations among diverse public, private, non-profit, and faith-based entities working together on a common objective within our community. A coalition established in the mid 1980's, foundationally from a vision to prevent and end homelessness in our Northwest Louisiana Region. In 1994, HUD introduced a formalized model of "grant funding and supportive services" – a Continuum of Care. These Continuums of Care would organize as described, leveraging local funding and resources with the federal funds appropriated under the McKinney-Vento Homeless Assistance Act, Supportive Housing Programs.

HOPE incorporated its coalition in February 2001, and became an IRS recognized 501(C)3 non-profit organization. HOPE members are actively engaged in a strategic plan to prevent and end homelessness, comprised of over 40 organizations in Northwest Louisiana (11 jurisdictions), predominantly operating in the core community of service in the cities of Shreveport-Bossier City, LA, serving annually over 3,500 persons experiencing homelessness.

V. CoC Governance Structure



VI. HOPE Board of Directors

A. Procedure for Nomination: The Board Nominating Committee shall convene in August to begin creation of a slate of nominees based on the needs of the organization. Board Members will be asked to submit names for nomination. The CoC Planning/Advisory Council will also submit three members for nomination to the Board.

Nominees will be voted in at the October Board Meeting and presented to the Coalition Membership at the Annual Meeting in December. Board terms begin in January.

Pursuant to LRS 12:224(E)(3), the Board of Directors may fill vacancies.

B. Election and Composition: The Board of Directors shall consist of no less than thirteen (13) and no more than twenty-one (21) members in good standing with the corporation, all of whom shall be volunteers and not paid by HOPE Connections. Directors, within the following limitations, shall be elected from and by the Board for three-year terms.

Three (3) positions on the Board shall be designated for individuals representing the CoC Planning/Advisory Council.

At least one (1) position on the Board shall be designated for individuals who are homeless or who have been homeless.

C. Duties and Responsibilities: The Board of Directors shall exercise the powers of the corporation and shall have the final responsibility and authority for all the affairs of HOPE Connections, even though some duties may be delegated to standing, special, and temporary committees.

D. Terms of Office: Individual Board Members may not serve more than two (2) consecutive three (3) year terms without at least one (1) year's absence from the Board, except if serving as President in the sixth year of a term. The Board Member will then remain on the Board to serve as Immediate Past-President, and subject to a maximum of seven (7) years of consecutive service.

E. Meetings: The Board of Directors shall meet at least six (6) times a year at a time and place in Louisiana set by the Board.

Special meetings of the Board may be called by the President of the Board or at the written request of at least three (3) directors.

Absence from three (3) consecutive regular meetings without notice will be considered a voluntary resignation from the Board of Directors.

F. Voting and Quorum: Each Board Member that is entitled to vote may cast votes in person, by e-mail, or by written proxy signed by the member. A quorum of the Board shall be fifty-one percent (51%) of the elected directors.

VII. NWLA CoC Board of Directors

A. Membership: The NWLA CoC Board shall be composed of representatives of Sub-population networks along with an ESG Representative, and homeless/formerly homeless advocates. Sub-Population Networks will select two Co-Chairs to serve on the CoC Board for three year terms to begin in January and end in December. Co-Chair terms must not end in the same year, and Networks have the option to elect a Co-Chair for a second three year term if there is no one available to take the position. Co-Chairs must be paid Coalition Members in good standing. Upon resignation of a Co-Chair, a new representative will be selected by the sub-population network.

B. Sub-Population Networks: The Continuum of Care has established the following Sub-Population Networks. These groups will meet a minimum of four (4) times to form the relationships needed to serve clients effectively and to accomplish the work defined by the Continuum of Care Planning-Advisory Council.

- Emergency Housing/Services Network
- Family & Youth Housing/Services Network
- Behavioral Health Housing/Services Network
- Veterans Housing/Services Network
- Re-entry Services Network
- Medical/Dental Services Network
- Employment/Education/Benefits Services Network
- Homeless Prevention Network

C. Leadership: The CoC Board shall select three (3) representatives to sit on the HOPE Board of Directors. The CoC Board Chairperson will serve as one of these representatives and will also serve on the HOPE Board Executive Committee. Representatives selected for Board membership shall have completed one (1) year of membership on the CoC Planning/Advisory Council prior to membership on the HOPE Board of Directors.

D. Duties and Responsibilities: The CoC Board Members will serve as representatives for their Sub-Population groups in an effort to be as inclusive as possible. The CoC Board will write and carry out all policies and procedures related to the HUD CoC Application process, lead strategic planning for the housing and services system, and assist with determining CoC meeting content.

The NWLA CoC Board will develop and implement an annual satisfaction survey to evaluate the CoC Leadership, HMIS, and CAP. Surveys will be analyzed by the CoC Board and results will be shared with the HOPE Board of Directors and CoC Membership.

CAP and HMIS will be monitored annually by the CoC Board Monitoring Committee using the latest versions of the Coordinated Entry Process Self-Assessment Tool and the HMIS Self-Assessment Survey.

E. Voting and Quorum: Each member is entitled to vote according to Subpopulation-Network category, votes may be cast in person or by email and/or written proxy signed by the CoC Board Member and received prior to the missed vote. A majority of members present of the PAC shall constitute a quorum at a meeting of the PAC.

F. Meetings: The CoC Board shall meet at least eight (8) times a year at a time and place in Louisiana set by the PAC.

Special meetings of the CoC Board may be called by the Chair of the Board or at the written request of at least three (3) representatives.
Absence from three (3) consecutive regular meetings without notice will be considered a voluntary resignation from the CoC Board.

VIII. CoC Membership

A. Coalition Description and Makeup
The coalition members of the Corporation shall consist of individuals, nonprofit agencies, faith-based organizations, community-based organizations or other corporations who contribute annual dues as determined by the Board.

The membership shall be composed of persons representing the diversity of all homeless subpopulations in the community, including:

- nonprofit organizations
- state and local governmental agencies
- housing developers and service providers
- faith-based organizations
- local businesses and the banking community
- neighborhood groups
- homeless and formerly homeless persons

The amount of the dues and the method of collection and/or waivers thereof shall be fixed by the Board of Directors from time to time, as it may deem necessary. All fees will be waived for those currently receiving homeless services.

B. **Categories of Membership:** There shall be two (2) categories of membership in HOPE Connections and they are as follows:

a. **Friend of HOPE Members** are individuals interested in or involved in homeless issues, including current consumers of homeless services.
   - One vote on items presented to the Coalition Membership
   - Eligible for nomination to serve on the CoC Planning Advisory Council or the Board of Directors

b. **Agency/Organization Members** are representatives of Non-Profit, Faith-Based, or Governmental Organizations
   - Two votes on items presented to the Coalition Membership
   - Eligible for nomination to serve on the CoC Planning Advisory Council or the Board of Directors

Unless otherwise noted, the term "Coalition Member" shall include both categories of membership in HOPE Connections.

C. **Meetings, Duties Responsibilities:** The Coalition Members shall meet at least eight (8) times per year in Louisiana. The day, time, and place shall be set by the CoC Board .

IX. Code of Conduct Statement

HOPE Board Members, NWLA CoC Board Members, and/or Coalition Members must disclose personal, professional, and business relationships when making decisions and taking action on items. If there is any real or perceived conflict of interest, the member must recuse herself or himself from voting on or taking action on that item. HOPE Board Members, CoC Board Members, and HOPE employees will sign the Code of Conduct Statement annually.

X. Responsibilities of the CoC Collaborative Applicant

The three major duties of a Continuum of Care, as defined in the HEARTH Act Interim Rule, are to:

"(1) Operate the Continuum of Care
(2) Designate an HMIS for the Continuum of Care
(3) Plan for the Continuum of Care.

The U.S. Department of Housing and Urban Development (HUD) has delineated certain operational requirements of each Continuum to help measure a Continuum's overall performance at reducing homelessness, in addition to tracking of performance on a project-by-project basis. In addition, each Continuum is responsible for establishing and operating a centralized or coordinated assessment system that will provide a comprehensive assessment of the needs of individuals and families for housing and services. HUD has also defined the minimum planning requirements for a Continuum

so that it coordinated and implements a system that meets the needs of the homeless population within its geographic area. Continuums are also responsible for preparing and overseeing an application for funds. Continuum will have to establish the funding priorities for its geographic area when submitting an application."

The CoC primary responsibilities under the HEARTH Act include the following:

A. Operating the CoC

- Hold Meetings – HOPE Connections will hold Homeless Coalition Meetings on the fourth Wednesday of the month at a minimum of eight times per year.
- Annual invitation to new members – Coalition membership is open to any individual or organization as outlined in the membership section of this document and the HOPE Connections By-Laws. Each December, HOPE promotes membership to the entire region and encourages those who are identified as needing to be included to join or attend the meetings.
- Adopt and follow a written process – The NWLA CoC Board is tasked with creating a written process for the activities of the CoC to be approved by the Coalition Members. HOPE Executive Director is responsible for following and guiding the processes.
- Appoint Committees and Working Groups as needed – The NWLA CoC Board will appoint Committees and Working Groups that facilitate the creation of a true system model and overcome barriers to ending homelessness.
- Adopt and follow a Governance Charter – The Governance Charter has been created by the CoC Board and has been approved and adopted by the HOPE Membership.

B. Designating and operating an HMIS

The Continuum of Care is responsible for designating and operating an HMIS and an eligible applicant to manage the HMIS, consistent with the requirements in the HEARTH Act. The HMIS Lead is the eligible applicant designated by the Continuum of Care to carry out the day to day operations of the HMIS. The Continuum of Care membership designated HOPE Connections as the lead agency for the HMIS in 2012.

HOPE will maintain the community's HMIS in compliance with HUD standards and coordinate all related activities including training, maintenance and technical assistance to agencies. Annually, the CoC Board will conduct an HMIS Monitoring and membership survey to assess the effectiveness of the HMIS and provide the results of that survey to the HOPE Board and the CoC Membership.

Please see Attachment I, Statewide LSNDC HMIS Policies and Procedures.

C. Establishing and Operating a Coordinated Assessment System

The Continuum of Care is responsible for designing and operating a Coordinated Assessment Project. HOPE Connections currently operates the Coordinated

Assessment Project (CAP) in coordination with all projects participating in the regional homeless services system. Operations are in compliance with HUD standards and coordinate all related activities including outreach, engagement, assessment, and referral to service providers. Annually, the CoC Board will conduct a CAP Monitoring and membership survey to assess the effectiveness of the project and provide the results of that survey to the HOPE Board and the CoC Membership.

Please see Attachment II, Coordinated Assessment Project Policies and Procedures.

D. Lead Annual Point-in-Time Count

Consistent with HUD requirements, an annual Point-in-Time (PIT) count will be conducted. The HOPE Director of System Outcomes will lead coordination efforts to conduct the count along with volunteers from member agencies and community volunteers. The CoC Board will approve the final report of the annual PIT count and dissemination of the data.

E. HUD CoC Project Monitoring and Technical Assistance

- HOPE Connections staff will monitor all HUD CoC funded programs at least annually utilizing a process and monitoring tool approved by the CoC Board. Monitoring will include a review of client records, facilities inspection, HUD invoicing records, program outcomes, HUD program policies and procedures and HMIS data.
- HOPE Connections staff will also monitor program models and HMIS outcomes of all Emergency Solutions Grant funded projects.
- HOPE Connections staff will provide Technical Assistance as needed to address agency issues. Additionally, HOPE will provide CoC-wide trainings as needed on specific topics of interest to everyone.
- HOPE will also request HUD Technical Assistance when appropriate.

F. HEARTH Act Compliance

- HOPE Connections will ensure that the CoC meets all aspects of HEARTH Act compliance including but not limited to:
- The collaborative applicant documenting and collecting evidence that the CoC board meets the requirements of 24 CFR §578.5(b).
- The collaborative applicant documenting and collecting evidence that the CoC has been established and operated as set forth in Subpart B of the CoC regulations, including published agendas and meeting minutes, an approved governance charter that is reviewed and updated annually, a written process for selecting a board that is reviewed and updated at least once every five years, evidence required for designating a single HMIS for the CoC, and monitoring reports of recipients and sub-recipients.
- The collaborative applicant documenting and collecting evidence that the CoC has prepared the application for funds as set forth in 24 CFR §578.9, including the designation of the eligible applicant to be the collaborative applicant.

G. Annual Continuum of Care Program Application

The Continuum of Care Collaborative Applicant (HOPE Connections) will design, operate, and follow a collaborative process for the development of applications and approval of the submission of applications to the U.S. Department of Housing and Urban Development. The procedures for the competition are as follows:

- The ED of the CoC will submit all required prerequisite submission to HUD leading up to the release of the Annual NOFA. The Grants Inventory Worksheet will be carefully reviewed for accuracy and submitted to HUD with the knowledge that errors on that document could affect funding amounts.
    a. The ED of the CoC will call a meeting of NWLA CoC Board upon notice that the NOFA has been released. The ED, the Director of System Outcomes, and the CoC Board will read the NOFA and create a plan and timeline for the current year's application process, approve the RFP for new and renewal projects, and scoring elements/tool. The ED of the CoC will call a meeting of the New and Renewal Applicants to ensure that all interested applicants have read and understand the expectations of the RFP, scoring elements, and timelines as directed by HUD. The Planning Advisory Board will select members to serve on the Rating and Ranking Committee made up of three people who are knowledgeable about the process and have no conflict of interest with reviewing any of the Applicants.
    b. The ED and the Dir. of System Outcomes of the CoC will prepare the data from all required and/or relevant sources. The committee will score and rank the projects, ensuring that the process is fair, based on measurable, factual information relevant to the HUD NOFA request, and creates the highest possible outcomes for the collaborative portion of the CoC Application. Submission decisions will be posted as required by the HUD NOFA.
    c. The Rating and Ranking Committee will also review and make decisions on new and/or bonus projects that are submitted.
    d. All applicants will be informed whether or not their renewal and/or new projects are accepted for funding submission. Those whose renewals are accepted for submission will be informed of their ranking.
- The CoC staff will be working on the Collaborative portion of the application throughout this process, following the NOFA scoring guide as closely as possible.
- Grantees may appeal their ranking placement, a decision not to submit their renewal, or the selection of a new/bonus project. Grantees will have the opportunity to meet with the Grants Review and Ranking Committee, the CoC ED and any other relevant participants.
- All sections of the HUD CoC Application will be submitted to HUD by the CoC ED with guided review by other CoC staff. The final submission of all parts of the Application will be available for review on the CoC website.

H. Reallocation Process

In cases where a project is not able to correct monitoring deficiencies, clings to an outdated project model, cannot meet HUD performance standards, or the housing type/population served is not shown as "high need"; the CoC Board may vote to reallocate funding to a new project.

The process is as follows:

- All Monitoring findings are presented to the CoC Board Rating and Ranking Committee, as are the corrections to deficiencies found.
- HOPE Monitoring Team provides Technical Assistance or requests HUD Technical Assistance where there is difficulty correcting deficiencies. The CoC Board Rating and Ranking Committee is notified if the agency refuses Technical Assistance.
- The CoC Board Rating and Ranking Committee issues written warning to the agency after a six month period where deficiencies are not corrected. The agency has a last opportunity to correct deficiencies.
- If a project is reallocated by the Planning Advisory Board due to monitoring deficiencies, clings to an outdated project model, or the housing type is not desirable to clients; an RFP will be issued for a reallocated project at the time of the HUD CoC NOFA.
- However, projects can choose to reallocate to better align themselves with HUD goals or to create more appropriate, updated housing options. If an agency chooses reallocation, an RFP will not be issued and the agency can create a new PSH or RR Project.
    - Additionally, the CoC Board Rating and Ranking Committee can choose to reduce the funding amount of low scoring projects to better align housing stock with HUD goals and local needs.

I. Identify gaps of needs and services

Annually, HOPE will conduct a data-driven gaps analysis of needs and services, as well as, conducting a gaps survey to HOPE Coalition Members. This information will be used by the CoC Board Rating and Ranking Committee to prioritize projects in the annual HUD CoC Application. Information will also be passed on the ESG funders to assist in decision making.

J. Other HUD Mandated Activities

- The Continuum of Care will provide feedback to the local government (City/County) on their Consolidated Plan.
- The Continuum of Care will provide feedback to the local government (City/County) regarding Emergency Solutions Grant (ESG) funding. Assisting with determining allocate priorities for the ESG funding for eligible activities.

XI. Responsibilities of the HUD CoC and ESG Funded Agencies

A. HUD Regulation Compliance

a. Follow all regulations in regard to homeless definitions, homeless documentation, disability definitions, and disability documentation.

Please see Attachment III, listing of homeless and disability definitions and documentation requirements adopted by the CoC Board.

b. Follow all Fair Housing and Equal Access Laws and Regulations.

Please see Attachment IV, overview of Fair Housing regulations adopted by the CoC Board relevant to CoC and ESG funded projects.
Please see Attachment V, overview of HUD Equal Access Rule adopted by the CoC Board relevant to CoC and ESG funded projects.

c. Agencies must ensure that all school age children or youth are connected as quickly as possible with a Homeless Program Liaison to ensure that children are able to access all of the things needed to attend the most appropriate school including transportation.
d. Agencies must ensure that families will not be separated from each other regardless of age, gender, etc.
e. CoC funded leasing or congregate housing programs must enter into a lease or occupancy agreement with tenants that does not include requirements beyond what would normally be issued by a landlord. Projects that utilize rental assistance will assist clients to locate housing that will allow leases in the participant's name regardless of rental history or criminal history. The lease agreement must observe Fair Housing Act regulations. All CoC and ESG funded housing projects are expected to complete the Rent Calculation Worksheet with every participant and utilize the results to determine participant rent amounts. If the participant has zero income, the participants are not required to pay rent, but their supportive services partner is expected to work with them to secure income (either earned or unearned) as soon as possible. In no circumstance can a tenant be charged an amount above the Rent Reasonableness standard established by HUD.
f. Attend all mandatory trainings provided by HUD New Orleans and/or HOPE Connections that provide education on HUD Regulations and Rules.

B. Coordinated Access Point Participation

a. All HUD CoC and ESG funded grantees/agencies are required to use HOPE Connections as the Coordinated Access Point for entry into the homeless system for the purpose of maintaining a single, prioritized waiting list using only severity of needs to determine order of priority.
b. Agencies agree to refer clients experiencing homelessness to HOPE Connections for an assessment or the street outreach team will provide mobile assessments for those who are unable to access HOPE Connections.

c. Further, agencies agree not to use HUD CoC and/or ESG Rapid Rehousing funds for any client that has not been assessed using the VI-SPDAT by Coordinated Access Point staff or the HOPE Street Outreach Team.

C. Housing Placement Prioritization

All HUD CoC and ESG funded grantees/agencies agree to place clients into recommended housing types according to policies and procedures which clearly outline HUD's expectations for the way clients will be prioritized into housing and ensure that those most vulnerable persons experiencing homelessness will be prioritized into housing first

Please see Attachment VI, HUD Notice CPD 16-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supportive Housing, adopted by the CoC Board.

Since, the VI-SPDAT is self-reported data, clinicians have the option to override the score if they are aware of issues that were not reported or misinformation was reported. Any override must be carefully documented in the HMIS System. Below, is an excerpt from the full Notice.

a. **First Priority–Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs**
An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

b. **Second Priority–Homeless Individuals and Families with a Disability with Severe Service Needs.**
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

c. **Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.**
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

d. Fourth Priority–Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

D. LA Statewide Housing First Definition

A Housing First homeless service program quickly moves participants into permanent housing without mandatory pre-conditions. They accept referrals from the Coordinated Entry system including shelters, street outreach, drop-in centers, etc. Service plans are tenant driven and without predetermined goals. Available units or beds are filled using a prioritization process based on vulnerability or duration/chronicity of homelessness. At a minimum, clients have a choice in housing and have the same tenancy rights as non-assisted renters.

Projects do not screen out for the following reasons:

- Too little or no income or lack of savings
- Poor credit or financial history
- Lack of rental history
- Active or history of substance abuse
- Completion of treatment for substance abuse
- Participation in services
- Having a criminal record with exceptions for state-mandated restrictions
- History of domestic violence (e.g. lack of a protective order, period of separation from abuser, or law enforcement involvement)
- Any other exclusion determined by the CoC Board

Projects do not terminate participants for the following reasons:

- Failure to participate in supportive services (RRH may require case management)
- Failure to make progress on a service plan
- Loss of income or failure to improve income
- Being a victim of domestic violence
- Use of alcohol or drugs in and of itself without other lease violations
- Any other activity not covered in a lease agreement typically found in the project's geographic area
- Any other exclusion determined by the CoC Board

Although clients may be required to pay a portion of their income towards rent, programs give tenants flexibility in paying their share of rent. Case managers use client-centered, housing-based case management and assertive engagement techniques, services use a harm-reduction approach, and buildings and apartment units accommodate disabilities and harm reduction. Eviction does not necessitate program termination. Practices and policies help prevent lease violations and mitigate evictions. All efforts are made to keep people in housing, including rehousing within programs.

*Ma Maison, Statewide Definition of Housing First, version 1.0 approved by the Homelessness Working Group March 24, 2017

E. **Written process for Termination of Assistance**

All programs that offer housing assistance to individuals or families funded by HUD CoC and ESG must provide a written explanation of a tenant's rights and responsibilities that includes an explanation of program requirements and the consequences and appeal process should a violation occur. The violation notification must be provided in writing to the participant allowing a minimum of three (3) days for the participant to make other arrangements.

Any client residing in CoC funded housing who is at imminent risk of involuntary termination from housing and/or the program must bring the issue before the Housing Placement Committee meeting to determine any possible resolution other than terminating the client into homelessness. Where possible, this group will assist the presenting agency with solutions up to and including relocating the client to permanent housing at a different agency.

Participants must be notified that they may file a grievance to the HOPE Connections CoC Board. Prior to filing a grievance with the CoC Board, the participant must complete the agency's internal grievance process. The CoC Board will form a Grievance Committee comprised of three (3) members, including (1) peer to hear and address participant grievances to ensure that participants and agencies are protected.

F. CoC Participation

- HUD CoC Funded Agencies will pay a 3% Fee for Service to the Collaborative Applicant on each grant subtotal, not including admin amount. This Fee will be billed monthly by the Collaborative Applicant.
- HUD ESG and CoC Funded Agencies will have at least one employee attend 80% of HOPE CoC membership meetings
- HUD ESG and CoC Funded Agencies will comply with the HMIS agreement. Please see **Attachment II** for a full description of requirements and regulations.

LA-502 CoC, HOPE Connections, Northwest Louisiana

Documentation of Notification to Applicants of Acceptance and Ranking

From: Christa Pazzaglia [mailto:christa@nwlahope.org]
Sent: Friday, September 7, 2018 5:23 PM
To: 'Youth Outreach Services' <info.youthoutreach@gmail.com>; 'northwestlacdc@gmail.com' <northwestlacdc@gmail.com>; 'saccpci@gmail.com' <saccpci@gmail.com>; 'carissamccormick@gmail.com' <carissamccormick@gmail.com>; 'mitzi945@aol.com' <mitzi945@aol.com>; Pittre Walker <pwalker@caddoschools.org>; Wanda Brandon <wanda.Brandon@aol.com>; 'Bobby Collins' <brcollins@shvhousauth.com>; 'Chris Miciotto' <chrism@philadelphiacenter.org>; 'Colette Sikes' <colettes@shvhousauth.com>; 'David Bennett' <dbennett@laeasterseals.com>; 'Hershey Krippendorf' <hkrippendorf@philadelphiacenter.org>; 'Latoya White' <lwhite@philadelphiacenter.org>; 'Linda Jarrell' <Linda.Jarrell@voanorthla.org>; 'Lisa Haulmark' <lhaulmark@nwlahope.org>; 'Michelle Cheatham' <mcheatham@nwlahope.org>; 'Pam Mills' <pmills@thehabc.org>; 'Tiwana Harris' <tharris@cspla.org>; 'Tosha Stamps' <tstamps@nwlahope.org>; 'Veronica Glover' <vglover@cspla.org>; 'Yulonda Lane' <ylane@nwlahope.org>
Cc: Deanna Alexander <dalexander@goodwillnla.org>; Carl Piehl <cpiehl@ccnla.org>; Noel Haacker <noelhaacker@yahoo.com>
Subject: HUD CoC Project Rating/Ranking/Award Announcement
Importance: High

Thank you all for your hard work in submitting new and renewal applications for the FY 2018 HUD CoC Competition. The NWLA CoC Board Rating/Ranking Committee met for over three hours today, and we owe them an incredible debt for poring over tedious data to make difficult decisions.

The Rating/Ranking Committee decided not to submit an application to HUD for the RRH Youth Bonus Project this year. The RRH Domestic Violence Bonus Project has been preliminarily awarded to Project Celebration pending the application being funded by HUD.

HOPE connections

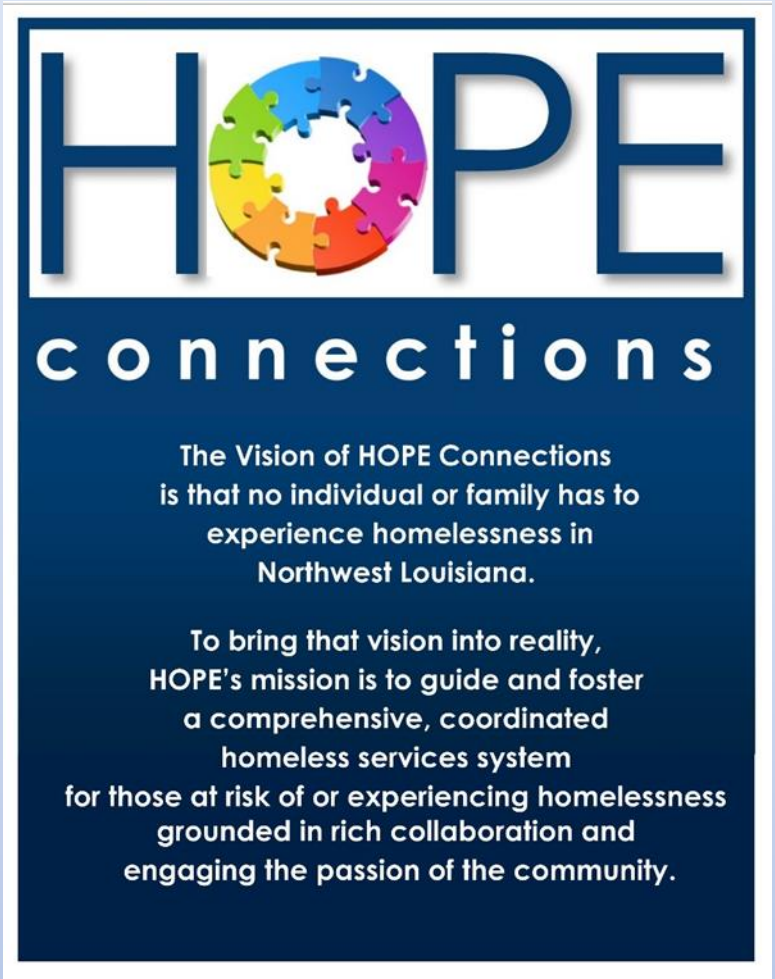
HUD Continuum of Care Competition
FY 2018 Project Rating and Ranking

- All projects were rated and ranked by the NWLA CoC Board Rating/Ranking Committee using the HUD Issued Project Rating and Ranking Tool.
- Scoring was comprised of performance measures, determination of serving high-needs populations, project effectiveness, and results of the client questionnaire.
- Data input for the report was pulled from the 2018 Housing Inventory Count, HMIS Exit Destination Outcomes Report, HMIS Project APRs run for the 2017 calendar year, 2017 Data Completeness Report Card, Housing First Client Surveys, and Project Cost Effectiveness Spreadsheet.

Ranking #	Agency Name	Program Name	Grant Amount
1	HOPE Connections	Coordinated Access Point	$127,585
2	HOPE Connections	NWLA HMIS Project	$70,499
3	Community Support Programs	Center for Women's Issues	$367,729
4	Volunteers of America NL	GAPS	$389,708
5	Easter Seals Louisiana	Pathways to Independence	$235,774
6	Easter Seals Louisiana	Intensive Community Engagement	$299,214
7	Volunteers of America NL	SHOC	$648,828
8	Philadelphia Center	Mercy Center	$181,005
9	Housing Authority of Bossier City	Harbor I	$733,928
10	Community Support Programs	REACH II	$531,439
11	Community Support Programs	Crossroads II	$340,193
12	Project Celebration	Domestic Violence Bonus Project	$194,091

Thank you to the Rating/Ranking Committee for their commitment to transparency and data-based scoring. And, it is an incredible testament to the quality of HUD CoC Housing in our region to announce that the scores ranged from 95.56% to 82.78% out of 100%. Our region has never had such a close range of high scores.

For the FY 2018 HUD CoC Competition, there were no projects reject or reduced in the LA-502 CoC, HOPE Connections in Northwest Louisiana.



Governance Charter and Operating Policies of the Housing Crisis Continuum of Care

Approved July 2014
Revised Section XI. B. and C., October 21,2015
Revised Section V., VII. B., April 2016
Revised Section XI. D., E. & G., July 2017
Revised Section VII. A. January 2018
Entire Document Reviewed and Updated, August 2018

Table of Contents

I. Purpose of Governance Charter 3

II. Review of Charter 3

III. Purpose and Overview of the Continuum of Care 3

IV. History of HOPE Connections 4

V. CoC Governance Structure 4

VI. HOPE Board of Directors. 5

VII. NWLA CoC Board 6

VIII. CoC Membership 7

IX. Code of Conduct Statement 8

X. Responsibilities of the CoC Collaborative Applicant 8

XI. Responsibilities of HUD CoC and ESG Funded Agencies 10

I. Purpose of Governance Charter

This Charter identifies the purpose, history, composition, governance structure, responsibilities, and policies of the HOPE Connections Continuum of Care.

II. Review of Charter

The Northwest Louisiana CoC Board will review this charter annually to ensure it remains consistent with the objectives and responsibilities of the CoC in accordance with the HEARTH Act and HUD regulations.

III. Purpose and Overview of the Continuum of Care

The purpose of the Continuum of Care, as defined in the HEARTH Act Interim Rule, is to "promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effective utilization of mainstream programs by homeless individuals and families; and optimize self- sufficiency among individuals and families experiencing homelessness."

The homeless services system in Northwest Louisiana is composed of coordinated access point, street outreach team, drop-in center, emergency shelter, transitional housing, permanent supportive housing for disabled persons, permanent housing, rapid rehousing, homeless prevention, supportive services, and HMIS.

The HOPE Connections Continuum of Care will have a Board of Directors that governs the agency and a CoC Board that governs the homeless system, Sub-Population Networks consisting of CoC members, and an Executive Director to accomplish the responsibilities of the Continuum of Care, as defined in the HEARTH Act Interim Rule. HOPE may also have additional programming that provide services directly to the member agencies of the CoC or that connects clients to the agencies of the CoC.

HOPE currently serves as the Collaborative Applicant in the CoC Application Process and the HMIS Lead Agency. Additionally, HOPE serves as the "Front Door" to the system by operating the Coordinated Access Point, Street Outreach Services, Day Shelter Services, and managing the homeless one-stop for the region.

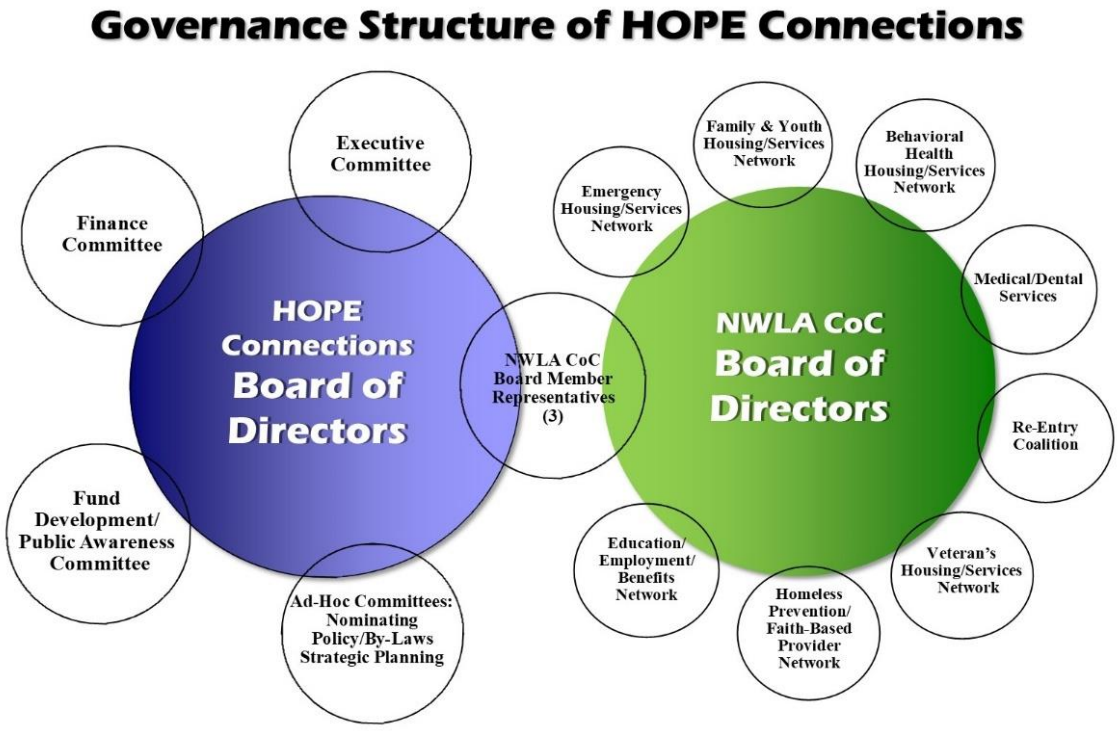
HOPE Continuum of Care Members voted in 2012 to pursue becoming a Unified Funding Agency. HOPE is currently creating the infrastructure to adequately take on this role.

IV. History of HOPE Connections

HOPE is the result of years of dedicated volunteers who strived to convene funding, policies, missions, resources, and organizations among diverse public, private, non-profit, and faith-based entities working together on a common objective within our community. A coalition established in the mid 1980's, foundationally from a vision to prevent and end homelessness in our Northwest Louisiana Region. In 1994, HUD introduced a formalized model of "grant funding and supportive services" – a Continuum of Care. These Continuums of Care would organize as described, leveraging local funding and resources with the federal funds appropriated under the McKinney-Vento Homeless Assistance Act, Supportive Housing Programs.

HOPE incorporated its coalition in February 2001, and became an IRS recognized 501(C)3 non-profit organization. HOPE members are actively engaged in a strategic plan to prevent and end homelessness, comprised of over 40 organizations in Northwest Louisiana (11 jurisdictions), predominantly operating in the core community of service in the cities of Shreveport-Bossier City, LA, serving annually over 3,500 persons experiencing homelessness.

V. CoC Governance Structure



VI. HOPE Board of Directors

A. Procedure for Nomination: The Board Nominating Committee shall convene in August to begin creation of a slate of nominees based on the needs of the organization. Board Members will be asked to submit names for nomination. The CoC Planning/Advisory Council will also submit three members for nomination to the Board.

Nominees will be voted in at the October Board Meeting and presented to the Coalition Membership at the Annual Meeting in December. Board terms begin in January.

Pursuant to LRS 12:224(E)(3), the Board of Directors may fill vacancies.

B. Election and Composition: The Board of Directors shall consist of no less than thirteen (13) and no more than twenty-one (21) members in good standing with the corporation, all of whom shall be volunteers and not paid by HOPE Connections. Directors, within the following limitations, shall be elected from and by the Board for three-year terms.

Three (3) positions on the Board shall be designated for individuals representing the CoC Planning/Advisory Council.

At least one (1) position on the Board shall be designated for individuals who are homeless or who have been homeless.

C. Duties and Responsibilities: The Board of Directors shall exercise the powers of the corporation and shall have the final responsibility and authority for all the affairs of HOPE Connections, even though some duties may be delegated to standing, special, and temporary committees.

D. Terms of Office: Individual Board Members may not serve more than two (2) consecutive three (3) year terms without at least one (1) year's absence from the Board, except if serving as President in the sixth year of a term. The Board Member will then remain on the Board to serve as Immediate Past-President, and subject to a maximum of seven (7) years of consecutive service.

E. Meetings: The Board of Directors shall meet at least six (6) times a year at a time and place in Louisiana set by the Board.

Special meetings of the Board may be called by the President of the Board or at the written request of at least three (3) directors.

Absence from three (3) consecutive regular meetings without notice will be considered a voluntary resignation from the Board of Directors.

F. Voting and Quorum: Each Board Member that is entitled to vote may cast votes in person, by e-mail, or by written proxy signed by the member. A quorum of the Board shall be fifty-one percent (51%) of the elected directors.

VII. NWLA CoC Board of Directors

A. Membership: The NWLA CoC Board shall be composed of representatives of Sub-population networks along with an ESG Representative, and homeless/formerly homeless advocates. Sub-Population Networks will select two Co-Chairs to serve on the CoC Board for three year terms to begin in January and end in December. Co-Chair terms must not end in the same year, and Networks have the option to elect a Co-Chair for a second three year term if there is no one available to take the position. Co-Chairs must be paid Coalition Members in good standing. Upon resignation of a Co-Chair, a new representative will be selected by the sub-population network.

B. Sub-Population Networks: The Continuum of Care has established the following Sub-Population Networks. These groups will meet a minimum of four (4) times to form the relationships needed to serve clients effectively and to accomplish the work defined by the Continuum of Care Planning-Advisory Council.

- Emergency Housing/Services Network
- Family & Youth Housing/Services Network
- Behavioral Health Housing/Services Network
- Veterans Housing/Services Network
- Re-entry Services Network
- Medical/Dental Services Network
- Employment/Education/Benefits Services Network
- Homeless Prevention Network

C. Leadership: The CoC Board shall select three (3) representatives to sit on the HOPE Board of Directors. The CoC Board Chairperson will serve as one of these representatives and will also serve on the HOPE Board Executive Committee. Representatives selected for Board membership shall have completed one (1) year of membership on the CoC Planning/Advisory Council prior to membership on the HOPE Board of Directors.

D. Duties and Responsibilities: The CoC Board Members will serve as representatives for their Sub-Population groups in an effort to be as inclusive as possible. The CoC Board will write and carry out all policies and procedures related to the HUD CoC Application process, lead strategic planning for the housing and services system, and assist with determining CoC meeting content.

The NWLA CoC Board will develop and implement an annual satisfaction survey to evaluate the CoC Leadership, HMIS, and CAP. Surveys will be analyzed by the CoC Board and results will be shared with the HOPE Board of Directors and CoC Membership.

CAP and HMIS will be monitored annually by the CoC Board Monitoring Committee using the latest versions of the Coordinated Entry Process Self-Assessment Tool and the HMIS Self-Assessment Survey.

E. Voting and Quorum: Each member is entitled to vote according to Subpopulation-Network category, votes may be cast in person or by email and/or written proxy signed by the CoC Board Member and received prior to the missed vote. A majority of members present of the PAC shall constitute a quorum at a meeting of the PAC.

F. Meetings: The CoC Board shall meet at least eight (8) times a year at a time and place in Louisiana set by the PAC.

Special meetings of the CoC Board may be called by the Chair of the Board or at the written request of at least three (3) representatives.
Absence from three (3) consecutive regular meetings without notice will be considered a voluntary resignation from the CoC Board.

VIII. CoC Membership

A. Coalition Description and Makeup
The coalition members of the Corporation shall consist of individuals, nonprofit agencies, faith-based organizations, community-based organizations or other corporations who contribute annual dues as determined by the Board.

The membership shall be composed of persons representing the diversity of all homeless subpopulations in the community, including:

- nonprofit organizations
- state and local governmental agencies
- housing developers and service providers
- faith-based organizations
- local businesses and the banking community
- neighborhood groups
- homeless and formerly homeless persons

The amount of the dues and the method of collection and/or waivers thereof shall be fixed by the Board of Directors from time to time, as it may deem necessary. All fees will be waived for those currently receiving homeless services.

B. **Categories of Membership:** There shall be two (2) categories of membership in HOPE Connections and they are as follows:

a. **Friend of HOPE Members** are individuals interested in or involved in homeless issues, including current consumers of homeless services.
   - One vote on items presented to the Coalition Membership
   - Eligible for nomination to serve on the CoC Planning Advisory Council or the Board of Directors

b. **Agency/Organization Members** are representatives of Non-Profit, Faith-Based, or Governmental Organizations
   - Two votes on items presented to the Coalition Membership
   - Eligible for nomination to serve on the CoC Planning Advisory Council or the Board of Directors

Unless otherwise noted, the term "Coalition Member" shall include both categories of membership in HOPE Connections.

C. **Meetings, Duties Responsibilities:** The Coalition Members shall meet at least eight (8) times per year in Louisiana. The day, time, and place shall be set by the CoC Board .

IX. Code of Conduct Statement

HOPE Board Members, NWLA CoC Board Members, and/or Coalition Members must disclose personal, professional, and business relationships when making decisions and taking action on items. If there is any real or perceived conflict of interest, the member must recuse herself or himself from voting on or taking action on that item. HOPE Board Members, CoC Board Members, and HOPE employees will sign the Code of Conduct Statement annually.

X. Responsibilities of the CoC Collaborative Applicant

The three major duties of a Continuum of Care, as defined in the HEARTH Act Interim Rule, are to:

"(1) Operate the Continuum of Care
(2) Designate an HMIS for the Continuum of Care
(3) Plan for the Continuum of Care.

The U.S. Department of Housing and Urban Development (HUD) has delineated certain operational requirements of each Continuum to help measure a Continuum's overall performance at reducing homelessness, in addition to tracking of performance on a project-by-project basis. In addition, each Continuum is responsible for establishing and operating a centralized or coordinated assessment system that will provide a comprehensive assessment of the needs of individuals and families for housing and services. HUD has also defined the minimum planning requirements for a Continuum

so that it coordinated and implements a system that meets the needs of the homeless population within its geographic area. Continuums are also responsible for preparing and overseeing an application for funds. Continuum will have to establish the funding priorities for its geographic area when submitting an application."

The CoC primary responsibilities under the HEARTH Act include the following:

A. Operating the CoC

- Hold Meetings – HOPE Connections will hold Homeless Coalition Meetings on the fourth Wednesday of the month at a minimum of eight times per year.
- Annual invitation to new members – Coalition membership is open to any individual or organization as outlined in the membership section of this document and the HOPE Connections By-Laws. Each December, HOPE promotes membership to the entire region and encourages those who are identified as needing to be included to join or attend the meetings.
- Adopt and follow a written process – The NWLA CoC Board is tasked with creating a written process for the activities of the CoC to be approved by the Coalition Members. HOPE Executive Director is responsible for following and guiding the processes.
- Appoint Committees and Working Groups as needed – The NWLA CoC Board will appoint Committees and Working Groups that facilitate the creation of a true system model and overcome barriers to ending homelessness.
- Adopt and follow a Governance Charter – The Governance Charter has been created by the CoC Board and has been approved and adopted by the HOPE Membership.

B. Designating and operating an HMIS

The Continuum of Care is responsible for designating and operating an HMIS and an eligible applicant to manage the HMIS, consistent with the requirements in the HEARTH Act. The HMIS Lead is the eligible applicant designated by the Continuum of Care to carry out the day to day operations of the HMIS. The Continuum of Care membership designated HOPE Connections as the lead agency for the HMIS in 2012.

HOPE will maintain the community's HMIS in compliance with HUD standards and coordinate all related activities including training, maintenance and technical assistance to agencies. Annually, the CoC Board will conduct an HMIS Monitoring and membership survey to assess the effectiveness of the HMIS and provide the results of that survey to the HOPE Board and the CoC Membership.

Please see Attachment I, Statewide LSNDC HMIS Policies and Procedures.

C. Establishing and Operating a Coordinated Assessment System

The Continuum of Care is responsible for designing and operating a Coordinated Assessment Project. HOPE Connections currently operates the Coordinated

Assessment Project (CAP) in coordination with all projects participating in the regional homeless services system. Operations are in compliance with HUD standards and coordinate all related activities including outreach, engagement, assessment, and referral to service providers. Annually, the CoC Board will conduct a CAP Monitoring and membership survey to assess the effectiveness of the project and provide the results of that survey to the HOPE Board and the CoC Membership.

Please see Attachment II, Coordinated Assessment Project Policies and Procedures.

D. Lead Annual Point-in-Time Count

Consistent with HUD requirements, an annual Point-in-Time (PIT) count will be conducted. The HOPE Director of System Outcomes will lead coordination efforts to conduct the count along with volunteers from member agencies and community volunteers. The CoC Board will approve the final report of the annual PIT count and dissemination of the data.

E. HUD CoC Project Monitoring and Technical Assistance

- HOPE Connections staff will monitor all HUD CoC funded programs at least annually utilizing a process and monitoring tool approved by the CoC Board. Monitoring will include a review of client records, facilities inspection, HUD invoicing records, program outcomes, HUD program policies and procedures and HMIS data.
- HOPE Connections staff will also monitor program models and HMIS outcomes of all Emergency Solutions Grant funded projects.
- HOPE Connections staff will provide Technical Assistance as needed to address agency issues. Additionally, HOPE will provide CoC-wide trainings as needed on specific topics of interest to everyone.
- HOPE will also request HUD Technical Assistance when appropriate.

F. HEARTH Act Compliance

- HOPE Connections will ensure that the CoC meets all aspects of HEARTH Act compliance including but not limited to:
- The collaborative applicant documenting and collecting evidence that the CoC board meets the requirements of 24 CFR §578.5(b).
- The collaborative applicant documenting and collecting evidence that the CoC has been established and operated as set forth in Subpart B of the CoC regulations, including published agendas and meeting minutes, an approved governance charter that is reviewed and updated annually, a written process for selecting a board that is reviewed and updated at least once every five years, evidence required for designating a single HMIS for the CoC, and monitoring reports of recipients and sub-recipients.
- The collaborative applicant documenting and collecting evidence that the CoC has prepared the application for funds as set forth in 24 CFR §578.9, including the designation of the eligible applicant to be the collaborative applicant.

G. Annual Continuum of Care Program Application

The Continuum of Care Collaborative Applicant (HOPE Connections) will design, operate, and follow a collaborative process for the development of applications and approval of the submission of applications to the U.S. Department of Housing and Urban Development. The procedures for the competition are as follows:

- The ED of the CoC will submit all required prerequisite submission to HUD leading up to the release of the Annual NOFA. The Grants Inventory Worksheet will be carefully reviewed for accuracy and submitted to HUD with the knowledge that errors on that document could affect funding amounts.
    a. The ED of the CoC will call a meeting of NWLA CoC Board upon notice that the NOFA has been released. The ED, the Director of System Outcomes, and the CoC Board will read the NOFA and create a plan and timeline for the current year's application process, approve the RFP for new and renewal projects, and scoring elements/tool. The ED of the CoC will call a meeting of the New and Renewal Applicants to ensure that all interested applicants have read and understand the expectations of the RFP, scoring elements, and timelines as directed by HUD. The Planning Advisory Board will select members to serve on the Rating and Ranking Committee made up of three people who are knowledgeable about the process and have no conflict of interest with reviewing any of the Applicants.
    b. The ED and the Dir. of System Outcomes of the CoC will prepare the data from all required and/or relevant sources. The committee will score and rank the projects, ensuring that the process is fair, based on measurable, factual information relevant to the HUD NOFA request, and creates the highest possible outcomes for the collaborative portion of the CoC Application. Submission decisions will be posted as required by the HUD NOFA.
    c. The Rating and Ranking Committee will also review and make decisions on new and/or bonus projects that are submitted.
    d. All applicants will be informed whether or not their renewal and/or new projects are accepted for funding submission. Those whose renewals are accepted for submission will be informed of their ranking.
- The CoC staff will be working on the Collaborative portion of the application throughout this process, following the NOFA scoring guide as closely as possible.
- Grantees may appeal their ranking placement, a decision not to submit their renewal, or the selection of a new/bonus project. Grantees will have the opportunity to meet with the Grants Review and Ranking Committee, the CoC ED and any other relevant participants.
- All sections of the HUD CoC Application will be submitted to HUD by the CoC ED with guided review by other CoC staff. The final submission of all parts of the Application will be available for review on the CoC website.

H. Reallocation Process

In cases where a project is not able to correct monitoring deficiencies, clings to an outdated project model, cannot meet HUD performance standards, or the housing type/population served is not shown as "high need"; the CoC Board may vote to reallocate funding to a new project.

The process is as follows:

- All Monitoring findings are presented to the CoC Board Rating and Ranking Committee, as are the corrections to deficiencies found.
- HOPE Monitoring Team provides Technical Assistance or requests HUD Technical Assistance where there is difficulty correcting deficiencies. The CoC Board Rating and Ranking Committee is notified if the agency refuses Technical Assistance.
- The CoC Board Rating and Ranking Committee issues written warning to the agency after a six month period where deficiencies are not corrected. The agency has a last opportunity to correct deficiencies.
- If a project is reallocated by the Planning Advisory Board due to monitoring deficiencies, clings to an outdated project model, or the housing type is not desirable to clients; an RFP will be issued for a reallocated project at the time of the HUD CoC NOFA.
- However, projects can choose to reallocate to better align themselves with HUD goals or to create more appropriate, updated housing options. If an agency chooses reallocation, an RFP will not be issued and the agency can create a new PSH or RR Project.
    - Additionally, the CoC Board Rating and Ranking Committee can choose to reduce the funding amount of low scoring projects to better align housing stock with HUD goals and local needs.

I. Identify gaps of needs and services

Annually, HOPE will conduct a data-driven gaps analysis of needs and services, as well as, conducting a gaps survey to HOPE Coalition Members. This information will be used by the CoC Board Rating and Ranking Committee to prioritize projects in the annual HUD CoC Application. Information will also be passed on the ESG funders to assist in decision making.

J. Other HUD Mandated Activities

- The Continuum of Care will provide feedback to the local government (City/County) on their Consolidated Plan.
- The Continuum of Care will provide feedback to the local government (City/County) regarding Emergency Solutions Grant (ESG) funding. Assisting with determining allocate priorities for the ESG funding for eligible activities.

XI. Responsibilities of the HUD CoC and ESG Funded Agencies

A. HUD Regulation Compliance

a. Follow all regulations in regard to homeless definitions, homeless documentation, disability definitions, and disability documentation.

Please see Attachment III, listing of homeless and disability definitions and documentation requirements adopted by the CoC Board.

b. Follow all Fair Housing and Equal Access Laws and Regulations.

Please see Attachment IV, overview of Fair Housing regulations adopted by the CoC Board relevant to CoC and ESG funded projects.
Please see Attachment V, overview of HUD Equal Access Rule adopted by the CoC Board relevant to CoC and ESG funded projects.

c. Agencies must ensure that all school age children or youth are connected as quickly as possible with a Homeless Program Liaison to ensure that children are able to access all of the things needed to attend the most appropriate school including transportation.
d. Agencies must ensure that families will not be separated from each other regardless of age, gender, etc.
e. CoC funded leasing or congregate housing programs must enter into a lease or occupancy agreement with tenants that does not include requirements beyond what would normally be issued by a landlord. Projects that utilize rental assistance will assist clients to locate housing that will allow leases in the participant's name regardless of rental history or criminal history. The lease agreement must observe Fair Housing Act regulations. All CoC and ESG funded housing projects are expected to complete the Rent Calculation Worksheet with every participant and utilize the results to determine participant rent amounts. If the participant has zero income, the participants are not required to pay rent, but their supportive services partner is expected to work with them to secure income (either earned or unearned) as soon as possible. In no circumstance can a tenant be charged an amount above the Rent Reasonableness standard established by HUD.
f. Attend all mandatory trainings provided by HUD New Orleans and/or HOPE Connections that provide education on HUD Regulations and Rules.

B. Coordinated Access Point Participation

a. All HUD CoC and ESG funded grantees/agencies are required to use HOPE Connections as the Coordinated Access Point for entry into the homeless system for the purpose of maintaining a single, prioritized waiting list using only severity of needs to determine order of priority.
b. Agencies agree to refer clients experiencing homelessness to HOPE Connections for an assessment or the street outreach team will provide mobile assessments for those who are unable to access HOPE Connections.

c. Further, agencies agree not to use HUD CoC and/or ESG Rapid Rehousing funds for any client that has not been assessed using the VI-SPDAT by Coordinated Access Point staff or the HOPE Street Outreach Team.

C. Housing Placement Prioritization

All HUD CoC and ESG funded grantees/agencies agree to place clients into recommended housing types according to policies and procedures which clearly outline HUD's expectations for the way clients will be prioritized into housing and ensure that those most vulnerable persons experiencing homelessness will be prioritized into housing first

Please see Attachment VI, HUD Notice CPD 16-11, Notice on Prioritizing Persons Experiencing Chronic Homelessness and other Vulnerable Homeless Persons in Permanent Supportive Housing, adopted by the CoC Board.

Since, the VI-SPDAT is self-reported data, clinicians have the option to override the score if they are aware of issues that were not reported or misinformation was reported. Any override must be carefully documented in the HMIS System. Below, is an excerpt from the full Notice.

a. **First Priority–Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs**
An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

b. **Second Priority–Homeless Individuals and Families with a Disability with Severe Service Needs.**
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

c. **Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.**
An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

d. Fourth Priority–Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

D. LA Statewide Housing First Definition

A Housing First homeless service program quickly moves participants into permanent housing without mandatory pre-conditions. They accept referrals from the Coordinated Entry system including shelters, street outreach, drop-in centers, etc. Service plans are tenant driven and without predetermined goals. Available units or beds are filled using a prioritization process based on vulnerability or duration/chronicity of homelessness. At a minimum, clients have a choice in housing and have the same tenancy rights as non-assisted renters.

Projects do not screen out for the following reasons:

- Too little or no income or lack of savings
- Poor credit or financial history
- Lack of rental history
- Active or history of substance abuse
- Completion of treatment for substance abuse
- Participation in services
- Having a criminal record with exceptions for state-mandated restrictions
- History of domestic violence (e.g. lack of a protective order, period of separation from abuser, or law enforcement involvement)
- Any other exclusion determined by the CoC Board

Projects do not terminate participants for the following reasons:

- Failure to participate in supportive services (RRH may require case management)
- Failure to make progress on a service plan
- Loss of income or failure to improve income
- Being a victim of domestic violence
- Use of alcohol or drugs in and of itself without other lease violations
- Any other activity not covered in a lease agreement typically found in the project's geographic area
- Any other exclusion determined by the CoC Board

Although clients may be required to pay a portion of their income towards rent, programs give tenants flexibility in paying their share of rent. Case managers use client-centered, housing-based case management and assertive engagement techniques, services use a harm-reduction approach, and buildings and apartment units accommodate disabilities and harm reduction. Eviction does not necessitate program termination. Practices and policies help prevent lease violations and mitigate evictions. All efforts are made to keep people in housing, including rehousing within programs.

*Ma Maison, Statewide Definition of Housing First, version 1.0 approved by the Homelessness Working Group March 24, 2017

E. **Written process for Termination of Assistance**

All programs that offer housing assistance to individuals or families funded by HUD CoC and ESG must provide a written explanation of a tenant's rights and responsibilities that includes an explanation of program requirements and the consequences and appeal process should a violation occur. The violation notification must be provided in writing to the participant allowing a minimum of three (3) days for the participant to make other arrangements.

Any client residing in CoC funded housing who is at imminent risk of involuntary termination from housing and/or the program must bring the issue before the Housing Placement Committee meeting to determine any possible resolution other than terminating the client into homelessness. Where possible, this group will assist the presenting agency with solutions up to and including relocating the client to permanent housing at a different agency.

Participants must be notified that they may file a grievance to the HOPE Connections CoC Board. Prior to filing a grievance with the CoC Board, the participant must complete the agency's internal grievance process. The CoC Board will form a Grievance Committee comprised of three (3) members, including (1) peer to hear and address participant grievances to ensure that participants and agencies are protected.

F. CoC Participation

- HUD CoC Funded Agencies will pay a 3% Fee for Service to the Collaborative Applicant on each grant subtotal, not including admin amount. This Fee will be billed monthly by the Collaborative Applicant.
- HUD ESG and CoC Funded Agencies will have at least one employee attend 80% of HOPE CoC membership meetings
- HUD ESG and CoC Funded Agencies will comply with the HMIS agreement. Please see **Attachment II** for a full description of requirements and regulations.

CoC Governance Charter

Attachment I

LSNDC HMIS

Policies and Procedures

Louisiana Services Network Data Consortium (LSNDC)

Standard Policies and Procedures

Version 2.0

Effective Date:
October 1, 2017

Developed by:
LSNDC Policy Committee

Adopted by:
LSNDC Board of Directors
On September 20, 2017

Louisiana Services Network Data Consortium (LSNDC)
Standard Policies and Procedures
Table of Contents

Introduction……**ii**

Benefits of LSNDC System……..**iii**

Definitions……**iv**

Policy 1.0 Organization and Management of the LSNDC System……..…..**1**

Policy 1.1 LSNDC Board of Directors…….……..……**1**

Policy 1.2 Fiscal Management…..……..…….**2**

Policy 1.3 LSNDC State System Administrator Lead Organization……..……**3**

Policy 1.4 State LSNDC System Administrator……..…….……**3**

Policy 1.5 Regional Lead Agency Operating LSNDC Locally……..……**4**

Policy 1.6 Regional LSNDC System Administrator……..…….……**5**

Policy 1.7 Participating Agency……..…….……**6**

Policy 1.8 Agency Administrator……..…….……..**7**

Policy 1.9 LSNDC User……..…….……..……**8**

Policy 1.10 HMIS Software Vendor……..…….……..……**9**

Appendix A LSNDC Board Membership List (Effective 9/20/2017)……..……...**10**

Appendix B LSNDC Data Quality Plan, v2.0 (Effective 10/1/2017)……..……**11**

Appendix C LSNDC System Security Plan, v1.0 (Pending)……..……**12**

Appendix D LSNDC Information Privacy Plan, v1.0 (Pending)……..……**13**

INTRODUCTION

This document details the standard policies that govern the operation of the Louisiana Services Network Data Consortium Management Information System (LSNDC System). It defines the roles and responsibilities of the LSNDC System Administrators, agencies and individuals accessing LSNDC System data. All individuals accessing the LSNDC System must read and understand these policies. This document works in concert with the other LSNDC authored documents that establish baseline policies and procedures for data quality, system security, and client information privacy, as well as garner agreements amongst the various parties involved with the system. The affiliated documents are identified with each policy.

LSNDC System is administered by the Louisiana Services Network Data Consortium, a non-profit corporation acting in the behalf of the LSNDC Board. The LSNDC Board is comprised of representation from regional Homeless Management Information System (HMIS) lead agencies and Continua of Care lead organizations that are under contract with the U.S Department of Housing and Urban Development (HUD) to provide homeless services. The central server is administered by the contracted HMIS software vendor, and the LSNDC establishes the minimum policies for appropriate administration, licensing, training, and compliance at the regional-level.

The primary purpose of the LSNDC System is to provide a client and service data management tool to aid the regional Continua of Care to end homelessness in Louisiana and meet HUD requirements for CoCs to provide an unduplicated demographic report of the number and characteristics of clients served as well as program outcomes. This tool is Internet-based technology to assist homeless service organizations across Louisiana in capturing information about the clients that they serve.

The LSNDC System provides a standardized assessment of consumer needs creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating agencies, identify gaps in the local service continuum, and develop outcome measurements.

Benefits of LSNDC System

LSNDC System benefits persons experiencing homelessness:

Improvements in service delivery for clients as case managers assess the client's needs, inform the client about available services on site or through referral, help the client find and keep permanent housing, and improve service coordination when information is shared between programs within one agency that are serving the same client.

LSNDC System benefits agencies, program managers and case managers:

Aggregate program-level and agency-level information and reports should be accessible to agencies and program managers to provide a more complete understanding of clients' needs and outcomes, advocate for additional resources, complete grant applications, conduct evaluations of program services and staff performance, and report to funders. Minimally, the software should be able to provide unduplicated counts of persons experiencing homelessness and generate the program portions of the HUD Annual Progress Report (APR).

LSNDC System benefits the regional Continuum of Care:

Unduplicated, de-identified, system-wide information should be readily accessible to provide a more complete understanding of homelessness, clients' needs and outcomes, and program and system-level performance to inform policy decisions aimed at addressing and ending homelessness at local, state and federal levels. The software should also be able to generate data and/or reports to fulfill federal reporting requirements, CoC evaluation and funding application requirements, and city-wide and system-level reports.

Definitions

Terms used in this manual may be new to users. Definitions of some of these terms are as follows:

Agency Administrator: The person responsible for system administration at the agency level. This person is responsible for adding and deleting users, basic troubleshooting, and organizational contact with the Regional LSNDC System Administrator.

Authentication: The process of identifying a user in order to grant access to a system or resource; usually based on a username and password.

Client: Any recipient of services offered by a Provider or Participating Provider.

Collaborative Applicant: The eligible applicant designated by the Continuum of Care (CoC) to collect and submit the CoC Registration, CoC Consolidated Application (which includes the CoC Application and CoC Priority Listing), and apply for CoC planning funds on behalf of the CoC during the CoC Program Competition. The CoC may assign additional responsibilities to the Collaborative Applicant so long as these responsibilities are documented in the CoC's governance charter.

Continuum of Care (CoC): The regional or local planning body that coordinates housing and services funding for homeless families and individuals, and includes transitional housing, permanent supportive housing for disabled persons, permanent housing, supportive services, and Homeless Management Information Systems (HMIS). is designed to promote community-wide goals to end homelessness; provide funding to quickly rehouse homeless individuals (including unaccompanied youth) and families while minimizing trauma and dislocation to those persons; promote access to, and effective utilization of, mainstream programs; and optimize self-sufficiency among individuals and families experiencing homelessness.

Database: An electronic system for organizing data so it can easily be searched and retrieved; usually organized by fields and records.

Fiscal Agency: The agency chosen by the LSNDC governing board to manage the financial aspects of the corporation, including the general ledger, accounts payable, and accounts receivable. The Agency shall follow fiscal policies established by general accounting principles.

HMIS: Homeless Management Information System. This is a generic term for any system used to manage data about homelessness and housing. The HMIS used in Louisiana is called the LSNDC System.

HUD HMIS Data and Technical Standards (the Standards): The most recent HUD Standards published for Continuua of Care to systematically collect and report data for projects funded under Title IV of the McKinney-Vento Homeless Assistance Act. The current Standards were published in the July 30, 2004 Federal Register, Vol. 69, No. 146, pp. 45888 through 45934, with revisions released by HUD in March 2010. These standards fall into three categories: a) data elements required to be collected by HMIS users including “universal” and “program specific” data elements; b) Privacy and Security Standards for data confidentiality; and c) Technical Standards for the creation of HMIS data systems. Whenever the Standards are revised, this definition will reflect the most recently adopted revisions, and a change to the LSNDC Standard Policies and Procedures is not required.

LSNDC: The non-profit 501©3 that operates the LSNDC System.

LSNDC System: The software system as well as the information input, generated or acquired in print or machine readable format.

Participating Provider: Any agency, organization or group who has an LSNDC Agency Agreement with the Regional LSNDC System Administrator and that is allowed access to the LSNDC database.

Provider: ANY organization providing outreach, shelter, housing, employment and/or social services.

Regional LSNDC Lead Agency: Manages the LSNDC for their respective regional Continua of Care

Regional LSNDC System Administrator: The job title of the person at the regional HMIS administrating agency who provides technical support and training to Users. This person has the second highest level of user access in ServicePoint and has full access to all user and administrative functions within the respective region.

Server: A computer on a network that manages resources for use by other computers in the network. For example, a file server stores files that other computers (with appropriate permissions) can access. One file server can "serve" many files to many client computers. A database server stores a data file and performs database queries for client computers.

***ServicePoint*™:** A web-based software package managed by Mediware Information Systems which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning.

State LSNDC System Administrator: The job title of the person who is responsible for the coordination and administration of the LSNDC System. This person has the highest level of user access in *ServicePoint* and has full access to all user and administrative functions across the State.

User: An individual who uses a particular software package; in the case of the LSNDC, the *ServicePoint* software.

User License: An agreement with a software company that allows an individual to use the product. In the case of *ServicePoint*, user licenses are agreements between the Fiscal Agency and Bowman Systems that govern the distribution of regional licenses for individual connections to the LSNDC. User licenses cannot be shared.

Policy 1.0 Organization and Management of the LSNDC System
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes the organizational structure and role of the LSNDC System.

Policy Statement

The LSNDC System is the framework for operating a statewide HMIS in Louisiana. It is comprised of the regional Continua of Care (CoC) who are responsible for overseeing the management of data for measuring the communities' progress in ending homelessness. The LSNDC establishes the baseline HMIS-related guidelines and operating policies for the CoCs and their respective participants to effect compliance with regulations set by the Department of Housing and Urban Development (HUD).

Procedure

The LSNDC Board sets policies and standardizes documentation to ensure compliance with HMIS-related federal regulations for CoCs, which are executed at the regional level. Oversight of policy and procedural compliance by HMIS Participating Agencies is provided by the regional HMIS lead agencies, who have been appointed by the CoC lead organizations. The LSNDC Board also contracts with one or more organizations to provide state-wide system administration support. The LSNDC aims to set baseline policies and establish procedures within reasonable time frames that allow for CoCs to meet federal rules. Policies set by the LSNDC shall be reviewed annually, at a minimum.

Affiliated Documents/Agreements/Plans

LSNDC Articles of Incorporation and By-laws
Louisiana Statewide HMIS Joint Governance Agreement
LSNDC Standard Policies and Procedures
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan

Policy 1.1 LSNDC Board of Directors
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes requirements for the LSNDC Board of Directors regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

The LSNDC Board of Directors is the governing body in control of the statewide HMIS system and is responsible for establishing baseline policies and requirements for HMIS participation, fundraising and resource development, and quality assurance. The Board is the final decision making authority of the LSNDC.

Procedure

The Board meets at least bi-monthly with one annual meeting. Membership of the LSNDC Board will be established according to the following guidelines:

- Target membership for the LSNDC Board of Directors will be the total sum of two agents from each Continuum of Care region, wherein the membership count can vary based upon the number of independent CoC regions within the state. The two representatives from

each CoC region shall be comprised of one appointee from the regional CoC Lead Agency and one appointee from the regional HMIS Lead Agency. The names and contact information of LSNDC Board members are listed in *Appendix A–- Louisiana Services Network Data Consortium (LSNDC) Board Membership*.

- Concerted effort will be made by the LSNDC Board to find replacement representatives when participation has been inactive or inconsistent from the organizations involved in the project.

The LSNDC Board Members are responsible for, but not limited to, performing the following duties:

- Determining the guiding principles that should underlie the implementation activities of the LSNDC, Participating Agencies and service programs.
- Establishing the minimal data elements to be collected by all programs participating in the LSNDC and adopting the Data Quality Plan for ensuring participation compliance.
- Defining criteria, standards, and parameters for the release of aggregate data.
- Establishing the minimal data elements to be collected by all programs participating in the LSNDC and adopting the Data Quality Plan for ensuring participation compliance.
- Establish LSNDC participation fees for regional HMIS lead organizations;
- Selecting state administrators of the HMIS System.
- Selecting and contracting with an HMIS software vendor.

Affiliated Documents/Agreements/Plans

LSNDC Articles of Incorporation and By-laws
Louisiana Statewide HMIS Joint Governance Agreement
LSNDC Standard Policies and Procedures

Policy 1.2 Fiscal Management
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes requirements for the LSNDC Board regarding financial management of the corporation.

Policy Statement

In relation to fiscal management, the Board is the final decision making authority of the LSNDC. All financial activities will be documented through General Accounting Principles and comply with financial regulatory requirements as applicable.

Procedure

The LSNDC Board shall adopt a budget; continuously monitor the operation of that budget and recommend appropriate changes therein during the fiscal year; supervise the financial operations of the corporation; and examine the report of the independent public accountants auditing the Corporation's accounts or the accounts.

The LSNDC Board has the authority to contract with a fiscal agency to perform the day to day financial activities of the corporation. The Fiscal Agency will be required to follow the equivalent financial guidelines as the corporation and must be audited annually by an independent public accountant.

The Fiscal Agent shall provide and ensure compliance of all financial policy and procedures and has the following responsibilities:

- Have custody of the funds of the Corporation.
- Shall see to the deposit of all monies and securities to the credit of the Corporation in such depositories as may be designated by the Board of Directors and shall keep full and accurate accounts thereof and of all other financial matters of the Corporation.

- Shall render a full report of transactions conducted to the Treasurer whenever required by the Board of Directors. The books and accounts of the Treasurer shall at all times be open to the Board of Directors and to such persons as such Board may designate to inspect the same.

Affiliated Documents/Agreements/Plans

LSNDC Contract with Fiscal Agent
LSNDC Standard Policies and Procedures

Policy 1.3 LSNDC State System Administrator Lead Organization
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes requirements for the HMIS Lead Organization regarding administration and management of the State LSNDC State System Administrator.

Policy Statement

The LSNDC Board will contract with one or more organizations to provide LSNDC State System Administrator services (SSA). The organization(s) will be responsible for providing management and supervision of the SSA and adhering to the terms of the contract executed by LSNDC.

Procedure

The LSNDC Board, or its appointed committee, will identify a lead organization that is positioned to furnish release time for a Regional LSNDC System Administrator to perform the duties of the LSNDC State System Administrator for up to a maximum of 250 hours per fiscal year. The LSNDC shall reimburse the Lead Organization for expenses incurred by the release time of the LSNDC SSA, as identified in the terms of the contract between the LSNDC Board and the Lead Organization. The Lead Organization will be responsible for ensuring the LSNDC SSA performs the duties assigned to the position and documents services in accordance with the contract. The Lead Organization must also agree to terms of non-discrimination practices stated in the contract.

Affiliated Documents/Agreements/Plans

LSNDC Contract with Statewide System Administrator Organization
LSNDC Standard Policies and Procedures

Policy 1.4 State LSNDC System Administrator
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes requirements for the LSNDC State System Administrator(s) regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

The State Administrator(s) will be responsible for providing management and supervision of the LSNDC HMIS Statewide System and has full access to all user and administrative functions across the State. Statewide System Administrator services are necessary for executing practices and policies set by the Board and providing direct support to Regional LSNDC System Administrators. In the absence of the State LSNDC System Administrator(s), the LSNDC Board President and/or the Executive Committee will designate a back-up staff person, until a new State Administrator is determined.

Procedure

The State LSNDC System Administrator(s) is responsible for providing the following services:

- Managing the day-to-day operations of the LSNDC System.
- Responding to all system-wide questions and issues.
- Providing quality assurance reports to the LSNDC Board.
- Manage system availability as informed by HMIS software vendor.
- Building Agency Assessments upon written request from Regional LSNDC System Administrators.
- Issuing Regional User Licenses to Regional LSNDC System Administrator.
- Ensuring that the LSNDC System, as a whole, is adhering to relevant HUD HMIS Data and Technical Standards.
- Providing support to Regional LSNDC System Administrators upon request.
- Managing version controls.
- Reporting regional data quality issues to Regional LSNDC System Administrator to ensure timely correction and support.
- Managing password recovery to Regional LSNDC System Administrators.
- Performing other duties assigned by the LSNDC Board of Directors.

Affiliated Documents/Agreements/Plans

LSNDC Contract with Statewide System Administrator Organization
Louisiana Statewide HMIS Joint Governance Agreement
LSNDC Standard Policies and Procedures
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan

Policy 1.5 Regional HMIS Lead Agency
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: Regional CoC

Purpose and Scope

This policy establishes requirements for the Regional HMIS Lead Agency regarding administration and management of the LSNDC System at the CoC level.

Policy Statement

The local Continuum of Care, led by the CoC's Collaborative Applicant, shall designate an agency to operate the LSNDC System locally. It is the role of the Regional HMIS Lead Agency to manage the HMIS at the regional level, under the oversight of the CoC Lead Organization established by the Collaborative Applicant, and be compliant HMIS operations and requirements specified in the HUD CoC Program interim rule, per Section 578.57.

Procedure

The Regional HMIS Lead Agency is responsible for, but not limited to, the following duties:

- Comply with the terms of the Louisiana Statewide HMIS Joint Governance Agreement.
- Act as the fiduciary for the operation of LSNDC System locally.
- House the Regional System Administration and provide oversight of day-to-day operations.
- Manage the HMIS process locally, under the oversight of the CoC, and ensure local compliance with the LSNDC Data Quality Plan, LSNDC System Security Plan, and the LSNDC Information Privacy Plan.

- Enter into a contractual agreement, the LSNDC Agency Partner Agreement, with organizations participating in HMIS within the CoC.
- Convene/coordinate End User Meetings and local group trainings.
- Provide data and collaborate with CoC and other community partners on homeless initiatives.
- Certify compliance and implementation of HUD HMIS Data Standards locally.
- Ensure the HMIS Participating Agencies receive timely and adequate technical support to optimize use of the system.
- Provide ongoing support to the Participating Agencies through training on the system and ongoing telephone Help Desk functions. Support will be established regionally at the Continuum of Care level. The Regional LSNDC System Administrator will acknowledge the receipt of inquiries in a timely manner.
- Provide access to documentation and manuals regarding the use of the LSNDC System.

Affiliated Documents/Agreements/Plans

LSNDC Agency Participation Agreement
HMIS Governance Charter
LSNDC Standard Policies and Procedures
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan

Policy 1.6 Regional LSNDC System Administrator
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: Regional Lead Agency Operating LSNDC Locally

Purpose and Scope

This policy establishes requirements for the Regional LSNDC System Administrator regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

Each Continuum of Care must identify a Lead Agency to administer the LSNDC System within the designated jurisdiction, and the Regional Lead Agency must designate a staff member as the Regional LSNDC System Administrator to guide the system. The local administrator shall have regional administrative access. All Regional LSNDC System Administrators have full access to all agency records within their CoC and may have access to other Continua within the LSNDC system, where appropriate.

Procedure

The Regional LSNDC System Administrator is responsible for, but not limited to, performing the following duties:

- Managing the day-to-day operations of the LSNDC System at the regional level.
- Signing and understanding the LSNDC End User Agreement.
- Supporting Participating Agencies, and its end users, in the use of LSNDC System, address all questions and issues in a timely fashion.
- Communicating all pertinent statewide and regional LSNDC information to the LSNDC system end users within the service region.
- Providing training for staff of Participating Agencies on LSNDC System standards, policies, and practices.
- Ensuring the LSNDC End User Agreement is issued, read, and signed prior to the issuance of LSNDC system software licenses.

- Issuing LSNDC system software licenses.
- Manage notification of upgrades and updates to end users.
- Monitor data quality, and ensure the Participating Agencies are adhering to the minimum standards set in the LSNDC Data Quality Plan.
- Manage password recovery for LSNDC end users
- Prepare formal reports for the local Continuum of Care, where needed.
- Mine database to respond to authorized requests of information, where feasible.
- Ensure participating providers are adhering to relevant HUD HMIS Data and Technical Standards.
- Perform onsite monitoring for Participating Agency to verify LSNDC standards and practices are being followed. Visits should be conducted annually at a minimum.
- Train all users on HUD updates and changes to HMIS Data Standards
- Advise and provide technical assistance for initiatives that use the LSNDC system for managing human service data, including Coordinated Entry
- Participate in LSNDC Technical Committee conference calls to share and benefit from lessons learned across state.
- Attend LSNDC Regional System Administrator trainings, whenever feasible.
- Report database problems/successes to State LSNDC System Administrator.
- Work with State System Administrator on statewide reporting requests.

Affiliated Documents/Agreements/Plans

LSNDC Contract with Statewide System Administrator Organization
Louisiana Statewide HMIS Joint Governance Agreement
LSNDC Standard Policies and Procedures
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan
LSNDC End User Agreement

Policy 1.7 Participating Agency
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Regional System Administrator

Purpose and Scope

This policy establishes requirements for the Participating Agency regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

Each Regional Continuum of Care shall identify and solicit the participation of human service providers who contribute to the CoC's ability to measure system performance and progress towards ending homelessness. Each Participating Agency will be accountable for adherence to the minimum data collection and technical standards set by the LSNDC System and the Regional Continuum of Care, where applicable, as detailed in the Standard Operating Policies, LSNDC Data Quality Plan, LSNDC Information Privacy Plan, and LSNDC System Security Plan.

Procedure

Participating Agencies are to include, but are not limited to, providers of emergency shelters services, transitional housing programs, homeless outreach services, permanent housing providers, homeless prevention programs, and coordinated entry. In addition, each region may identify other service providers that could benefit from inclusion in the LSNDC system.

Before an agency can join the LSNDC System, a Participating Agency Agreement with the Regional Continuum of Care must be signed and all policies and accompanying documentation

must be adopted. The Participating Agency Agreement outlines responsibilities and duties of the LSNDC and Participating Agency, including requirements for all aspects of system access and use, terms and duration of access, and an agreement to abide by all provisions contained therein. The signed Agreement must be kept on file by the Regional LSNDC System Administrator agency. Only authorized Participating Agencies will be granted licenses to gain access to the LSNDC System. The Participating Agency will be responsible for oversight of its own related confidentiality requirements and bears primary responsibility for ensuring that internal and external data-sharing practices align with the minimum requirements established by the LSNDC Information Privacy Plan, or Regional CoC where applicable. Participating Agencies are responsible for maintenance of their computer hardware and internet connectivity.

Affiliated Documents/Agreements/Plans

LSNDC Contract with Statewide System Administrator Organization
Louisiana Statewide HMIS Joint Governance Agreement
LSNDC Standard Policies and Procedures
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan
LSNDC End User Agreement
LSNDC Release of Information

Policy 1.8 Agency Administrator
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Regional System Administrator

Purpose and Scope

This policy establishes requirements for the Agency Administrator regarding communication, access and usage of the LSNDC System within the Agency Administrator's Participating Agency.

Policy Statement

Each Participating Agency may identify a staff member to be the LSNDC Agency Administrator. The LSNDC Agency Administrator is the single point of contact for communication purposes and is responsible for ensuring the Participating Agency is adhering to the LSNDC System standards, policies, and practices, as they pertain to the scope of responsibilities of the Participating Agency.

Procedure

The Regional LSNDC System Administrator may delegate some system administration oversight responsibilities to an LSNDC system end user for a Participating Agency. The Executive Director must submit in writing the name and contact information of the LSNDC Agency Administrator to the Regional LSNDC System Administrator. The Executive Director must notify the Regional LSNDC System Administrator of changes in personnel in writing within one business day. If it is determined that the appointed LSNDC Agency Administrator does not have the capacity to fulfill the obligations of this role, alternative arrangements must be made with the Regional LSNDC System Administrator to ensure the Participating Agency is compliant with the LSNDC System standards, policies, and practices.

Minimal guidelines for an Agency Administrator (AA) are as follows:

- Must have email, internet access, and a LSNDC User License.
- May manage agency user authentication, with the responsibility of adding and removing licensed users for their agency, at the discretion of the Regional CoC.
- LSNDC System access must be revoked immediately upon termination from agency, placement on disciplinary probation, or upon any change in duties not necessitating

access to LSNDC System information. All changes must be relayed in writing to the Regional LSNDC System Administrator within 24 hours.

- Must be technically proficient with a web-based MIS since he/she will be responsible for maintaining the Participating Provider's LSNDC System site
- Has access to all client data, user data and agency administration information for the Participating Provider; thus, the AA is responsible for the quality and accuracy of these data.
- Ensures the stability of the agency connection to the Internet and ServicePoint, either directly or in communication with other technical professionals
- Provides support for the generation of agency reports
- Monitors and enforces compliance with HUD HMIS Data and Technical Standards of client confidentiality and ethical data collection, entry, and retrieval at the agency level.
- Notifies the Regional LSNDC System Administrator with questions or problems that appear to be related to errors in the LSNDC System

Affiliated Documents/Agreements/Plans

LSNDC Standard Policies and Procedures
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan
LSNDC End User Agreement
LSNDC Release of Information

Policy 1.9 LSNDC User
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Regional System Administrator

Purpose and Scope

This policy establishes requirements for the LSNDC User regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

Only authorized persons have access to the LSNDC System. Access authorization is established through the assigned role of the LSNDC User and the issuance of a HMIS software license.

Procedure

All LSNDC Users will have access to LSNDC data that is appropriate to the duties of their position, wherein client and service information can be recorded and accessed on a "need to know" basis. Multiple access levels are available allowing for more or less restrictive access to client data. Each Agency Administrator and/or Executive Director, with the guidance of the LSNDC Regional System Administrator, where appropriate, shall select an appropriate level of access for each LSNDC User license issued. Each User will complete a training course and sign the LSNDC User Agreement prior to gaining access to the LSNDC System. The LSNDC User Agreement outlines responsibilities and duties of the LSNDC and User, including requirements for all aspects of system access and use, terms and duration of access, and an agreement to abide by all provisions contained therein.

The User is responsible for, but not limited to, the following:

- Adhering to the relevant LSNDC Standard Policies and Procedures as outlined in this document.
- Adhering to all LSNDC policies as detailed in the LSNDC User Agreement.
- Securing his/her log-in information so that it will not be shared with another including administrators or other staff, in accordance with the LSNDC System Security Plan.

- Disclosing LSNDC participation and data usage to all clients prior to collection and entry, in accordance with the LSNDC Information Privacy Plan and the LSNDC ROI.
- Entering and updating client data in accordance with the LSNDC Data Quality Plan.
- Notifies the Regional LSNDC System Administrator with questions or problems that appear to be related to errors in the LSNDC System, if and Agency Administrator has not been established by the Participating Agency.

Affiliated Documents/Agreements/Plans

LSNDC Policies
LSNDC Agency Participation Agreement
LSNDC Data Quality Plan
LSNDC Information Privacy Plan
LSNDC System Security Plan
LSNDC End User Agreement
LSNDC Release of Information

Policy 1.10 HMIS Software Vendor
Effective Date: October 1, 2017
Last Revision: September 20, 2017
Responsible Party: LSNDC Board

Purpose and Scope

This policy establishes requirements and responsibilities of the HMIS software vendor to design, support, secure, and maintain the LSNDC system.

Policy Statement

The HMIS software vendor is the company responsible for the HMIS software and securing the servers that house the HMIS database. The LSNDC contracts with an HMIS software vendor to meet the needs of the system participants and ensure compliance with HUD HMIS Data and Technical Standards.

Procedure

The HMIS software vendor, *ServicePoint™*, holds the contract for the HMIS with the LSNDC and invoices the LSNDC and regional HMIS lead organization separately. The contract is renewed no less than annually. The LSNDC system uses is a server based system and all application level data backups are the vendor's responsibility. HMIS Software Vendor will provide a highly available HMIS and will inform users in advance of any planned interruption in service. HMIS Software Vendor ensures availability of customer data in the event of a system failure. The HMIS vendor also ensures that the data is protected from unauthorized intrusions.

Affiliated Documents/Agreements/Plans

LSNDC Contract with HMIS Software Vendor
LSNDC System Security Plan

Appendix A

Louisiana Services Network Data Consortium (LSNDC)

Board Membership List

(Effective 9/20/2017)

Louisiana Services Network Data Consortium (LSNDC)
Board of Directors Membership List

Effective Date: September 20, 2017

REGION BOS – Balance of State CoC
Parishes: Allen, Ascension, Beauregard, Calcasieu, Cameron, East Baton Rouge, East Feliciana, Iberville, Jefferson Davis, Natchitoches, Plaquemines, Pointe Coupee, Sabine, St. Bernard, West Baton Rouge, West Feliciana

CoC
Gordon Levine, Housing Finance Manager
Louisiana Housing Corporation
2415 Quail Drive
Baton Rouge, LA 70808
Phone: (225) 763-8700

HMIS
Eric Gammons, BoS System Administrator
Capital Area Alliance for the Homeless
153 N. 17th Street
Baton Rouge, LA 70802
Phone: (337) 255-5448

REGION I AND X - New Orleans/Jefferson Parish CoC
Parishes: Orleans and Jefferson

CoC
Robbie Keen, Director of Research
UNITY of Greater New Orleans
2475 Canal Street. Suite 300
New Orleans, LA 70119
Phone: (504) 821-4496x115

HMIS
Mr. Clifton Harris, HMIS Director
VIA LINK
2820 Napoleon Avenue
New Orleans, LA 70115
Phone: (504) 897-4877

REGION III - Houma-Terrebonne CoC
Parishes: Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, Terrebonne

CoC
Tara Nolan, Case Manager
Gulf Coast Social Services
320 Progressive Boulevard
Houma, LA 70360
Phone: (985) 851-4488

HMIS
Brooke Guidry, Operations Director
Start Corporation
420 Magnolia Street
Houma, LA 70360
Phone: (985) 879-3966

REGION IV - Lafayette/Acadiana CoC
Parishes: Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, St. Mary, Vermillion

CoC
Leigh Rachal, Executive Director
Acadiana Regional Coalition on
Homelessness & Housing
P.O. Box 3936
Lafayette, LA 70502
Phone: (337) 967-0995

HMIS
Andrew Zegura, HMIS System Administrator
Catholic Services of Acadiana
405 St. John Street
Lafayette, LA 70501
Phone: (337) 235-4972x105

REGION VI - Alexandria/Central Louisiana CoC

Parishes: Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Vernon, Winn

CoC

Kendra Gauthier, Executive Director
Central Louisiana Homeless Coalition
P.O. Box 1303
Alexandria, LA 71309
Phone: (318) 443-0500

HMIS

Megan Vets, Database Administrator
Central Louisiana Homeless Coalition
P.O. Box 1303
Alexandria, LA 71309
Phone: (318) 443-0500

REGION VII - Shreveport/Bossier/Northwest CoC

Parishes: Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River, Webster

CoC

Christa Pazzaglia, Executive Director
HOPE Connections
2350 Levy Street
Shreveport, LA 71103
Phone: (318) 670-4591

HMIS

Tosha Stamps, Director of System Outcomes
HOPE Connections
2350 Levy Street
Shreveport, LA 71103
Phone: (318) 670-4591

REGION VIII - Monroe/Northeast Louisiana CoC

Parishes: Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, West Carroll

CoC

Sarah Johnson, Program Coordinator
HOME Coalition
107 Ashford Drive, Apt.831
West Monroe, LA 71291
Phone: (318) 547-0407

HMIS

Kattina Trosclair, HMIS System Administrator
The Wellspring
1515 Jackson Street
Monroe, LA 71202
Phone: (318) 807-6200

REGION IX - Slidell/Livingston/Southeast Louisiana CoC

Parishes: Livingston, St. Helena, St. Tammany, Tangipahoa, Washington

CoC

Amanda Mills, Executive Director
Northlake Homeless Coalition
P.O. Box 53
Mandeville, LA 70471
Phone: (985) 626-6681

HMIS

Erin Matheny, Director
Northlake HMIS Data Project
Southeastern Louisiana University
SLU Box 10509
Hammond, LA 70402
Phone: (985) 549-5373

Data Quality Plan

Louisiana Services Network Data Consortium
Version 3.0

Effective Date:
October 1, 2017

Developed by:
LSNDC Policy Committee

Adopted by:
LSNDC Board of Directors
On May 4, 2018

Introduction

This document serves as the Homeless Management Information System (HMIS) Data Quality Plan for the Continua of Care (CoCs) served by the Louisiana Services Network Data Consortium (LSNDC) and shall be used in concert with the policies listed in the LSNDC Policies and Standard Operating Procedures. The plan is prepared and maintained by the LSNDC Board of Directors and shared with the CoCs of Louisiana to adopt and implement. The plan standardizes the baseline requirements for ensuring accuracy, timeliness, and completeness of information maintained within the LSNDC HMIS database. The protocols identified within the plan are in accordance with the requirements set by the United States Department of Housing and Urban Development (HUD) and detailed in the 2017 HUD Data and Technical Standards, specifically the HMIS Data Standards and the Program Specific HMIS Manuals for the various federal partners identified in *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*. It is not the intention of the plan to preclude or supersede additional requirements identified by the CoC or contributing HMIS organization. The plan shall be reviewed and revised no less than once a year, with consideration given to the scheduled releases of HMIS Data Standard updates published by HUD.

As CoCs shift towards more data-informed approaches to ending homelessness, the value and necessity for strong HMIS data quality increases. Data quality that is timely, complete, and accurate provides CoCs with statistically valid and reliable data about the communities they serve. CoCs must have clear and concise information to evaluate progress towards meeting local, state, and federal benchmarks, as well as effectively serving clients within their jurisdictions and coordinating their paths to stable, permanent housing.

The purpose of the LSNDC Data Quality Plan is to ensure each CoC within the state of Louisiana has defined baseline expectations for both the community and end users to capture reliable and valid data about persons accessing the homeless assistance system. Additionally, compliance with the LSNDC Data Quality Plan validates with the CoC's compliance with the HMIS data standards set by HUD and their relevant federal partners.

Glossary of Terms:

APR	Annual Performance Report	PATH	Projects for Assistance in Transition from Homelessness
CoC	Continuum of Care	PDDE	Program Descriptor Data Elements
ESG	Emergency Solutions Grants	PSDE	Program Specific Data Element
HMIS	Homeless Management Information System		
HOPWA	Housing Opportunities for Persons with AIDS	RHY	Runaway Homeless Youth
HUD	Dept of Housing and Urban Development	SSVF	Supportive Services for Veteran Families
LSNDC	Louisiana Services Network Data Consortium	UDE	Universal Data Element

Referenced Materials:

The plan includes hyperlinks to manuals and ancillary documents published by HUD and relevant federal partners.

- 2017 HMIS Data Standards Manual, U.S. Department of Housing and Urban Development
- CoC Program HMIS Manual, U.S. Department of Housing and Urban Development
- ESG Program HMIS Manual, U.S. Department of Housing and Urban Development
- HMIS Data Standards Dictionary, U.S. Department of Housing and Urban Development
- HMIS Standard Reporting Terminology Glossary, U.S. Department of Housing and Urban Development

- PATH Program HMIS Manual, U.S. Department of Health and Human Services
- RHY Program HMIS Manual, U.S. Department of Health and Human Services
- VA Program HMIS Manual, U.S. Department of Veterans Affairs

Data Quality 1.0: Data Quality Plan Definition
Effective Date: October 01, 2017
Last Revision: October 01, 2016

A data quality plan is the document that facilitates the ability of Louisiana Services Network Data Consortium (LSNDC) to achieve statistically valid, reliable data. LSNDC Data Quality Plan follows the requirements of the current Federal HMIS Data Standards Manual and the Project Descriptor and Program Specific HMIS Manuals. This plan is subject to change to accommodate new standards released by HUD.

The plan:

- Identifies the responsibilities of all parties within LSNDC that affect data quality
- Establishes specific data quality benchmarks for timeliness, completeness, and accuracy
- Describes the procedures that the LSNDC will take to implement the plan and monitor progress to meet data quality benchmarks.

Data Quality 1.1: Timeliness Requirements
Effective Date: October 01, 2017
Last Revision: October 01, 2016

All data shall be entered into the HMIS in a timely manner to ensure access to data when it is needed for reporting purposes. To that end, the following timeliness benchmark is set forth:

General Standard:

All HMIS participating projects will ensure entry/exits, services, and Universal Data Elements are at minimum completed within 5 business days of project entry/exit.

Exceptions:

1. *Emergency Shelters*: All HMIS Participating Emergency Shelter projects will ensure entry/exits, services, and Universal Data Elements are completed within 2 business days of initial contact.
2. *Outreach Projects*: All HMIS Participating Outreach projects will ensure entry of limited basic demographics as provided by client and services within 5 business days of initial contact.
3. *Legacy Data*: There will be a grace period determined on a case by case basis for how quickly the data should be entered into the HMIS. Legacy Data is information stored in an old or obsolete format or computer system that is, therefore, difficult to access or process and requires more time for a project to enter data

Data Quality 1.2: Completeness Overview
Effective Date: October 01, 2017
Last Revision: October 01, 2016

Complete HMIS data is necessary to fully understand the demographic characteristics and service use of persons in the system. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, including ability for CoCs to address HUD System Performance Measures, including:

- Unduplicated counts of clients served at the regional level;
- Patterns of use of participants entering and exiting the homeless assistance system;
- Evaluation of the effectiveness of CoC homeless systems locally and statewide; and
- Effectively producing data to reach benchmarks to end homelessness.

Data Quality 1.2.1: Completeness Requirements for Project Descriptor Data Elements (PDDE)
Effective Date: October 01, 2017
Last Revision: May 04, 2018

Project Descriptors include information about projects that are required for reporting purposes and enhance the HMIS as a tool for supporting information and referral services.

General Standard:

All Project Descriptor Data Elements are required as part of basic administrative setup of projects utilizing the LSNDC, no null/missing Project Descriptor Data Elements are allowed. The PDDE's should be entered no later than 5 days from the time the Provider is created in the LSNDC. They should also be reviewed annually and any changes should be recorded.

For a listing of the Project Descriptor Data Elements please see the HMIS Project Descriptor Data Elements Manual for detailed listing and explanation of each element.

2.1 Organization Identifiers
2.2 Project Identifiers
2.3 Continuum of Care Code
2.4 Project Type
2.5 Method for Tracking Emergency Shelter Utilization
2.6 Federal Partner Funding Sources
2.7 Bed and Unit Inventory Information
2.8 Additional Project Information

Data Quality 1.2.2: Completeness Requirements for All Clients Served
Effective Date: October 01, 2017
Last Revision: May 04, 2018

It is the expectation that all clients receiving homeless assistance will have their service delivery documented in the HMIS.

General Standard:

All projects using the HMIS shall enter data on all clients in accordance with the newest relevant HMIS Data and Technical Standards of the 2017 HMIS Data Standards Manual, HMIS Data Standards Data Dictionary, and Program Specific HMIS Manuals. Anonymous entry is discouraged and should only be allowed when absolutely necessary.

Exceptions:

1. Non-Federally funded projects are required to have a minimum of 80% of each Universal Data Element on all clients.
2. Homeless Service Providers whose primary target population is victims of domestic violence are currently collecting data and providing non-identifiable data to the local CoC are statutorily disallowed from entering client data into the HMIS
3. If a client refuses to have information input into the HMIS, the Homeless Service Provider is responsible to choose "Client refused" for those data elements being refused. The Homeless Service Provider is not held responsible for client refusal, although some reporting tools may consider "client refused" as a null value. For additional information please refer to the LSNDC Policies and Privacy Plan. Plan.
4. When agencies host special events (e.g. Christmas Baskets, Christmas Tree Programs, Easter Baskets, etc.) they are not required to record information on all clients who participate in the event.

Data Quality 1.2.3: Completeness Requirements of Universal Data Elements (UDE)
Effective Date: October 01, 2017
Last Revision: May 04, 2018

Universal Data Elements are necessary to produce an unduplicated count of clients served, to provide accurate counts for various reporting requirements, including HUD CoC APR, the Annual Homeless Assessment Report (AHAR), ESG Consolidated Annual Performance and Evaluation Report (CAPER), SSVF Export, RHY Export, System Performance Measure reports, and other reporting requirements.

General Standard:

The acceptable percentage of Universal Data Elements without responses (i.e. null data) or with responses of 'Client doesn't know', 'Client refused' or "Data not collected" for all clients served in CoC, ESG, and HOPWA projects is 5 percent or less. Whenever a response is not listed for a required UDE, it will be treated as missing (or null) data. Documenting the reasons for not recording responses are important and missing data should be avoided.

Uses of non-reportable responses for UDEs -

- Response of *Client doesn't know (HUD)*: This response should be recorded whenever a client is asked a question, but he or she is unable to recall this information. For example, a client is asked about the number of times he has homeless on the streets, in ES, or SH in the past three years, but the client cannot quantify this number.
- Response of *Client refused (HUD)*: This response should be recorded whenever a client is asked a question, but he or she chooses to not disclose this information. For example, a client is asked about the number of times he has homeless on the streets, in ES, or SH in the past three years, but the client states he will not answer this question.
- Response of *Data not collected (HUD)*: this response should be recorded whenever a staff person does not ask the question or does not keep a record of the response. For example, a case manager is completing an intake with a future client, and she does not ask the client the number of times he has homeless on the streets, in ES, or SH in the past three years.

Exceptions:

1. *Outreach Programs*: Capture and record initial contact and any other contacts along with UDEs they are able to obtain.

Please refer to the HMIS Data Standards Manual for more detailed information on the following UDEs; see Exhibit 1 of the plan for more specific detailed information about when and for whom this information should be recorded.

3.1 Name
3.2 Social Security Number
3.3 Date of Birth
3.4 Race
3.5 Ethnicity
3.6 Gender
3.7 Veteran Status
3.8 Disabling Condition
3.10 Project Start Data

3.11 Project Exit Data
3.12 Destination
3.13 and 3.14 remove by HUD Data Stds 2017
3.15 Relationship to Head of Household
3.16 Client Location
3.20 Housing Move-in Date
3.917 Living Situation *moved to this order in the list*

Data Quality 1.2.4: Completeness Requirements of Program Specific Data Elements (PSDE)
Effective Date: October 01, 2017
Last Revision: May 04, 2018

Program Specific Data Elements are necessary to produce the HUD CoC, ESG, PATH, RHY and SSVF Federal Reports. These elements also ensure LSNDC has sufficient client data to conduct analysis on the extent and characteristics of the population(s) served.

General Standard:

The acceptable percentage of Program Specific Data Elements with "null/missing", "Client doesn't know" and "Client refused" is less than 5 percent for all clients served by a CoC, ESG, HOPWA, SSVF, and RHY programs and any other federally funded HMIS project. Please refer to the HMIS Data Standards Manual, Program Specific Manuals for each project type and the HMIS Standard Reporting Terminology Glossary for more detailed information.

The following PSDEs are required by more than one Federal partnering agency; see Exhibit 3 for specific requirements by each Federal partner.

4.1 Removed by HUD Data Stds 2017
4.2 Income and Sources
4.3 Non-Cash Benefits
4.4 Health Insurance
4.5 – 4.10 Disability Elements
4.5 Physical Disability
4.6 Developmental Disability
4.7 Chronic Health Condition
4.8 HIV/AIDS
4.9 Mental Health Problem
4.10 Substance Abuse
4.11 Domestic Violence
4.12 Contact
4.13 Date of Engagement
4.14 Bed-Night Date
4.16 *Removed by HUD Data Stds 2017*
4.17 *Removed by HUD Data Stds 2017*
4.18 Housing Assessment Disposition

Data Quality 1.3 Accuracy
Effective Date: October 01, 2017
Last Revision: November 02, 2012

The purpose of accuracy is to ensure that the data in the LSNDC HMIS is the best possible representation as it relates to clients and the programs that serve them.

General Standard:

All data entered into the LSNDC HMIS shall be a reflection of information provided by the client, as documented by the intake worker or otherwise updated by the client and documented for reference. Deliberately recording inaccurate information is strictly prohibited.

Data Quality 1.3.1: Consistency in Accuracy
Effective Date: October 01, 2017
Last Revision: November 02, 2012

The purpose is to ensure that data is understood, collected, and entered consistently across all programs in the HMIS. Consistency directly affects the accuracy of data.

General Standard:

All data elements in the LSNDC HMIS shall be collected and entered in a common and consistent manner across all programs.

Data Quality 1.4: Monitoring
Effective Date: October 01, 2017
Last Revision: October 01, 2016

The purpose of monitoring is to ensure that agencies are following the data quality standards agreed upon by LSNDC and are meeting expected benchmarks as described by the LSNDC Data Quality Plan.

General Standard:

Data Elements will be monitored on at least a quarterly basis by local CoCs and system administrators to quickly identify and resolve issues that affect the timeliness, completeness, and accuracy of the client record. More frequent monitoring is encouraged. Use of ART data quality reports is recommended, but it is at the discretion of the CoC to determine which reports best fit the needs of the project types within the jurisdiction.

Data Quality 1.5 Incentives and Enforcement
Effective Date: October 01, 2017
Last Revision: October 01, 2016

The purpose of using incentives to reinforce the importance of good data quality.

General Standard:

CoCs are encouraged to develop an incentive program to entice contributing HMIS organizations to adhere to the data quality plan. Effective incentives for projects/users maintaining good data quality may include, but are not limited to, public acknowledgements at meetings or in newsletters, certificates or recognition, or bonus points for funding awards.

Exhibit 1: Universal Data Element Collection Summary

Data Element **Collected For** **When Collected**

	All	HoH	HoH and Adults	Adults	Record Creation	Project Entry	Update	Project Exit
3.1 Name	X				X			
3.2 Social Security Number	X				X			
3.3 Date of Birth	X				X			
3.4 Race	X				X			
3.5 Ethnicity	X				X			
3.6 Gender	X				X			
3.7 Veteran Status				X	X			
3.8 Disabling Condition				X		X		
3.10 Project Start Date	X					X		
3.11 Project Exit Date	X							X
3.12 Destination			X					X
3.13 Removed by HUD Data Stds 2017								
3.14 Removed by HUD Data Stds 2017								
3.15 Relationship to Head of Household	X					X		
3.16 Client Location		X				X	X	
3.20 Housing Move-In Date								
3.917 Living Situation			X			X		

**Program Specific Data Element Collection Summaries will be available for each federal partner program in the HMIS Program Manuals

Exhibit 2: Federal Partner Grant Programs, Eligible Components/Activities and HMIS Project Types

This table serves as a source reference for:

1. Identification of all HMIS Federal Partner programs and components use of HMIS.
2. Identification of the Program and Program Component/Activity Abbreviations used throughout the Data Manual.
3. Identification of the HMIS Project Type [element 2.4] required association with each Component/Activity.

U.S. Department of Housing and Urban Development (HUD)

Grant/Program	Component/Activity	HMIS PROJECT TYPE
Continuum of Care for the Homeless **(CoC)**	Homelessness Prevention **(HP)**	Homelessness Prevention
	Permanent Supportive Housing **(PSH)** [Includes CoC - Shelter Plus Care (S+C) and Supportive Housing Program(SHP) – permanent housing with active funding and/or use requirements]	PH: - Permanent Supportive Housing (disability required for entry)
	Rapid Re- Housing **(RRH)**	PH - Rapid Re-Housing
	Supportive Services Only **(SSO)**	Services Only (unless Street outreach is funded then Street Outreach)
	Transitional Housing **(TH)** [Includes CoC SHP – transitional housing with active funding and/or use requirements]	Transitional Housing
	Safe Haven **(SH)**	Safe Haven
	SRO [20 year use requirement]	PH- Permanent Supportive Housing or PH - Housing Only (depending on whether services are provided).
Emergency Solutions Grants **(ESG)**	Emergency Shelter (ES) – Entry/Exit (ES-e/e) OR Night-by-Night (ES-nbn) [Includes ESG – Transitional Shelter (Housing)]	Emergency Shelter (Transitional Shelter = Transitional Housing program type, reported under Emergency Shelter)
	Homelessness Prevention (HP)	Homelessness Prevention
	Rapid Re-Housing (RRH)	PH - Rapid Re-Housing
	Street Outreach **(SO)**	Street Outreach
Housing Opportunities for Persons with AIDS **(HOPWA)**	Hotel/Motel **(H/M)**	Emergency Shelter
	Housing Information **(HI)**	Services Only
	Permanent Housing **(PH)**	PH - Permanent Supportive Housing
	Permanent Housing Placement **(PHP)**	Services Only
	Short Term Housing **(STH)**	Emergency Shelter
	Short Term Rent, Mortgage Utility Assistance **(STRMU)**	Homelessness Prevention
	Transitional Housing **(TH)**	Transitional Housing
HUD/VASH **(H/V)**	Permanent Supportive Housing **(PSH)**	PH - Permanent Supportive Housing
Rural Housing Stability	Rural Assistance **(RA)**	Undetermined at time of Data Standards Release

U.S. Department of Health and Human Services (HHS)

Administration for Children and Families (ACYF) -- Family and Youth Services Bureau (FYSB)		
Grant/Program	**Component/Activity**	**HMIS PROJECT TYPE**
Runaway and Homeless Youth **(RHY)**	Basic Center Program **(BCP)** Emergency Shelter **(BCP-es)** OR Prevention **(BCP-p)**	es = Emergency Shelter p=Homelessness Prevention
	Maternal Group Home **(MGH)**	Transitional Housing
	Street Outreach Program **(SOP)**	Street Outreach
	Transitional Living Program **(TLP)**	Transitional Housing
	Demonstration Programs **(D)**	Undetermined at time of Data Standards Release

Substance Abuse and Mental Health Services Administration (SAMHSA)		
Grant/Program	**Component/Activity**	**HMIS PROJECT TYPE**
Projects for Assistance in Transition from Homelessness **(PATH)**	Street Outreach **(SO)**	Street Outreach
	Supportive Services **(SSO)**	Services Only

U.S. Department of Veteran Affairs (VA)

Grant/Program	**Component/Activity**	**HMIS PROJECT TYPE**
Health Care for Homeless Veterans **(HCHV)**	Community Contract Emergency Housing **(HCHV/EH)***	Emergency Shelter
	Community Contract Residential Treatment Program **(HCHV/RT)***	Emergency Shelter
	Domiciliary Care **(HCHV/DOM)***	Emergency Shelter
	VA Community Contract Safe Haven Program **(HCHV/SH)***	Safe Haven
VA Funded Transitional Housing	Grant and Per Diem Program **(GPD)***	Transitional Housing
	Compensated Work Therapy Transitional Residence **(CWT/TR)***	Transitional Housing
Supportive Services for Veteran Families **(SSVF)**	Supportive Services for Veteran Families Homelessness Prevention	Homelessness Prevention
	(HP) Supportive Services for Veteran Families Rapid Re-Housing	PH - Rapid Re-Housing
*Participation in HMIS is not required as part of a funding requirement except for SSVF. The federal partners recognize that communities record Project Descriptor Data Elements and Universal Data Elements in order to facilitate completion of the HIC and PIT.		

Exhibit 3: Federal Partner Program Specific Data Element Tables

A. CoC HMIS Program Specific Data Element Table

All CoC Program funded projects are required to collect all of the Universal Data Elements and a select number of Program-Specific Data Elements, which are shown below for each program component:

#	Element	Homeless Prevention	PSH	Rapid Rehousing	SSO	Transitional Housing
4.2	Income and Sources	X	X	X	X	X
4.3	Non-Cash Benefits	X	X	X	X	X
4.4	Health Insurance	X	X	X	X	X
4.5	Physical Disability	X	X	X	X	X
4.6	Developmental Disability	X	X	X	X	X
4.7	Chronic Health Condition	X	X	X	X	X
4.8	HIV/AIDS	X	X	X	X	X
4.9	Mental Health Problem	X	X	X	X	X
4.10	Substance Abuse	X	X	X	X	X
4.11	Domestic Violence	X	X	X	X	X
4.12	Contact				+	
4.13	Date of Engagement				+	
4.17	Residential Move-in Date			X		
4.18	Housing Assessment Disposition	?	?	?	?	?
4.19	Housing Assessment at Exit	X				

X = Data collection is required
+ = Data collection is required only for SSO components which are funded to provide Street Outreach
? = Data collection is determined by how the CoC has structured Coordinated Entry in the area. Use of element is required for any project conducting CE, either across multiple projects or through a centralized process.

B. ESG HMIS Program Specific Data Element Table

All ESG recipients and sub-recipients are required to collect all of the Universal Data Elements and a select number of Program-Specific Data Elements, which are shown below for each program component:

#	Element	Emergency Shelter (E/E)	Emergency Shelter (NBN)	Homeless Prevention	Rapid Rehousing	Street Outreach
4.2	Income and Sources	X		X	X	X
4.3	Non-Cash Benefits	X		X	X	X
4.4	Health Insurance	X		X	X	X
4.5	Physical Disability	X	X	X	X	X

4.6	Developmental Disability	X	X	X	X	X
4.7	Chronic Health Condition	X	X	X	X	X
4.8	HIV/AIDS	X	X	X	X	X
4.9	Mental Health Problem	X	X	X	X	X
4.10	Substance Abuse	X	X	X	X	X
4.11	Domestic Violence	X	X	X	X	X
4.12	Contact		X			
4.13	Date of Engagement		X			
4.14E	Bed-Night Date		X			
4.17	Residential Move-in Date				X	
4.18	Housing Assessment Disposition	?	?	?	?	?
4.19	Housing Assessment at Exit			X		
X = Data collection is required **? = Data collection is determined by how the CoC has structured Coordinated Entry in the area. Use of element is required for any project conducting CE, either across multiple projects or through a centralized process.**						

C. PATH Program Specific Data Element Table

All PATH projects are required to collect all of the Universal Data Elements and a select number of Program-Specific Data Elements. The Program-Specific Data Elements to be collected by each PATH project are as shown below:

#	Element	Street Outreach	Services Only
4.1	*Removed by HUD Data Stds 2017*		
4.2	Income and Sources	X	X
4.3	Non-Cash Benefits	X	X
4.4	Health Insurance	X	X
4.5	Physical Disability	X	X
4.6	Developmental Disability	X	X
4.7	Chronic Health Condition	X	X
4.8	HIV/AIDS	%	%
4.9	Mental Health Problem	X	X
4.10	Substance Abuse	X	X
4.11	Domestic Violence	X	X
4.12	Contact	X	X
4.13	Date of Engagement	X	X

4.14A	Services Provided – PATH Funded	X	X
4.16A	Referrals Provided - PATH	X	X
4.20	PATH Status	X	X
4.21	Connection with SOAR	X	X
X = Data collection is required % = Data collection is pending approval and collection is at the discretion of the grantee			

D. RHY Program Specific Data Element Table

All RHY projects are required to collect all of the Universal Data Elements and a select number of Program-Specific Data Elements. The Program-Specific Data Elements to be collected by each PATH project are as shown below:

#	Element	Basic Center Program (Emergency Shelter)	Basic Center Program (Prevention)	Maternity Group Home	Street Outreach Program	Transitional Living Program	DEMO
4.2	Income and Sources			X		X	X
4.3	Non-Cash Benefits			X		X	X
4.4	Health Insurance	X	X	X	X	X	X
4.5	Physical Disability	X	X	X	X	X	X
4.6	Developmental Disability	X	X	X	X	X	X
4.7	Chronic Health Condition	X	X	X	X	X	X
4.8	HIV/AIDS	X	X	X	X	X	X
4.9	Mental Health Problem	X	X	X	X	X	X
4.10	Substance Abuse	X	X	X	X	X	X
4.12	Contact				X		
4.13	Date of Engagement				X		
4.14B	Services Provided – RHY	X	X	X	X	X	X
4.16B	*Removed by HUD Data Stds 2017*						
4.22	RHY: BCP Status	X	X				
4.23	Sexual Orientation	X	X	X	X	X	X
4.24	Last Grade Completed	X	X	X		X	X
4.25	School Status	X	X	X		X	X
4.26	Employment Status	X	X	X		X	X
4.27	General Health Status	X	X	X		X	X
4.28	Dental Health Status	X	X	X		X	X
4.29	Mental Health Status	X	X	X		X	X
4.30	Pregnancy Status	X	X	X	X	X	X

4.31	Formerly a Ward of Child Welfare/Foster Care Agency	X	X	X		X	X
4.31	Formerly a Ward of Juvenile Justice System	X	X	X		X	X
4.32	Young Person's Critical Issues	X	X	X		X	X
4.33	Referral Source	X	X	X		X	X
4.34	Commercial Sexual Exploitation	X	X	X	X	X	X
4.35A	Commercial Labor Exploitation	X	X	X	X	X	X
~~4.~~36	Transitional, Exit-care, or Aftercare Plan and Actions	X	X	X		X	X
~~4.~~37	Project Completion Status	X	X	X		X	X
X = Data collection is required							

E. VA Program Specific Data Element Table

All VA-funded projects participating in HMIS are required to collect and enter Universal data elements. SSVF projects are required to collect and enter additional Program-Specific data elements; detailed information about HMIS data collection for SSVF may be found in the SSVF HMIS Data Collection section of the VA Data Guide, available on VA's SSVF University website.

#	Element	SSVF	HUD/VASH and HUD/VASH-OTH	GPD
4.2	Income and Sources	X	X	X
4.3	Non-Cash Benefits	X	X	X
4.4	Health Insurance	X	X	X
4.5	Physical Disability		X	X
4.6	Developmental Disability		X	X
4.7	Chronic Health Condition		X	X
4.8	HIV/AIDS		X	X
4.9	Mental Health Problem		X	X
4.10	Substance Abuse		X	X
4.11	Domestic Violence		X	X
4.14D	Services Provided – SSVF	X	X	Optional
4.15B	Financial Assistance – SSVF	X	X	
4.17	Residential Move-in Date	X (RRH Only)	X	
4.24	Last Grade Completed	X	X	

4.26	Employment Status		X	
4.27	General Health Status		X	
4.41	Veteran's Information	X	X	X
4.42	Percent of AMI (SSVF Eligibility)	X		
4.43	Last Permanent Address	X	X	
4.45	VAMC Station Number	X	X	
4.48	SSVF HP Targeting	X (HP Only)	X	
X = Data collection is required				

F. HOPWA Program Specific Data Element Table

All HOPWA projects are required to collect all of the Universal Data Elements and a select number of Program-Specific Data Elements. The Program-Specific Data Elements to be collected by each HOPWA project are as shown below:

#	Element	Hotel Motel	Housing Info	Permanent Housing	PH Placement	Short Term Housing	STRMU	TH
4.1	*Removed by HUD Data Stds 2017*							
4.2	Income and Sources	X	X	X	X	X	X	X
4.3	Non-Cash Benefits	X	X	X	X	X	X	X
4.4	Health Insurance	X	X	X	X	X	X	X
4.5	Physical Disability	X	X	X	X	X	X	X
4.6	Developmental Disability	X	X	X	X	X	X	X
4.7	Chronic Health Condition	X	X	X	X	X	X	X
4.8	HIV/AIDS	X	X	X	X	X	X	X
4.9	Mental Health Problem	X	X	X	X	X	X	X
4.10	Substance Abuse	X	X	X	X	X	X	X
4.11	Domestic Violence	X	X	X	X	X	X	X
4.14C	Services Provided – HOPWA	X	X	X	X	X	X	X
4.15A	Financial Assistance - HOPWA				X		X	
4.19	Housing Assessment at	X	X	X	X	X	X	X

	Exit							
4.39	Medical Assistance	X	X	X	X	X	X	X
4.47	T-Cell Viral Load	X		X	X	X	X	X
X = Data collection is required								

Appendix C

Louisiana Services Network Data Consortium (LSNDC)

System Security Plan, v1.0

(Pending)

Appendix D

Louisiana Services Network Data Consortium (LSNDC)

Information Privacy Plan, v1.0

(Pending)

THE FOLLOWING POLICIES REMAIN IN EFFECT WITH THESE EXCEPTIONS:

Policies v. 2.0 updated sections 1.1 – 1.3 of following current polices, added new policy 1.4 making clearer some of the responsibilities of the statewide governing body that oversees the system (LSNDC), updated and renumbered policies 1.4 to 1.8 so that these policy nbrs are now 1.5 to 1.9 in v. 2.0. Added a new policy 1.10 clearly stating that the HMIS system adopted is ServicePoint.

Policies 2.0 updated text of Appendix B Data Quality Plan of the current policy to include updated requirements.

Louisiana Services Network Data Consortium
Policies and Standard Operating Procedures
Version 1.2

Louisiana Services Network Data Consortium

Effective Date
May 3, 2013

Louisiana Services Network Data Consortium
Policies and Standard Operating Procedures
Table of Contents

1. Organization and Management of the LSNDC
- 1.1. LSNDC Board
- 1.2. Fiscal Agency
- 1.3. State LSNDC System Administrator
- 1.4. Regional Lead Agency Operating LSNDC Locally
- 1.5. Regional LSNDC System Administrator
- 1.6. Participating Agency
- 1.7. Agency Administration
- 1.8. LSNDC User
- 1.9. System Availability
- 1.10. Ethical Data Usage
- 1.11. Inter-Agency Data Sharing
- 1.12. Support

2. Requirements for Agency Participation
- 2.1. Participating Agency Agreement
- 2.2. User Licenses
- 2.3. User Cost
- 2.4. User Activation
- 2.5. User Agreement
- 2.6. Hardware and Software Requirements and Maintenance
- 2.7. Training
- 2.8. Contract Termination

3. Security and Access
- 3.1. Security of Data on File Server
- 3.2. Back Up of Data on File Server
- 3.3. Updates/Upgrades to LSNDC
- 3.4. Data on File Server
- 3.5. Data Collection
- 3.6. User Access
- 3.7. User Changes
- 3.8. Passwords
- 3.9. Password Recovery
- 3.10. Use and Disposal of Exported Data

4. Data Collection, Quality Assurance and Reporting
- 4.1. Appropriate Data Collection
- 4.2. Client Grievances
- 4.3. Required Data Collection
- 4.4. Client Informed Consent
- 4.5. Client Release of Information to Share Data
- 4.6. Data Ownership
- 4.7. Data Entry Shared Information
- 4.8. Data Element Customization
- 4.9. Data Integrity

4.10. Monitoring and Evaluation
4.11. On-Site Review
4.12. Client Request for Data
4.13. Release of Data for Public Use

5. Disaster/Emergency Policy
5.1. Emergency Procedures
5.2. Chain of Command
5.3. Communication
5.4. System Continuity
5.5. Privacy Policy within LSNDC
5.6. Public Privacy Policy (Data Sharing with a Third Party)
5.7. Data Entry
5.8. Training

Louisiana Services Network Data Consortium
Policies and Standard Operating Procedures

This document details the policies and standard operating procedures that govern the operation of the Louisiana Services Network Data Consortium Management Information System (LSNDC System). It defines the roles and responsibilities of the LSNDC System Administrators, agencies and individuals accessing LSNDC System data. It includes important information on the way the LSNDC System data is secured and protected. All individuals accessing the LSNDC System must read and understand these Standard Operating Procedures.

INTRODUCTION

This document details the policies and standard operating procedures that govern the operation of the Louisiana Services Network Data Consortium Management Information System (LSNDC System). It defines the roles and responsibilities of the LSNDC System Administrators, agencies and individuals accessing LSNDC System data. It includes important information on the way the LSNDC System data is secured and protected. All individuals accessing the LSNDC System must read and understand these Standard Operating Procedures.

LSNDC System is administered by the Louisiana Services Network Data Consortium, a non-profit corporation acting in the behalf of the LSNDC Board. The LSNDC Board is comprised of regional Homeless Management Information System administrative agencies and nine regional Continua of Care that are under contract with the U.S Department of Housing and Urban Development (HUD) to provide homeless services. The central server is administered by the contracted HMIS software vendor, and the LSNDC administers licensing, training, and compliance.

The primary purpose of the LSNDC System is to provide a client and service data management tool to aid the regional Continua of Care to end homelessness in Louisiana and meet HUD requirements for CoCs to provide an unduplicated demographic report of the number and characteristics of clients served as well as program outcomes. This tool is Internet-based technology to assist homeless service organizations across Louisiana in capturing information about the clients that they serve.

The LSNDC System provides a standardized assessment of consumer needs creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating agencies, identify gaps in the local service continuum, and develop outcome measurements.

Benefits of LSNDC System

LSNDC System benefits homeless men, women, and children:

Improvements in service delivery for clients as case managers assess the client's needs, inform the client about available services on site or through referral, help the client find and keep permanent housing, and improve service coordination when information is shared between programs within one agency that are serving the same client.

LSNDC System benefits agencies, program managers and case managers:

Aggregate program-level and agency-level information and reports should be accessible to agencies and program managers to provide a more complete understanding of clients' needs and outcomes, advocate for additional resources, complete grant applications, conduct evaluations of program services and staff performance, and report to funders. Minimally, the software should be able to generate the program portions of the HUD Annual Progress Report (APR).

LSNDC System benefits the regional Continuum of Care:

Unduplicated, de-identified, system-wide information should be readily accessible to provide a more complete understanding of homelessness, clients' needs and outcomes, and program and system-level performance to inform policy decisions aimed at addressing and ending homelessness at local, state and federal levels. The software should also be able to generate data and/or reports to fulfill Federal Annual Homeless Assessment Report (AHAR), Continuum application requirements, and city-wide and system-level funding reports.

Definitions

Many of the terms used in this Policies and Standard Operating Procedures Manual may be new to many users. Definitions of some of these terms are as follows:

Agency Administrator: The person responsible for system administration at the agency level. This person is responsible for adding and deleting users, basic troubleshooting, and organizational contact with the Regional LSNDC System Administrator.

Authentication: The process of identifying a user in order to grant access to a system or resource; usually based on a username and password.

Authorized Agency: Any agency, organization or group who has an LSNDC Agency Agreement with the Regional LSNDC System Administrator and that is allowed access to the LSNDC database.

Bowman Systems: Also known as Bowman. The company that wrote the software used for the LSNDC, Bowman Systems, also houses and maintains the server owned by the LSNDC that holds our HMIS database.

Client: Any recipient of services offered by a Provider or Authorized Agency.

Client-level Data: Data collected or maintained about a specific person. This type of data can be de-identified for purposes of data analysis, which means that personally identifying information is removed from the record.

Database: An electronic system for organizing data so it can easily be searched and retrieved; usually organized by fields and records.

De-identified Data: Data that has been stripped of personally identifying information.

Encryption: Translation of data from plain text to a coded format. Only those with the "key" have the ability to correctly read the data. Encryption is used to protect data as it moves over the internet and at the database level through the use of special software.

Fiscal Agency: The agency chosen by the LSNDC governing board to manage the financial aspects of the corporation, including the general ledger, accounts payable, and accounts receivable. The Agency shall follow fiscal policies established by general accounting principles.

Firewall: A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

HMIS: Homeless Management Information System. This is a generic term for any system used to manage data about homelessness and housing. The HMIS used in Louisiana is called the LSNDC System.

HUD HMIS Data and Technical Standards (the Standards): The most recent HUD Standards published for Continuua of Care to systematically collect and report data for projects funded under Title IV of the McKinney-Vento Homeless Assistance Act. The current Standards were published in the July 30, 2004 Federal Register, Vol. 69, No. 146, pp. 45888 through 45934, with revisions released by HUD in March 2010. These standards fall into three categories: a) data elements required to be collected by HMIS users including "universal" and "program specific" data elements; b) Privacy and Security Standards for data confidentiality; and c) Technical Standards for the creation of HMIS data systems. Whenever the Standards are revised, this definition will reflect the most recently adopted revisions, and a change to the LSNDC policies is not required.

Identifying Information: Information that is unique to an individual and that may be used to identify a specific person. Examples of identifying information are name and social security number.

LSNDC: The non-profit 501c3 that operates the LSNDC System.

LSNDC System: The software system as well as the information input, generated or acquired in print or machine readable format.

Module: The ServicePoint software has several sections that focus on different types of functions related to HMIS. These sections, known as "modules," include ClientPoint (for entering client data), ResourcePoint (for looking up homeless services), and ShelterPoint (for checking clients in and out of beds). Modules may be added to the LSNDC as needed in the future.

Provider: ANY organization providing outreach, shelter, housing, employment and/or social services.

Regional LSNDC Lead Agency: Manages the LSNDC for their respective regional Continua of Care

Regional LSNDC System Administrator: The job title of the person at the regional HMIS administrating agency who provides technical support and training to Users. This person has the second highest level of user access in ServicePoint and has full access to all user and administrative functions within the respective region.

Server: A computer on a network that manages resources for use by other computers in the network. For example, a file server stores files that other computers (with appropriate permissions) can access. One file server can "serve" many files to many client computers. A database server stores a data file and performs database queries for client computers.

***ServicePoint*™:** A web-based software package developed by Bowman Systems which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning.

State LSNDC System Administrator: The job title of the person who is responsible for the coordination and administration of the LSNDC System. This person has the highest level of user access in *ServicePoint* and has full access to all user and administrative functions across the State.

User: An individual who uses a particular software package; in the case of the LSNDC, the *ServicePoint* software.

User License: An agreement with a software company that allows an individual to use the product. In the case of *ServicePoint*, user licenses are agreements between the Fiscal Agency and Bowman Systems that govern the distribution of regional licenses for individual connections to the LSNDC. User licenses cannot be shared.

Policy 1.0 Organization and Management of the LSNDC System

Responsible: LSNDC Board — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: May 3, 2013

Scope

This policy establishes requirements for the LSNDC Board regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

The LSNDC Board is comprised of regional HMIS administrative agencies and nine regional Continua of Care that are under contract with the U.S Department of Housing and Urban Development (HUD)and shall establish guidelines and operating policies for the LSNDC System to comply with federal regulation and guidance provided through the Department of Housing and Urban Development. These Policies and Standard Operating Procedures will be made available to all participating agencies, and a system of review will be established to ensure ongoing viability and responsiveness of policies to the project's environment.

Policy 1.1 LSNDC Board

Responsible: LSNDC Board — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: May 3, 2013

Scope

This policy establishes requirements for the LSNDC Board regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

The LSNDC Board is the governing body in control of the statewide HMIS system and has sole responsibility for the following programmatic areas: fundraising and resource development; consumer involvement; and quality assurance/accountability. The Board meets at least bi-monthly with one annual meeting. The Board is the final decision making authority of the LSNDC.

Membership of the LSNDC Board will be established according to the following guidelines:

- Target for membership will be 18 persons, with two designated representatives each from Regions II – IX and two representatives for Region I and X combined; advisory seats will be named as needed;
- There will be a concerted effort to find replacement representatives when participation has been inactive or inconsistent from the organizations involved in the project.

Roles and responsibilities of the Board include, but are not limited to:

- Determining the guiding principles that should underlie the implementation activities of the LSNDC, participating organizations and service programs;
- Selecting the minimal data elements to be collected by all programs participating in the LSNDC and adopting the Data Quality Plan for ensuring participation compliance;
- Defining criteria, standards, and parameters for the release of aggregate data;
- Ensuring adequate privacy protection provisions in project implementation;
- .Administer fees for usage of the statewide HMIS system;
- Selecting state administrators of the HMIS System; and

- Selecting and contracting with an HMIS software vendor

Policy 1.2 Fiscal Management

Responsible: LSNDC Board — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: May 3, 2013

Scope

This policy establishes requirements for the Governing Board regarding financial management of the corporation.

Policy Statement

The LSNDC Board has fiduciary responsibility for the corporation. All financial activities will be documented through General Accounting Principles and comply with financial regulatory requirements as applicable. In relation to fiscal management, the Board is the final decision making authority of the LSNDC.

The LSNDC Board shall adopt a budget; continuously review the operation of that budget and recommend appropriate changes therein during the fiscal year; supervise the financial operations of the corporation; make investment decisions; have the power to authorize the investment from time to time of the monies or other liquid assets of the Corporation and to authorize the sale of any such investments; and examine the report of the independent public accountants auditing the Corporation's accounts or the Fiscal Agency's accounts.

The LSNDC Board has the authority to contract with a fiscal agency to perform the day to day financial activities of the corporation. The Fiscal Agency will be required to follow the equivalent financial guidelines as the corporation and must be audited annually by an independent public accountant.

The Treasurer of the Board will ensure compliance of all financial policy and procedures and has the following responsibilities:

- have custody of the funds and securities of the Corporation;
- shall see to the deposit of all monies and securities to the credit of the Corporation in such depositories as may be designated by the Board of Directors and shall keep full and accurate accounts thereof and of all other financial matters of the Corporation;
- shall render a full report of transactions conducted as Treasurer whenever required by the Board of Directors and the books and accounts of the Treasurer shall at all times be open to the Board of Directors and to such persons as such Board may designate to inspect the same.

Policy 1.3 State LSNDC System Administrator

Responsible: Fiscal Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: May 3, 2013

Scope

This policy establishes requirements for the State LSNDC System Administrator regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

The LSNDC Board will contract to provide for State LSNDC System Administrator services. The State Administrator(s) will be responsible for the management and supervision of the LSNDC HMIS Statewide System. In the absence of the State LSNDC

System Administrator(s), the LSNDC Board President and/or the Executive Committee will designate a back-up staff person, until a new State Administrator is determined. The State LSNDC System Administrator(s) is governed by these Policies and Standard Operating Procedures.

The State LSNDC System Administrator is responsible for the following:

- Manage the day-to-day operations of the LSNDC System.
- Respond to all system-wide questions and issues;
- Provide quality assurance reports to the LSNDC Board;
- Build Agency Assessments upon written request from Regional LSNDC System Administrators;
- Issue Regional User Licenses to Regional LSNDC System Administrator;
- Provide support to Regional LSNDC System Administrators upon request;
- Manage version controls;
- Report regional data quality issues to Regional LSNDC System Administrator to ensure timely correction and support; and
- Manage password recovery to Regional LSNDC System Administrator.

Policy 1.4 Regional Lead Agency Operating LSNDC Locally

Responsible:	Regional Continua of Care	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes requirements for the Lead Agency regarding administration and management of the LSNDC System locally.

Policy Statement

The Lead Agencies will be designated by the local Continuum of Care and will designate a Regional LSNDC System Administrator to manage and operate the LSNDC System locally. The Lead Agency will enter into a contractual agreement (Agency Agreement) with each Participating Agency.

Lead Agency is responsible for the following:

- Act as the fiduciary for the operation of LSNDC System locally.
- House the System Administration.
- Guide the HMIS process locally.
- Convene/coordinate Community User Meetings and local group trainings upon request.
- Report database problems/successes to State LSNDC System Administrator.
- Attend System Administration User Meetings to share and benefit from the lessons learned across the State.
- With the help of the State LSNDC System Administrator, mine the database for continuum-wide numbers. The degree to which this activity occurs at a local level will be determined at the local level.

Policy 1.5 Regional LSNDC System Administrator

Responsible:	Regional Continua of Care	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope
This policy establishes requirements for the Regional LSNDC System Administrator regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement
Each Continuum of Care must identify a Lead Agency to administer the LSNDC System locally and will designate a staff member as the local HMIS administrator to manage the LSNDC system locally. The local administrator will be the Regional LSNDC System Administrator and will have regional administrative access. All Regional LSNDC System Administrators have full access to all agency records within their Continuum, and may have access to other Continua when appropriate. Regional administrators have access levels as dictated by the user agreement

The Regional LSNDC System Administrator is responsible for the following:

- Manage the day-to-day operations of the LSNDC System in the respective region
- Train and support Participating Agencies in the use of LSNDC System
- Communicate all statewide and regional news to Agency Administrators
- Respond to all Agency Administrator questions and issues
- Provide quality assurance reports to the State LSNDC System Administrator
- Submit requests of building Agency Assessments in writing to the State LSNDC System Administrator
- Issue End User Licenses
- Provide support to HMIS End Users upon request
- Manage notification of upgrades and updates to Agency Administrators
- Monitor data quality
- Manage password recovery for LSNDC End Users
- Prepare formal reports for the local Continuum of Care
- Mine database to respond to authorized requests of information
- Sign Participating Agency Confidentiality Oaths as requested
- Sign and Understand the LSNDC EndUser Agreement
- Complete required trainings with regard to Privacy and System Use.
- Respond to questions from the assigned Agency Administers and provide on-site help as needed.

Policy 1.6 Participating Agency

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements for the Participating Agency regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement
Each Regional Continuum of Care shall identify and solicit the participation of human service providers who are necessary contributors to the LSNDC system. These are to

include: emergency shelters, transitional housing programs, homeless outreach programs, permanent supportive housing providers, and homeless prevention programs.

In addition, each region may discretionally identify other service providers that could benefit from inclusion in the LSNDC system. Each Participating Agency will be accountable for adherence to the minimum data collection and technical standards set by the LSNDC System and the Regional Continuum of Care, where applicable, as detailed in the Standard Operating Procedures.

Before an agency can join the LSNDC System, an Agency Agreement with the Regional Continuum of Care must be signed and all policies and accompanying documentation must be adopted. The Participating Agency will be responsible for oversight of its own related confidentiality requirements and bears primary responsibility for oversight for all sharing of data it has collected via the LSNDC System.

Policy 1.7 Agency Administrator

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the Agency Administrator regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

Each Participating Agency must identify a staff member to be the LSNDC Agency Administrator. The LSNDC Agency Administrator is the single point of contact for communication purposes and is responsible for enforcing the data and security requirements under the Policy and Procedures. The Executive Director must submit in writing the name and contact information of the LSNDC Agency Administrator to the Regional LSNDC System Administrator. The Executive Director must notify the Regional LSNDC System Administrator of changes in personal in writing within one business day. If the LSNDC Agency Administrator does not have the capacity to fulfill the technical obligations of this role, arrangement can be made with the Regional LSNDC System Administrator prior to executing an Agency Agreement to ensure the Participating Agency is compliant with the data and security requirements of the LSNDC System.

The Agency Administrator is responsible for the following:

- Primary contact between the Participating Agency and the Regional LSNDC System Administrator
- Must have email, internet access, and a LSNDC User License
- Manages agency user licenses; adding and removing licensed users for their agency, at the discretion of the Regional CoC
- LSNDC System access must be revoked immediately upon termination from agency, placement on disciplinary probation, or upon any change in duties not necessitating access to LSNDC System information. All changes must be relayed in writing to the Regional LSNDC System Administrator
- Must be technically proficient with a web-based MIS since he/she will be responsible for maintaining the Authorized Agency's LSNDC System site

- Has access to all client data, user data and agency administration information for the Authorized Agency; thus is responsible for the quality and accuracy of these data
- Ensures the stability of the agency connection to the Internet and *ServicePoint*, either directly or in communication with other technical professionals
- Provides support for the generation of agency reports
- Monitors and enforces compliance with standards of client confidentiality and ethical data collection, entry, and retrieval at the agency level

Policy 1.8 LSNDC User

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the LSNDC User regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

Policy Statement

All LSNDC Users will have access to LSNDC data that is appropriate to the duties of their position so that client and service information can be recorded and accessed on a "need to know" basis. Multiple access levels are available allowing for more or less restrictive access to client data. Each Agency Administrator and/or Executive Director shall select an appropriate level of access for each LSNDC User licensed issue. LSNDC User Licenses are described in the User Level Attachment. Each User will complete a training course and sign the User Agreement prior to gaining access to the LSNDC System through the issuance of a license.

The User is responsible for the following:

- Adhering to all LSNDC policies as detailed in the User Agreement
- Securing his/her log-in information so that it will not be shared with another, including administrators or other staff
- Disclosing LSNDC participation and data usage to all clients prior to collection and entry
- Entering and updating client data in a "timely" manner

Policy 1.9 System Availability

Responsible: State LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for providing availability of database server and notification in advance of any disruption of server availability.

Policy Statement

All LSNDC Users will retain undisrupted access to the LSNDC System, with the exception of scheduled system maintenance. Notification of database unavailability will be posted to the "Newsflash" of the LSNDC System and sent to all users via e-mail no less than one week prior to the disruption.

Policy 1.10 Ethical Data Usage

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope
This policy establishes the baseline ethics for LSNDC data usage by anyone accessing the LSNDC System.

Policy Statement
Data contained in the LSNDC System is intended to be used to support or report on the delivery of homeless and housing services in the State of Louisiana. Each LSNDC User will affirm the principles of ethical data use and client confidentiality contained in the LSNDC Policies and Standard Operating Procedures Manual and the LSNDC User Agreement. Each Authorized Agency must have a written privacy policy that includes policies related to employee misconduct or violation of client confidentiality. All LSNDC Users must understand their Agency's privacy policy, and a LSNDC User Agreement must become a permanent part of the employee's personnel file.

The data collected in the LSNDC System is primarily the personal information of people in Louisiana who are experiencing a housing crisis. It is the user's responsibility as the guardian of that data to ensure that it is only used to the ends to which it was collected and in and the manner to which the individual client has given consent.

All users will sign an LSNDC User Agreement before being given access to the LSNDC System. Any individual or Authorized Agency misusing, or attempting to misuse LSNDC data will be denied access to the database, and his/her/its relationship to the LSNDC System may be terminated.

Policy 1.11 Inter-Agency Data Sharing

Responsible: Participating Agency	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements for any client data sharing from the Participating Agency inputting and releasing data to any other Participating Agency accessing the LSNDC System.

Policy Statement
Electronic data sharing varies between regions. The need for client confidentiality and the benefit of integrated case management should be balanced when discussing inter-agency data sharing. During the development of the statewide HMIS, the nine regions decided independently on the data sharing standards. Eight of the nine regions favor electronic data sharing within the LSNDC for the benefit of interagency case management. One region favors client confidentiality at the Participating Agency level. The inter-agency data sharing policy for the nine regions are as follows:

Regions II-IX share first name, last name, social security number and social security data quality fields of all clients entered into the LSNDC System with exception to domestic violence service agency and clients that explicitly refuse to be entered into the LSNDC System. All client data beyond these four fields may be shared if and only if the client signs a Release of Information with the exception of medical information and domestic violence information.

Regions I and X do NOT share any client data between Participating Agencies, although data sharing may occur across different programs operated within and by a single Participating Agency (depending on how each agency has chosen to set up their security settings). The data included in the Profile section of a client record will remain CLOSED.

Policy 1.12 Support

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of technical support for the LSNDC software application.

Policy Statement

The Regional LSNDC System Administrator shall provide ongoing support to the Participating Agency through training on the system and ongoing telephone Help Desk functions. Support will be established regionally at the Continuum of Care level. The Regional LSNDC System Administrator will acknowledge the receipt of inquiries in a timely manner. The Regional LSNDC System Administrator will provide electronic access to documentation and manuals regarding the use of the LSNDC System. The LSNDC System also contains an on-line Help file for user support.

Support will include the Regional LSNDC System Administrator verification that the network server and the LSNDC System are functioning correctly. Participating agencies are responsible for maintenance of their computer hardware and internet connectivity. The Regional LSNDC System Administrator will assist agency staff with questions that arise during the use of the LSNDC System. Participating agencies should contact the Regional LSNDC System Administrator with questions or problems that appear to be related to errors in the LSNDC System. The Regional LSNDC System Administrator may pass a description of the problem and an agency contact name to the Bowman Systems Technical Support. At the written request of participating agencies, the Regional LSNDC System Administrator will assist in the consolidation and deletion of duplicate client records.

Policy 2.0 Requirements for Agency Participation

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the Participating Agency and User to obtain authorization to access and use the LSNDC System.

Policy Statement

The Regional LSNDC System Administrator will ensure that anyone accessing the LSNDC System has met the following standards:

- The agency requesting to participate in the LSNDC has signed a Participating Agency Agreement and the agreement will be on file at the Regional LSNDC System Administrator agency. The agency accessing the LSNDC system shall ensure that measures have been taken to secure the physical location used for data entry. A computer that has the LSNDC System "open and running" shall never be arranged so that unauthorized individuals may see the information on the screen.
- The User requesting access to the system has been given written permission from the Agency Administrator to access the system.
- The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.

- The User will be assigned a user name and password once they have successfully participated in HMIS Training.

Policy 2.1 Participating Agency Agreement

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the Participating Agency Agreement.

Policy Statement

Only authorized Participating Agencies will be granted licenses to gain access to the LSNDC System. The Regional LSNDC System Administrator will make the sole determination to identify Participating Agencies. Participating Agencies ensure that all aspects of the Participating Agency Agreement are followed as specified.

- The agency requesting to participate in the LSNDC has signed a Participating Agency Agreement and the agreement will be on file at the Regional LSNDC System Administrator agency.
- The Participating Agency Agreement outlines responsibilities and duties of the LSNDC and the Participating Agency including requirements for all aspects of system access and use.
- The Participating Agency Agreements will include terms and duration of access, an acknowledgement of receipt of the Policies and Standard Operating Procedures Manual, and an agreement to abide by all provisions contained therein.

Policy 2.2 User Licenses

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the Participating Agency and end user to obtain and utilize user licenses to gain access and use the LSNDC System.

Policy Statement

1. Regional LSNDC System Administrators determine the number of licenses required and available for each Participating Agency. If necessary, the Participating Agency may incur any additional costs for licenses through the LSNDC based upon the current quote from the system provider.
2. In order to obtain a license, a User must successfully complete an approved training program by the Regional LSNDC System Administrator.
3. Participating Agency licenses will be assigned by the Regional LSNDC System Administrator.
4. Sharing of licenses, User IDs or passwords is strictly prohibited.

Policy 2.3 User Cost

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes cost requirements by Participating Agencies to gain access and use the LSNDC System.

Policy Statement

1. Should it become necessary to incur shared costs by participating agencies, the Regional LSNDC System Administrator shall determine the per agency cost, in consultation with and after advance approval of *-Name of local Continuum of Care-* and participating agencies.
2. Costs shall be documented and itemized with an invoice sent to the Participating Agency directly from the Regional LSNDC System Administrator.
3. Payments shall be made payable to the *–Name of local Continuum of Care-* and due *–insert payment schedule-*.
4. Costs shall be designated as follows: _____ per month totaling _____ per year.

Policy 2.4 User Activation

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the User activation to access and use the LSNDC System.

Policy Statement

1. The User requesting access to the system has been given written permission from the Agency Administrator to access the system through the submission of a LSNDC Account Request form to the Regional LSNDC System Administrator.
2. The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.
3. The User will be assigned a user name and password once they have successfully participated in Regional System Training.
4. Regional LSNDC System Administrators, or designated participating Agency Administrators, will distribute User licenses, adding and deleting Users as necessary.
5. Regional LSNDC System Administrators, or designated Participating Agency Administrators, will be responsible for training all new Users.
6. Regional LSNDC System Administrators may supplement training schedules through onsite visits.

Policy 2.5 User Agreement

Responsible:	Participating Agency and User	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the User to obtain authorization to access and use the LSNDC.

Policy Statement

Users must sign a User Agreement with the LSNDC acknowledging full understanding and acceptance of the responsibilities and the proper use of the User ID and password of the LSNDC System. Only individuals who can view information in the LSNDC System are authorized users along with the Client to whom the information pertains

Failure to uphold the standards set forth in the User Agreement items listed below are grounds for immediate termination of User privileges.

1. User ID and Passwords must be physically secure and cannot be shared with anyone, including other staff members, supervisors or Executive Director.
2. Access to the LSNDC System is limited to User designated work and their location must meet all HUD HMIS Data and Technical Standards.
3. Users of the LSNDC System, whatever their work role, position, or location, may view, obtain, disclose, or use client data from the LSNDC System only as is necessary to perform their specific job.
4. Failure to log off the LSNDC System appropriately may result in a breach in client confidentiality and system security. Users must log-off of the LSNDC System before leaving the work area for any reason.
5. A computer that has the LSNDC System "open and running" shall never be arranged so that unauthorized individuals may see the information on the screen.
6. Users must not change the closed security on any Client's signed LSNDC Client Release of Information. The LSNDC System security settings must always reflect the Client's expressed wishes as documented through the LSNDC Client Release of Information.
7. User access is revoked immediately upon employment termination
8. Users are responsible to immediately notify the Regional LSNDC System Administrator at [enter contact number] in the event that any breach of confidentiality is witnessed.

Policy 2.6 Hardware and Software Requirements and Maintenance

Responsible:	Participating Agency	Effective Date:	April 17, 2008
Authorized:	LSNDC Board	Last Revision:	May 3, 2013

Scope

This policy establishes hardware and software requirements for the Participating Agency to access and use the LSNDC.

Policy Statement

The Participating Agency shall maintain and secure the minimum required hardware, software and internet connectivity required in the Data Standards released by the Department of Housing and Urban Development. These minimum requirements include the following:

- Microsoft Operating System: Windows XP Professional
- Virus Protection Software: must automatically update and upgrade
- Anti-spy ware Software: must automatically update and upgrade
- Firewall: Can be software or hardware
- Internet Connectivity: must be DSL or higher
- PC: Pentium IV or higher
- PC Access: PC must be password protected with each user having a unique Login ID and Password

Bandwidth Recommendations:

The average user will need to sustain a 30-50 Kilobytes/Sec of download throughput to comfortably browse the LSNDC System. Internet Bandwidth Comparisons

- 56K Modem – Most users will achieve a connection between 26.4K – 46K depending upon the phone line quality. This will provide at least a 5.0 KB/S transfer rate which is low and not recommended for a single user.
- SDSL – 512Kbps/62.5KB/s. Allows eight users to concurrently browse LSNDC System or use the Internet.
- ADSL – 1.5-8Mbps/187.5KB/s-1MB/s. Allows 23 – 125 users concurrently to use LSNDC System or use the Internet. Distance limited to 18,000 feet.
- Cable – 1Mbps/122.1KB/s. Allows 15 users to concurrently use LSNDC System or the Internet.
- T1 – 1.544Mbps/188.5KB/s. Allows 23 users to concurrently use LSNDC System or the Internet.
- T3 – 44.763Mbs/5.461MB/s. Allows 682 users to concurrently use LSNDC System or the Internet.

Policy 2.7 Training

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes requirements to train all authorized personnel gaining access and use of the LSNDC.

Policy Statement

1. The Regional LSNDC System Administrator shall provide training to authorized Participating Agency personnel on use of the LSNDC.
2. Where applicable, training may occur across Regional Continua of Care to allow for greater training capacity for Participating Agencies.
3. The Regional LSNDC System Administrator shall utilize standardized training materials and curriculum as defined by the LSNDC Board in order to ensure that training is consistent across all regions.
4. Upon completion of training, the Participating Agency personnel should reasonably understand how each module works.
5. Tests and certifications may be required by the Regional LSNDC System Administrator.

Policy 2.8 Contract Termination

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the LSNDC to terminate a Participating Agency Agreement.

Policy Statement

The LSNDC may terminate the Participating Agency Agreement for non-compliance with the terms of the agreement or with the LSNDC Policies and Standard Operating Procedures with written notice to the Participating Agency. The LSNDC may also terminate the Participating Agency Agreement with or without cause with 15 days written notice to the Participating Agency and according to the terms specified in the Participating Agency Agreement. The termination of the Participating Agency Agreement may affect other contractual relationships with the local Continuum of Care or with funding agencies (HUD).

While the LSNDC may terminate the Participating Agency Agreement with the Participating Agency, all data entered into the LSNDC System will remain a part of the LSNDC System. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Louisiana. The termination of the Participating Agency Agreement may affect other contractual relationships with Continuum of Care or with funding agencies (HUD).

Many Participating Agencies are required to participate in the LSNDC System as a condition of specific funding. When terminating the Agency Agreement, the Executive Director of the regional continuum of care will notify the person from the Participating Agency who signed the Agency Agreement (or a person in the same position within the agency) 15 days or more prior the date of termination of contract, unless the termination is due to non-compliance with the LSNDC Policies and Standard Operating Procedures. Willful neglect or disregard of the LSNDC Policies and Standard Operating Procedures may result in immediate termination of a Participating Agency from the LSNDC System. The CoC Executive Director will also notify the Regional LSNDC System Administrator. In all cases of termination of Participating Agency Agreements, the Regional LSNDC System Administrator will inactivate all users from that Participating Agency on the date of termination of contract.

Policy 3.0 Security and Access

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for implementing and maintaining security and access to the LSNDC.

Policy Statement

The State LSNDC System Administrator, Regional LSNDC System Administrators, and LSNDC Participating Agencies will apply the user access privilege conventions set forth in the LSNDC Policies and Standard Operating Procedures, Policy 2.5 Users Agreement and 3.8 User ID and Password.

Policy 3.1 Security of Data on File Server

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes requirements to secure access to data on the Network Server and Bowman Systems.

Policy Statement

LSNDC Board shall establish and maintain controls to keep secure all client data in the LSNDC System. This shall prohibit access by individuals who are not registered with a Regional LSNDC System Administrator, and therefore, are unauthorized to receive Participating Agency and client data information through any and all means, including telephone, mail, and computer. All registration and addition of Participating Agency staff to the LSNDC System will be handled solely through the Regional LSNDC System Administrator. The Regional LSNDC System Administrator is responsible for assigning security codes and providing accessibility to the LSNDC System to only those authorized individuals designated by the Executive Director of the Participating Agency. Regional LSNDC System Administrator shall not be held liable for any breach in security related to any changes in authorized Participating Agency personnel if the Participating Agency has not notified the Regional LSNDC System Administrator; notification must be

documented through e-mail, or postmarked through postal mail, within one business day of the personnel changes.

Policy 3.2 Back Up of Data on File Server.

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes requirements to back up data to ensure continuity of access to data.

Policy Statement

The LSNDC Board shall contract with the software vendor to provide for the back-up of all information housed on the network server. Back up will be made each business day. The Fiscal Agency and Bowman Systems will provide documentation regarding back up procedures and disaster recovery.

Policy 3.3 Updates/Upgrades to LSNDC

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements to update/upgrade the LSNDC System.

Policy Statement

The Regional LSNDC System Administrator shall notify the Participating Agency of all updates and/or upgrades to the LSNDC System through email to the Executive Director and posting notice in the "System Wide News" of the LSNDC System homepage. All updates and/or upgrades to will occur no sooner than one business day after the notice.

Policy 3.4 Data on File Server

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of data access upon termination of the Participating Agency entering data into the LSNDC System.

Policy Statement

Upon termination of the Agency Partner Agreement, and at the Participating Agency's request, the Regional LSNDC System Administrator may assist the Participating Agency with generating a final global report of their data within a reasonable time frame. Notwithstanding anything in the agreement to the contrary, the Regional LSNDC Lead Agency and agencies using the Louisiana Services Network Data Consortium System shall have the continuing right after the termination of this agreement to retain and use a copy of the Participating Agency's data which was shared during the course of this agreement in furtherance of the Louisiana Services Network Data Consortium System programs and subject to any restrictions on use imposed by the clients to whom such data pertains and/or set forth in the provision hereof which, by their terms, survive termination of the agreement.

Policy 3.5 Data Collection

Responsible:	Participating Agency	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes the LSNDC adherence to data collection and data integrity requirements.

Policy Statement

The Participating Agency shall enforce with their staff the importance, quality, and accuracy of entering all data into the LSNDC System, as required in the Department of Housing and Urban Development Data Standards, After training of agency staff by the Regional LSNDC System Administrator, the Participating Agency has the responsibility to implement and manage a system for entering client data; the Regional LSNDC System Administrator will provide assistance with project management if requested by the Participating Agency. The Participating Agency must ensure that all selected personnel are trained on these procedures and adhere to the regulations as stated in the LSNDC Data Quality Plan, Appendix B.

Policy 3.6 User Access

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes requirements to appropriately add users of the LSNDC System as well as designate system use restrictions.

Policy Statement

User Access levels will be deemed by the Executive Director of the Partner Agency in consultation with the Regional LSNDC System Administrator. These levels should be reflective of the access a user has to client-level paper records and should be need-based. The Regional LSNDC System Administrator will generate usernames and passwords within the administrative function of the LSNDC System. User ID and Passwords are to be assigned to individuals who have passed the Regional LSNDC System training and who have understood and signed all appropriate LSNDC user agreements and related document.

Access to the software system will only be allowed from computers and networks meeting HUD Technical Standards and specifically identified by the Executive Director and Site Administrator of the Participating Agency. Access to the LSNDC System from unauthorized locations will be grounds for termination of the LSNDC user rights.

Policy 3.7 User Changes

Responsible:	Participating Site Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements to appropriately modify or delete users of the LSNDC System.

Policy Statement

The Agency's Executive Director, or the employee's immediate supervisor, must notify the Regional LSNDC System Administrator of a user's termination from the agency, placement on disciplinary probation, or upon any change in duties not necessitating access to LSNDC System information within one business day of the occurrence. If a staff person is to go on leave for a period of longer than 45 days, their password should be inactivated within 24 hours of the start of their leave.

Policy 3.8 User ID and Passwords

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements to create and disseminate User IDs and passwords.

Policy Statement
Authorized users will be granted a unique user ID and password. Each user will be required to enter a User ID with a Password in order to logon to the system. User ID and Passwords are to be assigned to individuals. The User ID will be the first initial and full last name of the user. If a user has a first initial and last name that is identical to a user already in the system, the User ID will be the first initial and last name plus the numbers "01".

The initial, temporary password will be automatically generated by the LSNDC System and will be issued to the User by the Regional LSNDC System Administrator. These passwords may be communicated in written or verbal form only. After logging in to the system for the first time with the temporary password, the new password the User selects must be no less than eight and no more than sixteen characters in length and must include at least two numbers.

Forced Password Change will occur every forty-five days once a user account is issued. Passwords will expire and users will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.

Policy 3.9 Password Recovery

Responsible:	Participating Agency Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements to reset create and communicate a new user password.

Policy Statement
If a User unsuccessfully attempts to log onto the system four times, the User ID will be "locked out," access permission will be revoked, and the User will be unable to gain access until their password is reset.

The reset password will be automatically generated by the LSNDC System and will be issued to the User by the Regional LSNDC System Administrator or Agency Administrator. These passwords will be communicated in written or verbal form.

Policy 3.10 Use and Disposal of Exported Data

Responsible:	Participating Agency	Effective Date: February 3, 2012
Authorized:	LSNDC Board	Last Revision: February 3, 2012

Scope
This policy establishes requirements for the exported and disposal of exported LSNDC System data.

Policy Statement
Users who have been granted access to the LSNDC Report Writer or Advanced Reporting Tool (ART) have the ability to download and save client level data onto their local computer. Once this information has been downloaded from the LSNDC server in raw format to an agency's computer, the data then become the responsibility of the agency. A participating Agency must develop a protocol regarding the handling of data downloaded from the Report Writer or ART tool.

The Participating Agencies shall establish internal extracted data protocols. Issues to be addressed include storage, transmission and disposal of the data.

Policy 4.0 Data Collection, Quality Assurance and Reporting

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes Participating Agency requirements for data collection, quality assurance and reporting in the LSNDC System.

Policy Statement

The State LSNDC System Administrator, Regional LSNDC System Administrators, and LSNDC Participating Agencies will apply the data collection, quality assurance and reporting standards set forth in the LSNDC Policies and Standard Operating Procedures.

Policy 4.1 Appropriate Data Collection

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes Participating Agency requirements for inputting data into the LSNDC System.

Policy Statement

The purpose of the LSNDC is to support the delivery of homeless and housing services in Louisiana. The database should only be used to collect or track information related to meeting the client's needs, the delivery of services and for policy development and planning purposes.

LSNDC users will only collect client data that is

- relevant to the delivery of services,
- required by funders, or
- mandated by law.

Procedure

Agency Administrators will ask the Regional LSNDC System Administrator for any necessary clarification of appropriate data collection. The State LSNDC System Administrator, in consultation with the Board of Directors, will make decisions about the appropriateness of data being entered into the database. LSNDC will periodically audit picklists and agency-specific fields to ensure the database is being used appropriately. This concern targets data elements that can be consistently tracked and reported, and does not specifically target the contents of case management notes or other fields not to be aggregated.

Policy 4.2 Client Grievances

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Dec. 15, 2011

Scope

This policy establishes Participating Agency requirements for managing client grievances related to the LSNDC System.

Policy Statement

Clients shall have the right to an independent, impartial review of any complaints they may have regarding LSNDC data collection, explanations offered for that collection, and policies surrounding the collection. They also have a right to know about this opportunity.

Agencies must make every good faith effort to assure that homeless clients are apprised of our obligation and their right. To that end each agency must adhere to the process for filing a formal grievance with the Regional LSNDC System Administrator should a client determine his LSNDC data privacy rights have been compromised by the Participating Agency.

Procedure
Each Agency shall inform their clients of their LSNDC data privacy rights by prominently displaying the LSNDC Public Notice of Privacy wherever LSNDC data is collected, as well as making the LSNDC Privacy Notice available. In the event a client believes his LSNDC data privacy rights have been compromised by the Participating Agency, he should file a formal complaint by submitting a completed LSNDC Grievance Form with the Regional LSNDC System Administrator. It is the responsibility of the Agency to ensure that the grievance form is readily accessible to clients. The Regional LSNDC System Administrator will research the written grievance and determine if there was a violation of LSNDC data privacy rights. Should the Regional Administrator conclude that a breach has been made, he shall provide the Participating Agency with a timely plan of action for

Policy 4.3 Required Data Collection

Responsible: Participating Agency	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: May 3, 2013

Scope
This policy establishes Participating Agency data collection requirements to be entered into the LSNDC System.

Policy Statement
Providers funded by HUD are required to participate in the LSNDC system to meet the HUD HMIS Data and Technical Standards. Other providers may choose to participate in the LSNDC. All Authorized Agencies that participate in the LSNDC are required to comply with HUD's HMIS Data and Technical Standards unless those standards are in conflict with local laws. This includes the collection of required data elements.

If client refuses or is unable to provide basic information, providers shall, at a minimum, enter each client as an Anonymous Entry into the LSNDC System. Authorized Agencies may choose to collect more client information for their own case management and planning purposes.

Timeliness of Data Entry: Quality assurance of timeliness is described in the LSNDC Data Quality Plane, Appendix B. All HMIS Participating programs will ensure entry/exits, services, and Universal Data Elements are completed within 5 business days of program entry/exits, with exceptions for emergency Shelters, outreach programs, and legacy data. LSNDC timeliness of data entry policy will not supersede more stringent CoC timeliness of data entry policies. Exceptions to these data collection policies are in place for organizations serving persons fleeing domestic violence; these organizations should request additional instruction from the Regional LSNDC System Administrator.

In order for the data contained within the LSNDC System to be useful for data analysis and reporting to funders, certain minimum data must be consistently collected throughout the system. In addition to the HUD required Data Elements, client level data is expected as well.

Procedure
All parties are subject to the LSNDC Data Quality Plan, Appendix B, for determining procedural applications of the data collection policies and monitoring practices.

Policy 4.4 Client Informed Consent
Responsible: Participating Agency Effective Date: April 17, 2008
Authorized: LSNDC Board Last Revision: Jan. 22, 2010

Scope
This policy establishes Participating Agency requirement to obtain client informed consent prior to inputting data into the LSNDC System.

Policy Statement
Each agency must post a sign at each intake or comparable location and on its web site (if applicable) explaining the reasons for data collection for those seeking services. Consent for entering of data into the LSNDC System may be inferred when the proper privacy notice is posted and if the client accepts the services offered. The client has the option to opt out of allowing his or her identifying information to be added to the database. In that case, the client's data should be added to the LSNDC System without identifiers as described above, although the record should be tracked internally by the agency to minimize the number of duplicate records for one client. Electronic client data will be shared between agencies in accordance to the policies adopted by the LSNDC Board of Directors and negotiated between the regions. Client data may be shared through other means with written client consent or according to the privacy policy developed by the agency.

Privacy Policies should be in effect for each agency to both inform clients about the uses and disclosures of their personal data and to protect the agency by establishing standard practices for the use and disclosure of data. Each client must give permission for the disclosure and/or use of any client data outside of the privacy policy developed and posted by the agency. Client consent notices must contain enough detail so that the client may make an informed decision. Clients may withdraw permission to have their personal protected information in the LSNDC System, or may make a request to see copies of his or her client record.

Procedure
The Regions represented in the LSNDC System shall assume responsibility for monitoring their Agencies' compliance. The results and the means of determining them will be shared between Regions.

Policy 4.5 Client Release of Information to Share Data
Responsible: Participating Agency Effective Date: April 17, 2008
Authorized: LSNDC Board Last Revision: Jan. 22, 2010

Scope
This policy establishes Participating Agency requirement to obtain client informed consent prior to sharing data in the LSNDC System.

Policy Statement

Each agency should include in its privacy policy that data collected by the agency is included in the LSNDC System as part of its administrative responsibility to its Continuum of Care and that aggregate, de-identified data may be used for analysis and reporting purposes. LSNDC will only report aggregate and/or de-identified data as part of its responsibilities, and agrees to maintain the data with the highest level of confidentiality and within the security guidelines set forth in this document.

Policy 4.6 Data Ownership

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes the requirement and responsibilities connected to data ownership of data within the LSNDC System.

Policy Statement

The LSNDC System, and any and all data stored in the system, is the property of the LSNDC System. The LSNDC Board of Directors has authority over the creation, maintenance, and security of the LSNDC System. Violations of the LSNDC Agency Agreement, the LSNDC Policies and Standard Operating Procedures, the Privacy Policies, or other applicable laws may subject the Authorized Agency to discipline and/or termination of access to the LSNDC System.

In order to ensure the integrity and security of sensitive client confidential information and other data maintained in the database, LSNDC will be responsible for data ownership.

Policy 4.7 Data Entry Shared Information

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes the requirement and responsibilities connected to sharing client profile information within the LSNDC System.

Policy Statement

From CoC to CoC, there are different policies about sharing information maintained in client records. The LSNDC System has a policy to allow First Name, Last Name, Social Security Number and Social Security Data Quality fields to be shared across providers and regions. Regional CoC may designate profile information as “CLOSED” in accordance to the policy set by the Regional CoC. In any case, a Release of Information form, signed by the client, must be kept on file and indicated in the LSNDC system.

In order to continue building our LSNDC System and the collaboration between CoC’s, the Board is open to the differing needs and sensitivities of each CoC; however, we are supporting an OPEN system.

Policy 4.8 Data Element Customization

Responsible: Participating Agency — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes the requirement for customization of data fields within the LSNDC System.

Policy Statement

Authorized Agencies may have fields available for agency-specific customization.

LSNDC System may include fields that can be customized on the Authorized Agency level to reflect the program-specific data collection needs of its programs. These fields are part of the LSNDC Software and are available at no additional cost. The State LSNDC System Administrator will have the ability to customize these fields.

Agency Administrators may request that their Regional LSNDC System Administrator customize the agency-specific fields.

Policy 4.9 Data Integrity

Responsible: Participating Agency	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: May 3, 2013

Scope

This policy establishes the requirement to ensure data integrity of the LSNDC System.

Policy Statement

LSNDC users will be responsible for the accuracy of their data entry. Authorized Agency leadership will be responsible for ensuring that data entry by users is being conducted in a timely manner and will also develop procedures to evaluate and increase the accuracy of the data entered.

The quality of LSNDC data is dependent on individual users to take responsibility for the accuracy and quality of their own data entry. The Regional LSNDC System Administrators shall work with Agency Executive Directors and/or Agency Administrators in assuming responsibility for and in the monitoring of data quality for their own region or agency. It is in the interest of agencies and the CoC's that all data collected have integrity since that data may be used for evaluation, reporting, monitoring, or funding purposes. In particular the data will impact funding opportunities during competitive SHP process. LSNDC emphasizes, analyzes, and reports on data quality as a service to member agencies. All parties are subject to standards as determined in the LSNDC Data Quality Plan, Appendix B.

Procedure

In order to test the integrity of the data contained in the LSNDC System, the State LSNDC System Administrator, in consultation with Regional LSNDC System Administrators, will devise regular data integrity checks for the LSNDC.

Policy 4.10 Monitoring and Evaluation

Responsible: Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes the requirement for monitoring and evaluating the LSNDC System.

Policy Statement

Accurate and consistent data entry is essential to ensuring the usefulness of the LSNDC. Agencies will provide acceptable levels of timeliness and accuracy. Agencies without acceptable levels of data quality or timeliness may incur any sanctions permissible under the By-laws or negotiated by the Board and Regional CoCs until problems are addressed.

Data quality is an important aspect of the LSNDC System, and must be maintained at the agency level and by users of the system. The Regional LSNDC System Administrators will monitor data quality as part of their management functions.

Procedure
The State LSNDC System Administrator will work with Regional LSNDC System Administrators to develop and perform regular data integrity checks and will be required to report on a regular basis.

Policy 4.11 On-Site Review

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes the requirement for an on-site review of the LSNDC System.

Policy Statement
Since the LSNDC is a statewide collaborative, annual review of each contracted agency will be the responsibility of the Regional LSNDC System Administrator, however the LSNDC Board of Directors will develop consistent procedures for the entire state.

Regular reviews enable the LSNDC to monitor compliance with the Standard Operating Procedures Manual and the LSNDC Agency Agreements. However, in the main, this review is more easily facilitated on the regional level with proper oversight.

Procedure
The exact procedures for on-site reviews will be determined by the LSNDC Board of Directors on an annual basis.

Policy 4.12 Client Request for Data

Responsible:	Participating Agency	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes the requirement for managing a client's request for their LSNDC System data.

Policy Statement
Any client may request to view, or obtain a printed copy of his or her own records contained in the LSNDC System. The client will also have access to a logged audit trail of changes to those records. No client shall have access to another client's records in the LSNDC System.

The data in the LSNDC System is the personal information of the individual client. Each client has a right to know what information about him or her exists in the database, and to know who has added, changed or viewed this information, and when these events have occurred. This information should be made available to clients within a reasonable time frame of the request.

Procedure
A client may ask his/her case manager or other agency staff to see his or her own record. The case manager, or any available staff person with the LSNDC System access, will verify the client's identity and print all requested information. The case manager can also request a logged audit trail of the client's record from the Agency Administrator. The Agency Administrator will print this audit trail; give it to the case

manager, who will give it to the client. The client may request changes to the record, although the agency can follow applicable law regarding whether to change information based on the client's request. A log of all such requests and their outcomes should be kept on file in the client's record.

Policy 4.13 Release of Data for Public Use

Responsible: Participating Agency	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: Oct 5, 2009

Scope

This policy establishes the requirement for managing public requests for LSNDC System data.

Policy Statement

Any requests for statewide reports or information from an individual or group who has not been explicitly granted access to the LSNDC System will be directed to the LSNDC Reporting Committee. The LSNDC will only address requests for statewide or cross-regional, where it is not otherwise available, data from entities other than Authorized Agencies or clients. Requests for regional data at the Continuum of Care level will be directed to the Regional LSNDC System Administrator. No individual client data will be provided to any group or individual that is neither the Authorized Agency that entered the data or the client him or herself without proper authorization or consent.

LSNDC will release routine aggregate reports for the larger community, which will address, but are not limited to, statewide descriptive and demographical statistics. In instances where the LSNDC is mandated contractually to provide HMIS data, reports will be provided for purposes of monitoring services delivery and/or program evaluation. The content of these reports will reflect a commitment to client confidentiality and ethical data use. No individual client data will be provided to meet these requests without proper authorization or consent as stated in the LSNDC's Privacy Policy

Procedure

As part of the mission to end homelessness in Louisiana, it is the LSNDC's policy to provide aggregate data on homelessness and housing issues in this area. LSNDC will also issue periodic routine public reports, which will be published and posted on the LSN's website, upon final approval of the LSNDC Board. No individually identifiable client data will be reported in any of these documents. Wherein the LSNDC is contractually obligated to provide de-indentified data to funders for program monitoring and evaluation, the State LSNDC System Administrator shall prepare and submit reports to the appropriate bodies.

All requests for data from anyone other than an Agency or Regional LSNDC System Administrator or a client, which cannot be satisfied by either of the aforementioned conditions, will be directed to the LSNDC Reporting Committee for a recommendation to the Board. The Executive Committee may act on behalf of the Board to expedite urgent requests.

Policy 5.0 Disaster/Emergency Policy

Responsible: Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements for the use and response of the LSNDC Systems in the event of a disaster/emergency.

Policy Statement
The State LSNDC System Administrator, Regional LSNDC System Administrators, and LSNDC Participating Agencies will apply the Disaster/Emergency Policy set forth in the LSNDC Policies and Standard Operating Procedures in the event of a disaster/emergency.

Policy 5.1 Emergency Procedures

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements for each Region to develop and maintain detailed procedures which will be activated in the event of a disaster/emergency.

Policy Statement
Every Regional LSNDC Lead Agency shall develop and maintain a Disaster/Emergency Procedures Manual which shall be activated when a disaster significant enough to cause widespread damage occurs or when an emergency significantly impacts the Regional LSNDC Lead Agency's services or client population. These procedures will include the following:

1. A detailed evacuation plan and checklist
2. A list of tasks to be taken before, during, or immediately following a disaster/emergency
3. a matrix of functional responsibilities in the acute phase of a disaster
4. An emergency operations roster
5. A list of key external contact phone numbers/email addresses (see Policy 5.3)
6. Staff report-in policies and procedures
7. A list of local, state, and federal emergency numbers
8. Contingency plan for moving agency operations to a non-affected location (see Policy 5.4)
9. A detailed Chain of Command/checklist of key duties which will be assigned to Regional staff following an disaster/emergency (see Policy 5.2)
10. An overall agency task list broken down by phases of a disaster (warning, response, relief, recovery, and mitigation)

The Manual shall contain detailed instructions for coordinating with other Regional LSNDC Lead Agencies and where, when and how to communicate with local, state, and federal emergency entities. Each Regional LSNDC System Administrator will share her/his Manual with the other Regional LSNDC Lead Agencies and will encourage Participating Agencies to develop a similar Disaster/Emergency Procedures Manual.

Policy 5.2 Chain of Command

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope
This policy establishes requirements to plan and maintain a Chain of Command in the event of a disaster/emergency.

Policy Statement
Every Regional LSNDC Lead Agency shall develop and maintain a detailed Chain of Command (to be implemented within their Emergency Procedures Manual), which will

follow standard Incident Command System (ICS) language during the acute phase of a disaster. The Chain of Command will include the following Disaster/Emergency positions which will be assigned to Agency staff (and their alternates):

1. Emergency Manager
2. Planning Team Chief
3. Operations Team Chief
4. Logistics Team Chief
5. Finance Team Chief

A detailed checklist and duties description of each Disaster/Emergency position shall be maintained and implemented in the event of a disaster/emergency. All Regional Administrators' updated Chain of Command list should be submitted to the System Administrator.

Policy 5.3 Communication

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements to plan and maintain a detailed communication flow in the event of a disaster/emergency.

Policy Statement

Every Regional LSNDC Lead Agency shall develop a detailed communication plan (to be implemented within their Emergency Procedures Manual). This plan will include an updated contact list of every Regional LSNDC Lead Agency staff member (including cell phone, alternate land line, and easily accessible email address). The communication plan may include a toll-free land line phone number which staff members could call to report in to their supervisor. Communication methods shall include alternate methods of communication, such as text messaging and website news/check-in. All Regional Administrators' updated contact information (relevant to the LA Statewide HMIS) shall be submitted to the State LSNDC System Administrator.

Policy 5.4 System Continuity

Responsible: Regional LSNDC System Administrator — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of maintaining system-wide continuity of service before, during and following a disaster/emergency.

Policy Statement

Every Regional LSNDC Lead Agency shall develop and maintain an agency continuity plan (to be implemented within their Emergency Procedures Manual) in the event of a disaster/emergency. This plan may include signed MOUs with agencies in other Regions and should include specific details about when, how, and where the Regional office should move. All Regional Administrators' updated System Continuity Plans should be shared with the System Administrator.

Policy 5.5 Privacy Policy within the LSNDC

Responsible: Regional CoC Director — Effective Date: April 17, 2008
Authorized: LSNDC Board — Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of maintaining existing privacy standards and defines the procedure for sharing specific client data within the LSNDC in the event of a disaster/emergency.

Policy Statement

All Regional LSNDC Lead Agency privacy policies concerning client information entered into the LSNDC shall remain enforced before, during and after an emergency/disaster. The regional Director (or Acting Director) of the affected CoC will make decisions regarding the appropriateness of regional client data shared during a disaster/emergency, strictly honoring all existing client confidentiality and Release of Information policies and documents but reserving the right to share specific confidential client data with another Regional LSNDC member agency if it is deemed that the sharing of such data is critical to the safety or health of the client. Any sharing of data outside of normal procedures must be signed off by the regional Director (or Acting Director) of the affected CoC, and the specific data sharing (specifically what data is shared and with whom) must be documented both electronically and physically.

Policy 5.6 Public Privacy Policy (Data Sharing with a Third Party)

Responsible:	Regional CoC Director	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of maintaining existing privacy standards and defines the procedure for sharing specific client data with a Third Party in the event of a disaster/emergency.

Policy Statement

All Regional LSNDC Lead Agency privacy policies concerning client information entered into the LSNDC shall remain enforced before, during and after an emergency/disaster. The regional Director (or acting Director) of the affected CoC will make decisions regarding the appropriateness of regional client data shared during a disaster/emergency, strictly honoring all existing client confidentiality and Release of Information policies and documents but reserving the right to extract and share disaster/emergency client data on an individual basis for life or death circumstances (e.g. information such as “where are they now, what is their mental/medical condition, what services are needed”). Any sharing of data outside of normal procedures must be signed off by the regional Director (or acting Director) of the affected CoC, and the specific data extraction must be documented both electronically and physically.

Policy 5.7 Data Entry

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of data entry into the LSNDC in the event of a disaster/emergency.

Policy Statement

In the event of a disaster/emergency that affects one or more Regions in the state, the LSNDC could potentially be utilized as a data interface/receptacle for relief and recovery Information & Referral services in addition to its standard roles. The Regional LSNDC System Administrator, in consultation with the Board of Directors and DTAP staff, will make decisions regarding the appropriateness of data being entered into the database during a disaster/emergency. The State LSNDC System Administrator or a Regional LSNDC System Administrator will ensure that all new users entering in such data will be

given appropriate security access so that no existing confidentiality policies are breached.

Policy 5.8 Training

Responsible:	Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized:	LSNDC Board	Last Revision: Jan. 22, 2010

Scope

This policy establishes requirements of training new LSNDC users in the event of a disaster/emergency.

Policy Statement

If the LSNDC is temporarily utilized as a data interface/receptacle for Relief and Recovery Information & Referral during a disaster/emergency, a Regional LSNDC System Administrator shall provide training to disaster/emergency personnel on the use of the LSNDC. Upon completion of training, the new user should reasonably understand how each module works. All existing LSNDC rules, procedures, policies and agreements still apply to the disaster/emergency user. The State LSNDC System Administrator or a Regional LSNDC System Administrator will ensure that all new users entering in disaster/emergency data will be given appropriate security access so that no existing confidentiality policies are breached.

Appendix A

Louisiana Services Network Data Consortium (LSNDC)
Board Membership

Effective Date: May 3, 2013

REGION I AND X - New Orleans/Jefferson Parish CoC
Parishes: Orleans and Jefferson

Ms. Vicki Judice
UNITY of Greater New Orleans
2475 Canal Street. Suite 300
New Orleans, LA 70119
Phone: (504) 821-4496

Mr. Clifton Harris
VIA LINK
2820 Napoleon Avenue
New Orleans, LA 70115
Phone: (504) 897-4877

REGION II - Baton Rouge CoC
Parishes: Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, West Feliciana

Mr. Randy Nichols
Capital Area Alliance for the Homeless
5850 Florida Boulevard
Baton Rouge, LA 70806
Phone: (225) 201-0696

Mr. Corey Dyer
Capital Area Alliance for the Homeless
5850 Florida Boulevard
Baton Rouge, LA 70806
Phone: (225) 201-0696

REGION III - Houma-Terrebonne CoC
Parishes: Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, Terrebonne

Mr. Willie Green
Gulf Coast Social Services, Inc.
320 Progressive Boulevard
Houma, LA 70360
Phone: (985) 851-4488

Mr. Brooke Guidry
Start Corporation
420 Magnolia Street
Houma, LA 70360
Phone: (985) 879-3966

REGION IV - Lafayette/Acadiana CoC
Parishes: Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, St. Mary, Vermillion

Mr. Eric Gammons
Acadiana Regional Coalition on
Homelessness & Housing, Inc.
P.O. Box 3936
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Phone: (337) 235-4972

Mr. Andrew Zegura
Acadiana Regional Coalition on
Homelessness & Housing, Inc.
P.O. Box 3936
Lafayette, LA 70502
Phone: (337) 235-4972

REGION V - Lake Charles/Southwestern Louisiana CoC
Parishes: Allen, Beauregard, Calcasieu, Cameron, Jefferson Davis

Tarek Polite
Lake Charles/Southwest Louisiana Continuum of Care
1011 Lakeshore Drive Suite #606
Lake Charles, LA 70601
Phone: (337)721-3550
Fax: (337)437-3202

Mr. Randall Hebert
Volunteer Center of Southwest Louisiana
1023 Common Street
Lake Charles, LA 70601
Phone: (337) 439-6109

REGION VI - Alexandria/Central Louisiana CoC
Parishes: Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Vernon, Winn

Ms. Renee Brannon
Vernon Community Action Council, Inc.
1307 South Fifth Street
Leesville, LA 71446
Phone: (318) 443-0500

Ms. Kendra Gauthier
Central Louisiana Homeless Coalition
Post Office Box 1303
Alexandria, LA 71309
Phone: (318) 443-0500

REGION VII - Shreveport/Bossier/Northwest CoC
Parishes: Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River, Sabine, Webster

Ms. Christa Pazzaglia
HOPE for the Homeless
762 Austin Street
Shreveport, LA 71101
Phone: (318) 670-4591

Ms. Tosha Stamps
HOPE for the Homeless
762 Austin Street
Shreveport, LA 71101
Phone: (318) 670-4591

REGION VIII - Monroe/Northeast Louisiana CoC
Parishes: Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, West Carroll

Ms. Lawana Brown
The Wellspring Alliance
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Monroe, LA 71202
Phone: (318) 807-6200

Ms. Kattina Brittan
The Wellspring Alliance
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Monroe, LA 71202
Phone: (318) 807-6200

REGION IX - Slidell/Livingston/Southeast Louisiana CoC
Parishes: Livingston, St. Helena, St. Tammany, Tangipahoa, Washington

Ms. Dee Wild
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Appendix B

Data Quality Plan

Louisiana Service Network Data Consortium

November 2nd, 2012

Developed by:
LSNDC Data Quality Committee

Data Quality 1.0 Definition: Data Quality Plan	
Responsible: Data Quality Committee	Effective Date: November 2nd, 2012
Authorized: LSNDC Board	Last Revision: November 2nd, 2012

A data quality plan is a document that facilitates the ability of LSNDC to achieve statistically valid reliable data.

Note: This plan is subject to change to accommodate new standards released by HUD

The plan will:

- Identify the responsibilities of all parties within LSNDC that affect data quality
- Establish specific data quality benchmarks for timeliness, completeness, and accuracy
- Describe the procedures that the LSNDC will take to implement the plan and monitor progress to meet data quality benchmarks.

Data Quality 1.1 Timeliness	
Responsible: Data Quality Committee	Effective Date: November 2nd, 2012
Authorized: LSNDC Board	Last Revision: November 2nd, 2012

All data shall be entered into the HMIS in a timely manner to ensure access to data when it is needed for reporting purposes. To that end, the following timeliness benchmark is set forth:

General Standard:

All HMIS participating programs will ensure entry/exits, services, and Universal Data Elements are completed within 5 business days of program entry/exit.

Exceptions:

1. *Emergency Shelters*: All HMIS Participating Emergency Shelter programs will ensure entry/exits, services, and Universal Data Elements are completed within 2 business days of initial contact.

2. *Outreach Programs*: All HMIS Participating Outreach Programs will ensure entry of limited basic demographics as provided by client and services within 5 business days of initial contact.

3. *Legacy Data*: There will be a grace period determined on a case by case basis for how quickly the data should be entered into the HMIS. Legacy Data is information stored in an old or obsolete format or computer system that is, therefore, difficult to access or process. This includes implementations running a previous version of ServicePoint.

Data Quality 1.2 Completeness		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

Complete HMIS data is necessary to fully understand the demographic characteristics and service use of persons in the system. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, such as:

- Unduplicated counts of clients served at the local level
- Patterns of use of people entering and exiting the homeless assistance system
- Evaluation of the effectiveness of homeless systems

Data Quality 1.2.1 Completeness: Program Descriptor Data Elements		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

Program Descriptors include information about programs that are required for reporting purposes and enhance the HMIS as a tool for supporting information and referral services.

General Standard:

All Program Descriptor Data Elements are required as part of basic administrative setup of programs utilizing the LSNDC, no null/missing Program Descriptor Data Elements are allowed. The PDDE's should be entered no later than 5 days from the time the Provider is created in the LSNDC. They should also be reviewed annually and any changes should be recorded.

Program Descriptor Data Elements:

1. Organization Identifier
2. Organization Name
3. Program Identifier
4. Program Name
5. Direct Service Code
6. Site Information
7. Continuum of Care Number
8. Program Type Code
9. Bed and Unit Inventory Information (Residential Programs Only)
10. Target Population A(Optional)
11. Target Population B (Residential Programs Only)
12. Method for Tracking Residential Program Occupancy (Residential Programs Only)

13. Grantee Identifier (Required for HPRP Programs)

Data Quality 1.2.2 Completeness: All Clients Served		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

It is a HUD expectation that all clients receiving homeless assistance will have their service delivery documented in the HMIS.

General Standard:

All programs using the HMIS shall enter data on all clients in accordance with the newest relevant HMIS Data and Technical Standards. Anonymous entry is not encouraged but allowed when necessary.

Exceptions:

1. Non-HUD Funded Programs are required to have a minimum of 80% of each Universal Data Element on all clients.

2. Homeless Service Providers whose primary target population is victims of domestic violence are currently collecting the data and providing non-identifiable data to the local CoC and are statutorily disallowed from entering client data into the HMIS.

3. If a client refuses to have information input into the HMIS the Homeless Service Provider is not held responsible.

4. When agencies host special events (For Example: Christmas Baskets, Christmas Tree Programs, Easter Baskets, etc.) they are not required to record information on all clients who participate in the event.

Data Quality 1.2.3 Completeness: Universal Data Elements		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

Universal Data Elements are necessary to produce an unduplicated count of clients served, to provide accurate counts for various reporting requirements, including HUD CoC APR, QPR/APR, the AHAR, and other reporting requirements.

General Standard:

The acceptable percentage of Universal Data Elements with "null/missing" and "unknown/don't know/refused" for all clients served in Supportive Housing Programs, Emergency Solutions Grant, and HOPWA is less than 5 percent. Please refer to the HMIS Revised Data Standards March 2010 for more detailed information on the UDE's listed below.

Exceptions:

1. *Outreach Programs*: Capture and record initial contact and any other contacts along with UDE's they are able to obtain.

<u>Universal Data Elements:</u>

1. Name
2. Social Security Number
3. Date of Birth
4. Race
5. Ethnicity
6. Gender
7. Veteran Status
8. Disabling Condition
9. Residence Prior to Program Entry/Length of Stay
10. Zip Code of Last Permanent Address
11. Housing Status
12. Program Entry Date
13. Program Exit Date
14. Personal Identification Number (System Generated)
15. Household Identification Number (System Generated)

Data Quality 1.2.4 Completeness: Program Specific Data Elements		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

Program specific Data Elements are necessary to produce the HUD CoC APR, ESG QPR/APR, and to ensure the LSNDC has sufficient client data to conduct analysis on the extent and characteristics of the population they serve.

General Standard:

The acceptable percentage of Program Specific Data Elements with "null/missing" and "unknown/don't know/refused" for all clients served by a Supportive Housing Program, Emergency Solutions Grant, and HOPWA is less than 5 percent. Please refer to the HMIS Revised Data Standards March 2010 for more detailed information on the PSDE's listed below.

Program-Specific Data Elements:

1. Income and Sources
2. Non-Cash Benefits
3. Physical Disability
4. Developmental Disability
5. Chronic Health Condition
6. HIV/AIDS
7. Mental Health
8. Substance Abuse
9. Domestic Violence (Adult and Unaccompanied Youth)
10. Destination
11. Date of Contact(required for street outreach programs only; optional for other programs)
12. Date of Engagement(required for street outreach programs only; optional for other programs)
13. Financial Assistance Provided(required for HPRP-funded programs only; optional for all other programs)
14. Housing Relocation & Stabilization Services Provided (required for HPRP-funded programs only; optional for all other programs)

Data Quality 1.2.5 Completeness: Optional Program Specific Data Elements		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

Optional Program Specific Data Elements are recommend by HMIS data research groups and are based on best practices being implemented at the local level. **They are optional**. Please refer to the HMIS Revised Data Standards March 2010 for more detailed information for the Optional PSDE's listed below.

General Standard:

These are optional data elements unless recommended by the Local CoC.

Optional Program Specific Data Elements:

1. Employment
2. Education
3. General Health Status
4. Pregnancy Status
5. Veteran's Information
6. Children's Education
7. Reason for Leaving
8. Services Provided

Data Quality 1.3 Accuracy		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

The purpose of accuracy is to ensure that the data in the LSNDC HMIS is the best possible representation as it relates to clients and the programs that serve them.

General Standard:

All data entered into the LSNDC HMIS shall be a reflection of information provided by the client, as documented by the intake worker or otherwise updated by the client and documented for reference. Deliberately recording inaccurate information is strictly prohibited.

Data Quality 1.3.1 Accuracy: Consistency		
Responsible:	Data Quality Committee	Effective Date: November 2nd, 2012
Authorized:	LSNDC Board	Last Revision: November 2nd, 2012

The purpose is to ensure that data is understood, collected, and entered consistently across all programs in the HMIS. Consistency directly affects the accuracy of data.

General Standard:

All data elements in the LSNDC HMIS shall be collected and entered in a common and consistent manner across all programs.

Data Quality 1.4 Monitoring	
Responsible: Data Quality Committee	Effective Date: November 2nd, 2012
Authorized: LSNDC Board	Last Revision: November 2nd, 2012

The purpose of monitoring is to ensure that agencies are following the data quality standards agreed upon by LSNDC and are meeting expected benchmarks as described by the data quality plan.

General Standard:

Data Elements will be monitored on a monthly basis to quickly identify and resolve issues that affect the timeliness, completeness, and accuracy of the client record.

Data Quality 1.5 Incentives	
Responsible: Data Quality Committee	Effective Date: November 2nd, 2012
Authorized: LSNDC Board	Last Revision: November 2nd, 2012

CoC's are encouraged to develop an incentive program to entice CoC Organizations to adhere to the data quality plan.

Acronyms

- APR – Annual Performance Report
- CoC – Continuum of Care
- HMIS – Homeless Management Information System
- HOPWA – Housing Opportunities for Persons with AIDS
- HPRP – Homeless Prevention and Rapid Re-housing Program
- HUD – Housing and Urban Development
- LSNDC – Louisiana Services Network Data Consortium
- PDDE – Program Descriptor Data Elements
- PSDE – Program Specific Data Element
- QPR – Quarterly Performance Report
- SRO – Single Room Occupancy
- UDE – Universal Data Element

Summary of Program Descriptor Data Elements				
Data Standards	**Program Applicability**	**When collected**		
		Assigned once	**Assigned once; reviewed annually**	**At least annually or more frequently if inventory or coverage changes**
1. Organization Identifier	All CoC Programs	x		
2. Organization Name	All CoC Programs		x	
3. Program Identifier	All CoC Programs	x		
4. Program Name	All CoC Programs		x	
5. Direct Service Code	All CoC Programs	x		
6. Site Information	All CoC Programs		x	
7. Continuum of Care Number	All CoC Programs		x	
8. Program Type Code	All CoC Programs		x	
9. Bed and Unit Inventory Information	Residential CoC Programs Only			x
10. Target Population A (Optional for all programs)	All CoC Programs		x	
11. Target Population B	Residential CoC Programs Only		x	
12. Method for Tracking Residential Program Occupancy	Residential CoC Programs Only		x	
13. Grantee Identifier	HPRP Programs Only		x	

Summary of Universal Data Elements							
		Subjects			When Collected		
Data Standards	Program Applicability	All Clients	All Adults	All Adults& Unaccompanied Youth	Initial Program Entry Only	Every Program Entry	Every Program Exit
1. Name[1]	All CoC Programs	x			x		
2. Social Security Number[1]	All CoC Programs	x			x		
3. Date of Birth[1]	All CoC Programs	x			x		
4. Race[1]	All CoC Programs	x			x		
5. Ethnicity[1]	All CoC Programs	x			x		
6. Gender[1]	All CoC Programs	x			x		
7. Veteran Status	All CoC Programs		x			x	
8. Disabling Condition	All CoC Programs	x				x	
9. Residence Prior to Program Entry and Length of Stay	All CoC Programs			x		x	
10. Zip Code of Last Permanent Address	All CoC Programs			x		x	
11. Housing Status	All CoC Programs	x				x	x (Optional for Emergency Shelter)
12. Program Entry Date	All CoC Programs	x				x	
13. Program Exit Date	All CoC Programs	x					x
14. Personal Identification Number	All CoC Programs	x			x		
15. Household Identification Number	All CoC Programs	x				x	

[1]Note that one or more of these personal identifiers may need to be asked on subsequent visits to find and retrieve the client's record. However, this information only needs to be recorded in HMIS on an initial program entry.

Summary of Program-Specific Data Elements								
Data Standards	**Program applicability**	**Subjects**	**When Collected**					
			During Client Assessment Near Entry	**At Least Once Every three Months During Program Enrollment[2]**	**At Least Once Annually During Program Enrollment[3]**	**Every Exit**	**Every Contact**	**Each Instance of Financial Assistance**
1. Income and Sources	CoC/HUD Competitive Programs[1] HPRP Programs HOPWA Homeless Programs	All Clients	x		x	x		
2. Non-Cash Benefits	CoC/HUD Competitive Programs HPRP Programs HOPWA Homeless Programs	All Clients	x		x	x		
3. Physical disability	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
4. Developmental Disability	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
5. Chronic Health Condition	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
6. HIV/AIDS	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
7. Mental Health	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
8. Substance Abuse	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
9. Domestic Violence	CoC/HUD Competitive Programs HOPWA Homeless Programs	Adults and Unaccompanied Youth	x					
10. Destination	CoC/HUD Competitive Programs[1] HPRP Programs HOPWA Homeless Programs	All Clients				x		
11. Date of Contact	CoC/HUD Street Outreach Programs	All Clients					x	
12. Date of Engagement	CoC/HUD Street Outreach Programs	All Clients	x					
13. Financial Assistance provider	HPRP Programs	All Clients		x				x
14. Housing Relocation and Stabilization Services Provided	HPRP Programs	All Clients		x		x		

[1]CoC/HUD Competitive Programs include the Supportive Housing Program (SHP), Shelter Plus Care, and the Section 8 Moderate Rehabilitation for Single Room Occupancy Dwellings (SRO) Program.
[2]Only collected at least once every three months if the period between program entry and exit exceeds three months.
[3]Only collected at least once annually if the period between program entry and exit exceeds one year.

Additional Program-Specific Data Elements: Optional Data Elements										
Data Standards	**Program Applicability**	**Subjects**					**When Collected**			
	Optional for ALL CoC Programs	All Clients	All Clients or All Adults and Unaccompanied Youth	All Females of Child-bearing Age	All Veterans	All Children	Every Entry	At Least Once Annually during Program Enrollment[1]	When Services Provided	Every Exit
15A. Employment	x		x				x	x		x
15B. Education	x		x				x	x		x
15C. General Health Status	x		x				x	x		x
15D. Pregnancy Status	x			x			x			
15E. Veteran's Information	x				x		x			
15F. Children's Education	x					x	x	x		x
15G. Reasons for Leaving	x	x								x
15H. Services Provided	x								x	
[1] Only collected at least once annually if the period between program entry and exit exceeds one year.										

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for LA-502 - Shreveport, Bossier/Northwest Louisiana CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	1959	1632	67	60	-7	31	16	-15
1.2 Persons in ES, SH, and TH	2057	1722	82	76	-6	38	20	-18

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added 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.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1950	1605	135	174	39	43	46	3
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2055	1703	158	189	31	51	58	7

FY2017 - 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.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	13	6	46%	2	15%	1	8%	9	69%
Exit was from ES	336	39	12%	21	6%	13	4%	73	22%
Exit was from TH	58	11	19%	7	12%	7	12%	25	43%
Exit was from SH	33	6	18%	5	15%	1	3%	12	36%
Exit was from PH	204	18	9%	9	4%	6	3%	33	16%
TOTAL Returns to Homelessness	644	80	12%	44	7%	28	4%	152	24%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2017 - Performance Measurement Module (Sys PM)

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

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	478	349	-129
Emergency Shelter Total	301	228	-73
Safe Haven Total	31	19	-12
Transitional Housing Total	81	55	-26
Total Sheltered Count	413	302	-111
Unsheltered Count	65	47	-18

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	2094	1722	-372
Emergency Shelter Total	1907	1582	-325
Safe Haven Total	95	78	-17
Transitional Housing Total	185	135	-50

FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	153	126	-27
Number of adults with increased earned income	7	9	2
Percentage of adults who increased earned income	5%	7%	2%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	153	126	-27
Number of adults with increased non-employment cash income	5	23	18
Percentage of adults who increased non-employment cash income	3%	18%	15%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	153	126	-27
Number of adults with increased total income	12	29	17
Percentage of adults who increased total income	8%	23%	15%

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	187	162	-25
Number of adults who exited with increased earned income	30	22	-8
Percentage of adults who increased earned income	16%	14%	-2%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	187	162	-25
Number of adults who exited with increased non-employment cash income	28	22	-6
Percentage of adults who increased non-employment cash income	15%	14%	-1%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	187	162	-25
Number of adults who exited with increased total income	52	42	-10
Percentage of adults who increased total income	28%	26%	-2%

FY2017 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1877	1491	-386
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.	485	308	-177
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)	1392	1183	-209

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

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2040	1803	-237
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.	593	447	-146
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.)	1447	1356	-91

FY2017 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	192	215	23
Of persons above, those who exited to temporary & some institutional destinations	24	7	-17
Of the persons above, those who exited to permanent housing destinations	25	90	65
% Successful exits	26%	45%	19%

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

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1496	1457	-39
Of the persons above, those who exited to permanent housing destinations	445	420	-25
% Successful exits	30%	29%	-1%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	324	286	-38
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	291	271	-20
% Successful exits/retention	90%	95%	5%

FY2017 - SysPM Data Quality

LA-502 - Shreveport, Bossier/Northwest Louisiana CoC

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

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

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

FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	382	439	399	333	374	87	105	73	480	350	374	483		138	261	209				
2. Number of HMIS Beds	317	315	383	244	367	82	105	73	244	263	374	483		0	261	209				
3. HMIS Participation Rate from HIC (%)	82.98	71.75	95.99	73.27	98.13	94.25	100.00	100.00	50.83	75.14	100.00	100.00		0.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1486	1658	1510	968	123	177	182	90	311	383	342	314	0			173				84
5. Total Leavers (HMIS)	1307	1496	1342	791	55	114	122	45	55	119	85	38	0			143				62
6. Destination of Don't Know, Refused, or Missing (HMIS)	43	73	81	72	4	8	8	3	11	20	8	6	0			2				29
7. Destination Error Rate (%)	3.29	4.88	6.04	9.10	7.27	7.02	6.56	6.67	20.00	16.81	9.41	15.79				1.40				46.77

CoC Governance Charter

Attachment VI

HUD Notice on Prioritization of Chronically Homeless and Vulnerable People

Special Attention of:
All Secretary's Representatives

Issued:
All Regional Directors for CPD

Expires:
All CPD Division Directors
Continuums of Care (CoC)
Recipients of the Continuum of Care (CoC) Program

Notice: CPD-16-11
Issued: July 25, 2016
Expires: This Notice is effective until it is amended, superseded, or rescinded

Cross Reference: 24 CFR Parts 578 and 42 U.S.C. 11381, *et seq.*

Subject: Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing

Table of Contents

I. Purpose 3
A. Background 3
B. Goals of this Notice 4
C. Applicability 4
D. Key Terms 5
II. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons 6
A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness. 6
B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness. 6
III. Order of Priority in CoC Program-funded Permanent Supportive Housing 7
A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness 8
B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness 9
IV. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List 10
A. Coordinated Entry Requirement 10
B. Written Standards for Creation of a Single Prioritized List for PSH 11

C. Standardized Assessment Tool Requirement..... 111
D. Nondiscrimination Requirements 111
V. Recordkeeping Recommendations for CoCs that have Adopted the Orders of Priority in this Notice 111
VI. Questions Regarding this Notice..... 122

I. Purpose

This Notice supersedes Notice CPD-14-012 and provides guidance to Continuums of Care (CoC) and recipients of Continuum of Care (CoC) Program (24 CFR part 578) funding for permanent supportive housing (PSH) regarding the order in which eligible households should be served in **all** CoC Program-funded PSH. This Notice reflects the new definition of chronically homeless as defined in CoC Program interim rule as amended by the Final Rule on Defining "Chronically Homeless" (herein referred to as the Definition of Chronically Homeless final rule) and updates the orders of priority that were established under the prior Notice. CoCs that previously adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the FY2015 CoC Program Competition are encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. CoCs that have not previously adopted the orders of priority established in Notice CPD-14-012 are also encouraged to incorporate the orders of priority included in this Notice into their written standards

A. Background

In June 2010, the Obama Administration released *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness* (*Opening Doors*), in which HUD and its federal partners set goals to end Veteran and chronic homelessness by 2015, and end family and youth homelessness by 2020. Although progress has been made there is still a long way to go. In 2015, the United States Interagency Council on Homelessness extended the goal timeline for achieving the goal of ending chronic homelessness nationally from 2015 to 2017. In 2015, there were still 83,170 individuals and 13,105 persons in families with children that were identified as chronically homeless in the United States. To end chronic homelessness, it is critical that CoCs ensure that limited resources awarded through the CoC Program Competition are being used in the most effective manner and that households that are most in need of assistance are being prioritized.

Since 2005, HUD has encouraged CoCs to create new PSH dedicated for use by persons experiencing chronic homelessness (herein referred to as dedicated PSH). As a result, the number of dedicated PSH beds funded through the CoC Program for persons experiencing chronic homelessness has increased from 24,760 in 2007 to 59,329 in 2015. This increase has contributed to a 30.6 percent decrease in the number of chronically homeless persons reported in the Point-in-Time Count between 2007 and 2015. Despite the overall increase in the number of dedicated PSH beds, this only represents 31.6 percent of all CoC Program-funded PSH beds.

To ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own–persons experiencing chronic homelessness. HUD's experience has shown that many communities and recipients of CoC Program-funded PSH continue to serve persons on a "first-come, first-serve" basis or based on tenant selection processes that screen-in those who are most likely to succeed while screening out those with the highest level of need. These approaches to tenant

selection have not been effective in reducing chronic homelessness, despite the increase in the number of PSH beds nationally.

B. Goals of this Notice

The overarching goal of this Notice is to ensure that those individuals and families who have spent the longest time in places not meant for human habitation, in emergency shelters, or in safe havens and who have the most severe service needs within a community are prioritized for PSH. By ensuring that persons with the longest histories of homelessness and most severe service needs are prioritized for PSH, progress towards the Obama Administration's goal of ending chronic homelessness will increase. In order to guide CoCs in ensuring that all CoC Program-funded PSH beds are used most effectively, this Notice revises the orders of priority related to how persons should be selected for PSH as previously established in Notice CPD-14-012 to reflect the changes to the definition of chronically homeless as defined in the Definition of Chronically Homeless final rule. CoCs are strongly encouraged to adopt and incorporate them into the CoC's written standards and coordinated entry process.

HUD seeks to achieve two goals through this Notice:

1. Establish a recommended order of priority for dedicated and prioritized PSH which CoCs are encouraged to adopt in order to ensure that those persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority.

2. Establish a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized.

C. Applicability

The guidance in this Notice is provided to all CoCs and all recipients and subrecipients of CoC Program funds–the latter two groups referred to collectively as recipients of CoC Program-funded PSH. CoCs are strongly encouraged to incorporate the order of priority described in this Notice into their written standards, which CoCs are required to develop per 24 CFR 578.7(a)(9), for their CoC Program-funded PSH. Recipients of CoC Program funds are required to follow the written standards for prioritizing assistance established by the CoC (see 24 CFR 578.23(c)(10)); therefore, if the CoC adopts these recommended orders of priority for their PSH, all recipients of CoC Program-funded PSH will be required to follow them as required by their grant agreement. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Lastly, where a CoC has chosen to not adopt HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

D. Key Terms

1. **Housing First.** A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

2. **Chronically Homeless.** The definition of "chronically homeless", as stated in Definition of Chronically Homeless final rule is:

   (a) A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

      i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

      ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

   (b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

   (c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

3. **Severity of Service Needs.** This Notice refers to persons who have been identified as having the most severe service needs.

   (a) For the purposes of this Notice, this means an individual for whom at least one of the following is true:

      i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.

iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.

iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high-need, high cost beneficiaries.

(b) Severe service needs as defined in paragraphs i.-iv. above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

II. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons

A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness.

Dedicated PSH beds are those which are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the CoC that meet that criteria. If there are no persons within the CoC's geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non-dedicated PSH established in this Notice, if it has been adopted into the CoC's written standards. The bed will continue to be a dedicated bed, however, so when that bed becomes vacant again it must be used to house a chronically homeless person unless there are still no persons who meet that criterion within the CoC's geographic area at that time. These PSH beds are also reported as "CH Beds" on a CoC's Housing Inventory Count (HIC).

B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness.

Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. During the CoC Program competition project applicants for CoC Program-funded PSH indicate the number of non-dedicated beds that will be prioritized for use by persons experiencing chronic homelessness during the operating year of that grant, when awarded. These projects are then required to prioritize chronically homeless persons in their non-dedicated CoC Program-funded PSH beds for the applicable operating year as the project application is incorporated into the

grant agreement. All recipients of non-dedicated CoC Program-funded PSH are encouraged to change the designation of their PSH to dedicated, however, at a minimum are encouraged to prioritize the chronically homeless as beds become vacant to the maximum extent practicable, until there are no persons within the CoC's geographic area who meet that criteria. Projects located in CoCs where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified area. For example, if a Balance of State CoC has chosen to divide the CoC into six distinct regions for purposes of planning and housing and service delivery, each region would only be expected to prioritize assistance within its specified geographic area.[1]

The number of non-dedicated beds designated as being prioritized for the chronically homeless may be increased at any time during the operating year and may occur without an amendment to the grant agreement.

III. Order of Priority in CoC Program-funded Permanent Supportive Housing

The definition of chronically homeless included in the final rule on "Defining Chronically Homeless", which was published on December 4, 2015 and went into effect on January 15, 2016, requires an individual or head of household to have a disability and to have been living in a place not meant for human habitation, in an emergency shelter, or in a safe haven for at least 12 months either continuously or cumulatively over a period of at least 4 occasions in the last 3 years. HUD encourages all CoCs adopt into their written standards the following orders of priority for all CoC Program-funded PSH. CoCs that adopted the orders of priority established in Notice CPD-14-012, which this Notice supersedes, and who received points for having done so in the most recent CoC Program Competition are strongly encouraged to update their written standards to reflect the updates to the orders of priority as established in this Notice. Where a CoC has chosen to not incorporate HUD's recommended orders of priority into their written standards, recipients of CoC Program-funded PSH are encouraged to follow these standards for selecting participants into their programs as long as it is not inconsistent with the CoC's written standards.

As a reminder, recipients of CoC Program-funded PSH are required to prioritize otherwise eligible households in a nondiscriminatory manner. Program implementation, including any prioritization policies, must be implemented consistent with the nondiscrimination provisions of the Federal civil rights laws, including, but not limited to the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Title II or III of the Americans with Disabilities Act, as applicable. For example, while it is acceptable to prioritize based on level of need for the type of assistance being offered, prioritizing based on specific disabilities would not be consistent with fair housing requirements or program regulations.

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[1] For the State of Louisiana grant originally awarded pursuant to ''Department of Housing and Urban Development—Permanent Supportive Housing'' in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoCs are strongly encouraged to revise their written standards to include an order of priority, determined by the CoC, for CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's or family's service needs. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness would be required to follow that order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

2. Where there are no chronically homeless individuals and families within the CoC's geographic area, CoCs and recipients of CoC Program-funded PSH are encouraged to follow the order of priority in Section III.B. of this Notice. For projects located in CoC's where a sub-CoC approach to housing and service delivery has been implemented, which may also be reflected in a sub-CoC coordinated entry process, need only to prioritize assistance within their specified sub-CoC area. [2]

3. Recipients of CoC Program-funded PSH should follow the order of priority above while also considering the goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority under Section III.A.1. of this Notice to the extent in which persons with serious mental illness meet the criteria. In this example, if there were no persons with a serious mental illness that also met the criteria of chronically homeless within the CoC's geographic area, the recipient should follow the order of priority under Section III.B for persons with a serious mental illness.

4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. HUD recognizes that some persons–particularly those living on the streets or in places not meant for human habitation–might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable. Therefore, a person experiencing chronic homelessness should not be forced to refuse an offer of PSH if they do not want to participate in the project's services, nor should a PSH

[2] For the State of Louisiana grant originally awarded pursuant to ''Department of Housing and Urban Development—Permanent Supportive Housing'' in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

project have eligibility criteria or preconditions to entry that systematically exclude those with severe service needs. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these chronically homeless persons must continue to be prioritized for PSH until they are housed.

B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoCs are strongly encouraged to revise their written standards to include the following order of priority for non-dedicated and non-prioritized PSH beds. If adopted into the CoCs written standards, recipients of CoC Program-funded PSH that is not dedicated or prioritized for the chronically homeless would be required to follow this order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

(a) First Priority–Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

(b) Second Priority–Homeless Individuals and Families with a Disability with Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(d) Fourth Priority–Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

2. Recipients of CoC Program-funded PSH should follow the order of priority above, as adopted by the CoC, while also considering the goals and any identified target populations served by the project. For example, non-dedicated or non-prioritized CoC Program-funded PSH that is permitted to target youth experiencing homelessness should follow the order of priority under Section III.B.1. of this Notice, as adopted by the CoC, to the extent in which youth meet the stated criteria.

3. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following the order of priority described in this Notice, and as adopted by the CoC. HUD recognizes that some persons–particularly those living on the streets or in places not meant for human habitation–might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH (see FAQ 1895). Recipients of CoC Program-funded PSH are encouraged to follow a Housing First approach to the maximum extent practicable. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these individuals and families must continue to be prioritized until they are housed.

IV. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List

A. Coordinated Entry Requirement

Provisions at 24 CFR 578.7(a)(8) requires that each CoC, in consultation with recipients of Emergency Solutions Grants (ESG) program funds within the CoC's geographic area, establish and operate either a centralized or coordinated assessment system (referred to in this Notice as coordinated entry or coordinated entry process) that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. CoCs that adopt the order of priority in Section III of this Notice into the CoC's written standards are strongly encouraged to use a coordinated entry process to ensure that there is a single prioritized list for all CoC Program-funded PSH within the CoC. The Coordinated Entry Policy Brief, provides recommended criteria for a quality coordinated entry process and standardized assessment tool and process. Under no circumstances shall the order of priority be based upon diagnosis or disability type,

but instead on the length of time an individual or family has been experiencing homelessness and the severity of needs of an individual or family.

B. Written Standards for Creation of a Single Prioritized List for PSH

CoCs are also encouraged to include in their policies and procedures governing their coordinated entry system a requirement that all CoC Program-funded PSH accept referrals only through a single prioritized list that is created through the CoCs coordinated entry process, which should also be informed by the CoCs street outreach. Adopting this into the CoC's policies and procedures for coordinated entry would further ensure that CoC Program-funded PSH is being used most effectively, which is one of the goals in this Notice. The single prioritized list should be updated frequently to reflect the most up-to-date and real-time data as possible.

C. Standardized Assessment Tool Requirement

CoCs must utilize a standardized assessment tool, in accordance with 24 CFR 578.3, or process. The Coordinated Entry Policy Brief, provides recommended criteria for a quality coordinated entry process and standardized assessment tool.

D. Nondiscrimination Requirements

CoCs and recipients of CoC Program-funded PSH must continue to comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

V. Recordkeeping Recommendations for CoCs that have Adopted the Orders of Priority in this Notice

24 CFR 578.103(a)(4) outlines documentation requirements for all recipients of dedicated and non-dedicated CoC Program-funded PSH associated with determining whether or not an individual or family is chronically homeless for the purposes of eligibility. In addition to those requirements, HUD expects that where CoCs have adopted the orders of priority in Section III. of this Notice into their written standards. The CoC, as well as recipients of CoC Program-funded PSH, will maintain evidence of implementing these priorities. Evidence of following these orders of priority may be demonstrated by:

A. Evidence of Severe Service Needs. Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined in Section I.D.3. of this Notice using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case-conferencing decisions.

B. Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance. Recipients must follow the CoC's written standards for prioritizing assistance, as adopted by the CoC. In accordance with the CoC's adoption of

written standards for prioritizing assistance, recipients must in turn document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.

C. Evidence that there are no Households Meeting Higher Order of Priority within CoC's Geographic Area.

(a) When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the CoC's geographic area – or for those CoCs that implement a sub-CoC [3]planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area – at the point in which a vacancy became available. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence.

(b) When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the CoC's geographic area - or for those CoCs that implement a sub-CoC planning and housing and service delivery approach, the smaller defined geographic area within the CoC's geographic area - that met a higher priority. Where a CoC is using a single prioritized list, the recipient of PSH may refer to that list as evidence that there were no households identified within the CoC's geographic area that meet a higher order of priority.

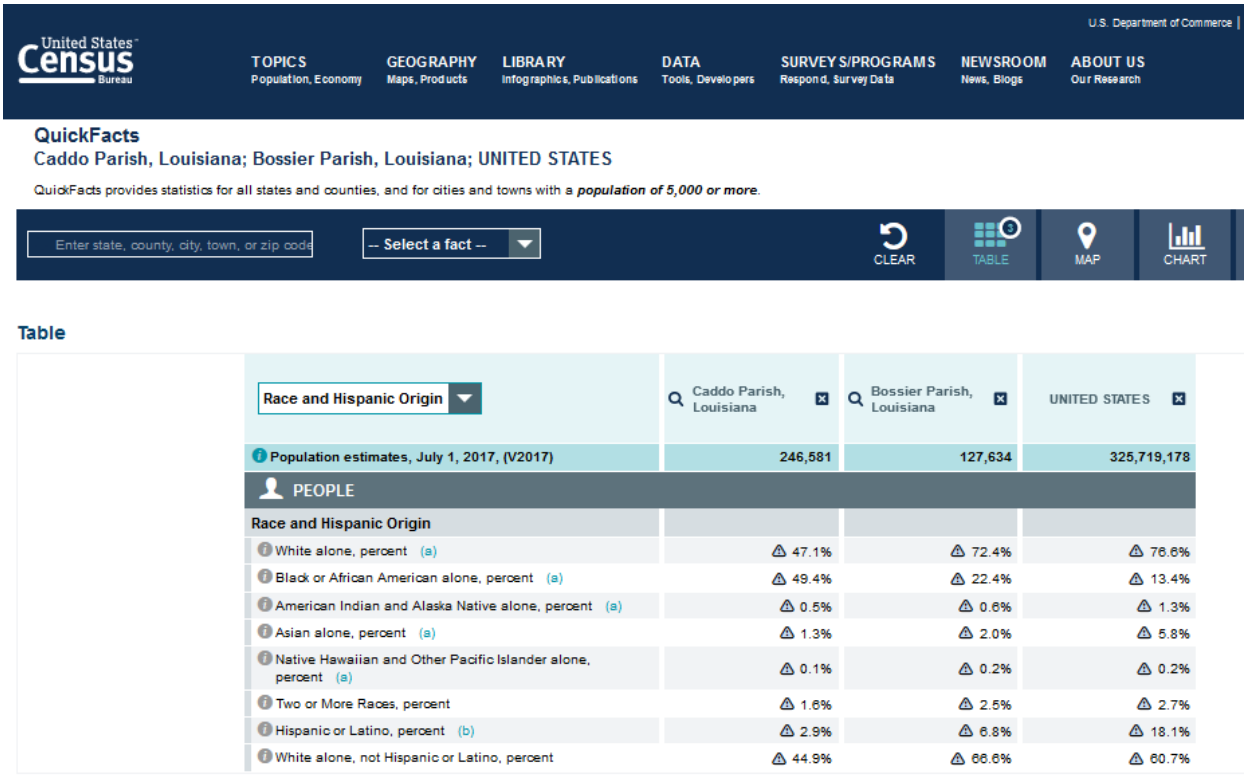
VI. Questions Regarding this Notice

Questions regarding this notice should be submitted to HUD Exchange Ask A Question (AAQ) Portal at: https://www.hudexchange.info/get-assistance/my-question/.

[3] For the State of Louisiana grant originally awarded pursuant to ''Department of Housing and Urban Development—Permanent Supportive Housing'' in chapter 6 of title III of the Supplemental Appropriations Act, 2008 (Public Law 110–252; 122 Stat. 2351), projects located within the geographic area of a CoC that is not the CoC through which the State is awarded the grant may prioritize assistance within that geographic area instead of within the geographic area of the CoC through which the State is awarded the grant.

LA-502 CoC Racial Disparity Census Data
Compared with Coordinated Assessment Racial Data

Coordinated Assessment racial data was selected because it indicates those experiencing unsheltered homelessness or staying in emergency shelter.



United States Census Bureau — U.S. Department of Commerce

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QuickFacts

Caddo Parish, Louisiana; Bossier Parish, Louisiana; UNITED STATES

QuickFacts provides statistics for all states and counties, and for cities and towns with a ***population of 5,000 or more***.

Enter state, county, city, town, or zip code | -- Select a fact -- | CLEAR | TABLE | MAP | CHART

Table

Race and Hispanic Origin	Caddo Parish, Louisiana	Bossier Parish, Louisiana	UNITED STATES
Population estimates, July 1, 2017, (V2017)	246,581	127,634	325,719,178
PEOPLE			
Race and Hispanic Origin			
White alone, percent (a)	47.1%	72.4%	76.6%
Black or African American alone, percent (a)	49.4%	22.4%	13.4%
American Indian and Alaska Native alone, percent (a)	0.5%	0.6%	1.3%
Asian alone, percent (a)	1.3%	2.0%	5.8%
Native Hawaiian and Other Pacific Islander alone, percent (a)	0.1%	0.2%	0.2%
Two or More Races, percent	1.6%	2.5%	2.7%
Hispanic or Latino, percent (b)	2.9%	6.8%	18.1%
White alone, not Hispanic or Latino, percent	44.9%	66.6%	60.7%

667 individuals and heads of household completed the VI-SPDAT Assessment, so while the average race percentage for the Caddo and Bossier Parishes is around W-60%, B-40%, nearly twice as many black people experienced homelessness in 2017. The CoC is beginning real research and education around race in January, 2019

Race	Total
American Indian or Alaska Native	3
Black or African American	416
White	238
Asian	2
Not Given	8

Ethnicity	Total
Hispanic/Latino	12
Non-Hispanic/Non-Latino	645
Not Given	10