

## 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 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 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:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

#### Resources:

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**1A-1. CoC Name and Number:** MI-508 - Lansing, East Lansing/Ingham County CoC

**1A-2. Collaborative Applicant Name:** City of Lansing

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

**1A-4. HMIS Lead:** City of Lansing

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

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**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

### 1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

1. participated in CoC meetings;
2. voted, including selecting CoC Board members; and
3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	No	No	Yes
Local Jail(s)	No	No	No
Hospital(s)	No	No	Yes
EMS/Crisis Response Team(s)	No	No	Yes
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	No	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	No	No

Youth Advocates	Yes	No	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	No	Yes
Non-CoC Funded Victim Service Providers	No	No	No
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No	Yes
LGBT Service Organizations	Yes	No	Yes
Agencies that serve survivors of human trafficking	Yes	No	No
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
Other:(limit 50 characters)			

**By selecting "other" you must identify what "other" is.**

### **1B-1a. CoC's Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.**

**Applicants must describe how the CoC:**

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
  - 2. communicates information during public meetings or other forums the CoC uses to solicit public information;**
  - 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and**
  - 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF.**
- (limit 2,000 characters)**

1-The CoC agency's public website, Facebook, LinkedIn, Twitter invites, seeks-ideas, considerations, opinions while providing rigorous information about meetings (dates times), plans, progress, & performance on preventing & ending homelessness to inform the public of the many forums through which to provide input into system planning. CoC membership is open year-round & is available to any partner within the CoC's jurisdiction. The CoC responds to public & lead membership agency responds with an online, informational packet for member interest. Weekly/monthly e-info is communicated to leaders, consumers, community members, local partners, & other county CoCs.

2-Monthly, input is solicited from partners; provider; consumer, stakeholders & those with lived experience. This has become a popular event for the CoC. The CoC



Governing body continues to hold open meetings with time for public comment & has three board members with lived experience one seats specifically for consumer Bd Member representative. Multiple system committees meet at varying regularities to discuss strategies to prevent & end homelessness as well as program planning, implementation, & upkeep. Work Committee teams)inform the CoC managing group who include provider reps, consumers, local leaders, & other interested community. The Exec Bd attends community, regional & State of MI meetings that impact homelessness Special neighborhood meetings in areas impacted by unsheltered homelessness to gather input & ideas from the community, & other meetings as requested. 3-Feedback from committees, forums, surveys, & consumer groups including youth consumers is considered & used to guide implementation, process improvements, & data analysis. Feedback is obtained via email at capitalregionhousing.org 4-The CoC provides documents, forms & minutes online in accessible document formats that are screen friendly including plans are also made available via PDF to ensure accessibility.TDD available.

## **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 the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;**
  - 4. how often the CoC solicits new members; and**
  - 5. 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-The CoC has an open membership & open invitation process for new Members within the CoC jurisdiction. The Lead membership agency invites agencies that that work with homeless or vulnerable populations. They also make new membership packets. CoC website has info on meeting schedules, informational overviews, and relevant forms. New members are able to review this information and apply. 2-The CoC solicits new members via social media and other outlets. Annual membership event-October & Homeless awareness week and other community events used to educate and present CoC mission and objectives e-announcements communicated at varying frequencies distributes info. The CoC by-laws mandates one consumer Board member there are three currently on the CoC governing board. Radio public announcements also used.3- The Lead membership agency provides one on one introductions providing TDD and other user friendly formats. Translator service is also available. The CoC provides forms and documents online in accessible document formats (PDFs, Word, PowerPoint, Excel) that are screen-reader friendly when possible. Info is also made available via PDF to ensure accessibility. The Collaborative Applicant holds an annual Community Forum where people currently or

previously experiencing homelessness have opportunity to learn and provide input into programs and initiatives and consumer representatives with lived experience can influence community efforts. 4-Events, email communications, radio announcements, annual Oct open house as well as continued open door membership policy encourages partners, consumers and interested parties to join the CoC  
5-Special annual forum encourages those having experience and currently experiencing unsheltered homeless to join the CoC. Agencies can also help sponsor consumer representatives.

### **1B-3. Public Notification for Proposals from Organizations Not Previously Funded.**

**Applicants must describe:**

- 1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;**
- 2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;**
- 3. the date(s) the CoC publicly announced it was open to proposal;**
- 4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and**
- 5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.**  
**(limit 2,000 characters)**

1-The CoC website, email announcements to list-serv group of 100+ email addresses, partner websites, informational meetings are tools the CoC uses to notify the public that the HUD NOFA is open & all agencies are encouraged to apply. A detailed public letter is posted & sent via email to community partners, CoC members, & other interested parties. It details opportunities for renewal programs & new proposals, the identified community needs, a schedule of events, & trainings for any agency that would like to submit a proposal/application for the Grant Competition. 2-When the NOFA is announced by HUD the CoC website is updated with HUD resources as well as the local competition process to get trained & submit applications. There are two (2) informational meetings announced (8/15 & 21) at different locations to increase accessibility including dates & on-line resources. The local application & common ranking criteria is available on-line & sent via email w/ announcements. Scorers solicited & sent info to review & score by (8/22). Open ranking meeting followed (8/27), CoC Board approved same day. Written notifications sent to participant agencies also list-serv to announce results & strategies to support programs. Results of competition posted on-line too.. 3-The website & email notification were sent (8/1) for open competitive grant process, detailed schedules, announcement letter with app & scoring criteria sent 8/12.4- The 8/15 meeting during this open process is an opportunity for new applicants, to propose new programs with bonus funds. Technical assistance session on 8/21 for all new applicants & one on one meeting.

Throughout the year new proposals are discussed based off analysis of community needs. While monitoring activities & programs suggestions are made to help strengthen new & grow successful programs. These mechanisms, in addition to web postings & entry formats help ensure the availability of info for better, diverse access. 5-N/A

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

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### 1C-1. CoCs Coordination, Planning, and Operation of Projects.

**Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.**

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)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
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)	
Regional Planning Group	Yes

## **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;**  
**2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and**  
**3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates.**  
**(limit 2,000 characters)**

1-The CoC Collaborative Applicant (CA), HMIS Lead, and the ESG recipient are the same entity - City of Lansing. Both City departments are CoC Board members who meet monthly to discuss strategy, issues, planning and fund allocation for ESG & other homeless funds. Bi-monthly CoC Strategic planning for homeless includes -shelters, RRH, prevention, DV, substance abuse shelter programs, youth shelter and outreach.

as is management of existing ESG projects including State of MI ESG. Performance, eligible expenses are monitored monthly & evaluated by CA –City of Lansing along with ESG programs. ESG subrecipients are required to coordinate with all CoC governance and practices. HMIS Lead provides performance data, PIT & HIC data are shared w/ CoC jurisdictions in order to promote Consolidated Plan process.

2-The ESG subrecipient' outcomes are shared with CoC Board to promote most efficient results since the funding is limited. The reported outcomes are communicated quarterly to evaluate performance and look at outcome expectations for all ESG projects. Data drives these expectations along with continued efficiency goals. Evaluation of RRH bench marks are part of agency performance which drives scoring for available funding. Comprehensive inter-agency collaborations are required to raise effective results. CoC CQI reviews data monthly.

3- City of Lansing- CoC CA, HMIS Lead, and the ESG recipient supports CoC admin staff to share information and monitor communication for the jurisdiction. Part of those communications is input on all Consolidated Plan processes as well as any disaster relief efforts. Community meetings are well attended to receive community input and disperse information regarding needs and planned projects. This helps consolidate information so needs and activities are centralized. Evaluating the data surrounding the outcomes helps decide allocation of funds to address critical needs as well as ending homelessness in our community.

### **1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions.**

Yes to both

**Applicants must indicate whether the CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area.**

**1C-2b. Providing Other Data to Consolidated Plan Jurisdictions.** Yes

**Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.**

**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 protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and**
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality.**  
**(limit 2,000 characters)**

1- EVE staff co-wrote the CoC's emergency transfer plan that was distributed to all PH providers and a training held. To protect their safety/confidentiality, survivors are served by the CEA through weekly visits to the shelter. Survivors dictate how their information is stored and used in HMIS, or not at all. They have the right to refuse any sharing or to be entered as an "un-named record" where identifying information is not recorded. They can also request removal of their record from the System at any time. EVE maintains a comparable database. The CEA defers to EVE's expertise in safety/privacy issues, with the client's permission. ROI's are time-limited and specific. Most CEA and EVE staff are trained in trauma-informed, survivor- centered services and share training. Survivors of domestic violence (DV) have to flee dangerous homes & need safe places. CoC partner & DV shelter-EVE, Inc. provides a safe shelter for DV survivors & assists with empowerment, client centered strategies for enhancing safety & knowledge of resources.

2-Client choice is paramount and the CoC uses EVE's legal advocacy and counseling expertise to provide physical & emotional safety for DV survivors. When doing housing searches, safety is key to finding suitable units and locations. CoC & partners collaborate to assure access to legal protections/PPOs & work with other counties for housing if preferred, to connect survivors to community resources, keeping freedom of choice in mind. The CoC is well aware of empowerment principles and the need for the survivor to be the decision-maker.

**1C-3a. Training–Best Practices in Serving DV Survivors.**

**Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:**

- 1. CoC area project staff that addresses safety and best practices (e.g.,**

**trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and**  
**2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.**  
**(limit 2,000 characters)**

1 & 2 - DV training is coordinated for the entire CoC project and CEA staff annually through monthly CoC Network meetings, webinars, & video training to be accessed when providers and partners are available. A cadre of DV service providers in the CoC area, including EVE, the DV shelter, collaborates to provide advocacy and awareness training, DV survivor services training, and best practices, including safety planning, to serve those experiencing violence in a domestic, dating, sexual assault and any predator or harassing behavior situation.

DV Training serves as an educational and public awareness opportunity, and a community forum for best practices. The CoC training includes CoC protocols, such as ETP. Training partners include CARE-Capital Area Response Effort who provide direct crisis intervention through area law enforcement agencies; MSU Safe Place who conducts volunteer training three times a year; MSU Dept of Psychology; Eve-DV shelter outreach staff who provide mobile training services; Advent House, and Capital Area Community Services who help with safe housing needs; Legal Services of South Central Michigan trains on legal assistance for PPOs, divorce and custody issues.

Most homeless direct care staff are also trained or certified in trauma-informed, victim-centered care to serve their particular target populations but also participate in the CoC DV trainings. The Statewide Adverse Child Experiences (ACE) initiative is based here in Lansing and focuses on creating trauma-informed communities. Many local homeless agencies participate in the local collaborative.

### **1C-3b. Domestic Violence–Community Need Data.**

**Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking.**  
**(limit 2,000 characters)**

Data from EMPower DV, which is EVE, Inc's, the local DV shelter's data base, is a comparable database used for safety and confidentiality of Domestic Violence survivors. As a local jurisdiction ESG sub-recipient, EVE provides aggregate information for statistical community evaluation to the HMIS Lead, which uses it for the ESG CAPER, and prepares reports for the CoC CQI committee and CoC Board to understand the scope of community needs as related to DV survivors and service needs. Data collected includes DV safe shelter nights for adults and children; strategic planning for survivor safety; legal service referrals and advocacy; housing plan for individuals and families; assessments; proper referrals; barrier busters for independence; follow-up case management. The CoC also uses HMIS data, State Police and local police data to measure the full scope of DV survivor needs in our community. All data was used to identify the need for a DV RRH Bonus program which is being applied for with this NOFA.

**\*1C-4. PHAs within CoC. Attachments Required.**

**Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC's geographic area.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 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., Moving On
Lansing Housing Commission	25.00%	Yes-Both	Yes-Both
Ingham Housing Commission		Yes-Public Housing	

**1C-4a. PHAs' Written Policies on Homeless Admission Preferences.**

**Applicants must:**

**1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or**

**2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)**

1-Lansing Housing Commission and Ingham County Housing Authorities currently have homeless preferences as noted above. The Collaborative Applicant City of Lansing has worked closely with the Lansing Housing Commission to implement a homeless preference that benefits the CoC programs to provide a housing voucher for participants that no longer require case management to move forward. The Lansing Commission PHA has also been a great community partner that manages two CoC programs while partnering with other Supportive Services agencies (Community Mental Health and Advent House Ministries) to provide case management for participants. This team effort has resulted in good performance numbers over delivering the number housed. The City provides input to the housing authority when comments are open for the strategic plan advocating for a homeless preference and offering CoC resources and partner agency services. The regional team meets quarterly and discusses coordination with the CoC. Lansing seems to be the hub for homeless considering other areas are more rural. The PHA inventory of housing helps bring a needed option for participants as their need for supportive services lessens. The Ingham County PHA is in a more rural setting with housing preferences, which gives participants other opportunities. Ingham PHA serves individuals and families but has more senior housing options as well.  
2-N/A

**1C-4b. Moving On Strategy with Affordable Housing Providers.**

**Applicants must indicate whether the CoC has a Moving On Strategy with**

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**affordable housing providers in its jurisdiction.**

Yes

**If “Yes” is selected above, describe the type of provider, for example, multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs. (limit 1,000 characters)**

A move-on strategy exists the local PHA, LIHTC units & other low-income housing programs. Collaborative Applicant has collaborated with Lansing Housing Commission to provide existing local PSH projects a tool to move stabilized participants to a subsidized unit due to financial need while supportive services are no longer needed. The State of Michigan has also partnered with CoC by providing 50 units over a three year period as part of the Move Up Program for individuals & families that continue to need rental subsidy for housing. Through existing agreements with partners, tenants are assisted with the transition & offered short-term services as needed for transition. Many participants choose to transition in place to continue to rent the unit they are currently in. A bi-annual process is conducted to determine which PSH participants are ready & willing for move-up opportunities. There are a limited number of LIHTC units available for move up. This opens PSH units for other eligible participants who need supportive services.

**1C-5. Protecting Against Discrimination.**

**Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing. (limit 2,000 characters)**

CoC reinforces the need for equal access and the fair housing act. This is communicated to all providers at every level of funding in any program. TA and training has been provided to help identify possible issues that are unintentional. When an issue is brought up through surveys or participants evaluations the CoC investigates the situation and provides training correcting the notion or unintentional action moving forward. Through the State of Michigan agency, training was provided allowing every agency to have a Fair Housing expert. Anti-discrimination policies and VAWA policy was adopted by the CoC enforcing equal access throughout the CoC membership. In addition to that, any CoC funded programs are required to sign a contract that includes an anti-discrimination section. Continued assessment and training is offered annually to protect our programs and all participants against discrimination. Additionally, agencies are encouraged to ask questions if there is a perception of violation of our commitment to equal access to housing programs and how our participants are served. City of Lansing periodically monitors program exits the event there is a question that may be related to a violation in our policy for housing first or equal access.

**\*1C-5a. Anti-Discrimination Policy and Training.**

**Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:**

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 address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

**\*1C-6. Criminalization of Homelessness.**

**Applicants must select all that apply that describe the strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area.**

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
4. Implemented communitywide plans:	<input checked="" type="checkbox"/>
5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

**1C-7. Centralized or Coordinated Assessment System. Attachment Required.**

**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 for homelessness assistance in the absence of special outreach; and**
- 3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner.**

**(limit 2,000 characters)**

1-The Coordinated Entry (CE) System is managed by Holy Cross Services (CEA) with a mobile unit to ensure the entire County (geographic area) is covered. Outlying areas are contacted regularly & are on the CoC list serve, that contacts law enforcement, human service agencies, 24 hour businesses, & faith-based groups to educate & inform on available resources. The PIT count & Homeless Awareness week reaches out to educate the public on homeless/at-risk services.

2-The CoC has an effective outreach team (PATH) that does street outreach in a three-county area, including for youth. Monthly outreach team meetings coordinate between PATH & the CoC agencies. The CEA has an encampment team that goes with law enforcement & contacts area businesses to reach street homeless. They use a relational, engaging approach with people.

3-The CEA has a Diversion Assessment, Prevention Assessment, & Acuity Assessment (VI-SPDAT) tools to match available resources to those with highest needs. First, all applicant households are triaged either by phone or in-person to determine their acuity. Screening uses the VI-SPDAT tool to prioritize clients into diversion resources or PSH vacancies, Rapid Re-Housing Resources, or other assistance. CH or veterans are further prioritized for open PSH units using By-Name-List(s). CEA staff & emergency shelters coordinate their efforts in the VI-SPDAT process. Secondly, CEA takes calls during non-traditional hours. Households who present with immediate safety issues are re-directed as needed to DV shelters, 24 hour DV hotline, hospitals, or 911). The referral process is designed to ensure the best housing intervention is offered quickly to households based on vulnerability, severity of service needs, & household type (e.g. families, aged, veterans, youth). This information informs policy priorities & the appropriate flow of households into & out of the system. Shelters also take people directly if contacted by first responders.

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

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### 1D-1. 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

## 1E. Local CoC Competition

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### **\*1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.**

**Applicants must indicate whether the CoC:**

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Did not reject or reduce any project
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

### **1E-2. Project Review and Ranking–Objective Criteria.**

**Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:**

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

### **1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.**

**Applicants must describe:**

- 1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and**
  - 2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.**
- (limit 2,000 characters)**

1-Each project is scored according to the same criteria but on a different range depending upon their component type, which determines the severity of needs and vulnerabilities of their clients. PSH is currently limited to serving only chronically homeless, and RRH is open to homeless families and singles. Due to the higher vulnerability of clients served, projects classified as PSH will have expectations that participants that need more resources less than RRH.

Our PSH

Projects are housing high acuity clients, as we still have a waitlist with chronically homeless adults. Additionally, we evaluate projects based on their abide by Housing First and compliance with Coordinated Access. Ensuring all clients housed in CoC projects are the highest need, the applicant will receive full points for 100% referrals from CA, regardless of type. 2-

All renewal projects are scored and ranked from highest to lowest, in accordance with our posted Ranking Policy, but the Steering Committee holds the final say in overriding the top to bottom scoring if a low performing project supporting those clients with high needs, ranks lower than high performing project serving lower need population. Historically, we have had PSH projects with slow startups, that needed to be protected even though they score lower than RRH projects. Due to the waitlist being full of CH singles, the Steering Committee decided to protect a PSH project bumping a higher scoring RRH project to straddle the Tier 1-2 breakout. Housing Providers in our community create the scoring ranges that are recommended to the Steering Committee to give input on what are obtainable but competitive measures for their component types.

### **1E-4. Public Postings–CoC Consolidated Application. Attachment Required.**

**Applicants must:**

- 1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or**
- 2. check 6 if the CoC did not make public the review and ranking process; and**

**3. indicate how the CoC made public the CoC Consolidated Application—including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected—which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or**

- 4. check 6 if the CoC did not make public the CoC Consolidated Application.**

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

#### 1E-5. Reallocation between FY 2015 and FY 2018.

**Applicants must report the percentage of the CoC's ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.**

**Reallocation:** 11%

#### 1E-5a. Reallocation–CoC Review of Performance of Existing Projects.

**Applicants must:**

- 1. describe the CoC written process for reallocation;**
  - 2. indicate whether the CoC approved the reallocation process;**
  - 3. describe how the CoC communicated to all applicants the reallocation process;**
  - 4. describe how the CoC identified projects that were low performing or for which there is less need; and**
  - 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.**
- (limit 2,000 characters)**

The Reallocation Process is part of the CoC's Policies (p.17) and was approved by the CoC in 2016.(2) (1) Description - The CRHC (MI-508 Lansing/East Lansing/Ingham County CoC) considers reallocation throughout the year primarily during meetings of the CRHC (CoC) Board. This process includes a review of HUD priorities, gaps analysis of homeless populations and types of housing and services available in the community, reviews of HMIS data including the PIT and HIC counts and data trends over time, threshold review of the current CoC and ESG funded programs and their efficacy, and prioritizing needs of subpopulations. (4) Any decision to reallocate is made with the involvement of the CoC Board, who is elected by the CoC membership at large to conduct strategic planning for the area. (5) All CoC funded agencies are encouraged to attend these meetings.

Reallocation occurs during the NOFA process once the targets for reallocation have been announced by HUD. The Board reviews the current inventory of CoC programs and votes on whether a reallocation is needed. (5) This information is posted to the website along with the Opportunity for Funding announcement, delineating the new program criteria, the target population to be served, and a proposed overall budget. (3) An application informational meeting is offered to new applicants. New project proposals are reviewed and ranked along with all other projects. All applicants are notified at least 15 days in advance of the NOFA submission deadline to allow for solo applicant procedures. (4) & (5) For the 2019 NOFA, it was determined that no reallocations would be recommended, as all renewal projects provide priority services (PSH, TH or RRH) and are not low-performing. Many reallocations have been done in previous years. If the DV Bonus application is unsuccessful, reallocation may be considered in 2020 to fund DV programs or alternatives considered.



## DV Bonus

### Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

### 1F-1 DV Bonus Projects.

**Applicants must indicate whether the CoC is Yes**  
**requesting DV Bonus projects which are**  
**included on the CoC Priority Listing:**

**1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.**

1. PH-RRH	<input checked="" type="checkbox"/>
2. Joint TH/RRH	<input type="checkbox"/>
3. SSO Coordinated Entry	<input type="checkbox"/>

**Applicants must click “Save” after checking SSO Coordinated Entry to view questions 1F-3 and 1F-3a.**

### \*1F-2. Number of Domestic Violence Survivors in CoC’s Geographic Area.

**Applicants must report the number of DV survivors in the CoC’s geographic area that:**

Need Housing or Services	401.00
--------------------------	--------

the CoC is Currently Serving	115.00
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#### **1F-2a. Local Need for DV Projects.**

**Applicants must describe:**

- 1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).**  
**(limit 500 characters)**

1. Calculation is based on the number of households the sub-recipient DV provider served in the DV shelter and those they had to turn away because it was at capacity. The figure from the DV provider was combined with HMIS data on the number of households fleeing DV who were served by non-DV shelters. The number of households served in all shelters was reduced by a factor of .25 to account for potential duplication between DV and non-DV shelters.
2. EmpowerDB – comparable DV database & HMIS

#### **1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.**

**Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing—using the list feature below.**

<b>Applicant Name</b>	<b>DUNS Number</b>
City of Lansing	069835882

## 1F-4. PH-RRH and Joint TH and PH-RRH Project

### Applicant Capacity

DUNS Number:	069835882
Applicant Name:	City of Lansing
Rate of Housing Placement of DV Survivors–Percentage:	84.00%
Rate of Housing Retention of DV Survivors–Percentage:	87.00%

#### 1F-4a. Rate of Housing Placement and Housing Retention.

**Applicants must describe:**

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)**

1. No DV-specific RRH projects operate in the CoC.

Housing placement rate: % of permanent housing exits achieved by households fleeing DV in existing RRH projects. The rate was filtered using the “Currently fleeing” DV situation data element.

Housing retention rate: Stella’s Returns to the Homeless System trend data for all households fleeing domestic violence and exiting to permanent housing that did not return to the homeless system within 24 months of exit.

2. HMIS and Stella (LSA data)

#### 1F-4b. DV Survivor Housing.

**Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing.  
(limit 2,000 characters)**

EVE, the DV shelter and DV RRH Bonus sub-recipient applicant, works with the CEA and other COC partners to ensure DV survivors are safe, have choices, get assessments (VI-SPDAT) and access housing programs and mainstream benefits. Each survivor works with an EVE advocate who provides trauma-informed, strengths-based case management identifying barriers to housing, (such as lack of financial stability, poor credit history, poverty issues and crisis/trauma issues) and helps with benefits applications, landlord lists, and referrals. EVE uses an empowerment model that puts survivors in charge of how and when they will take the next steps, however, DV survivors may be more likely to leave their perpetrators if there is an RRH program specifically geared to them. The proposed DV Bonus EVE DV RRH program will add a full-time Housing Support Specialist (HSS) who is knowledgeable about DV, to help with housing searches and supportive services, while creating individualized safety plans. Additional staff should help move those who choose it into housing more quickly, leading to greater family stabilization, and reducing their length of time homeless.

The EVE DV RRH program will prioritize households based on VI-SPDAT

scores (4-8 for RRH programs) and severity of service needs. Other EVE programs that address housing barriers are readily available to DV survivors whether they reside in shelter or in the community. These services help survivors resolve barriers, such as PTSD or legal issues that may prevent their ability to obtain housing. This program is well-versed in creating safety plans with each survivor.

#### **1F-4c. DV Survivor Safety.**

**Applicants must describe how project applicant:**

- 1. ensured the safety of DV survivors experiencing homelessness by:**
    - (a) training staff on safety planning;**
    - (b) adjusting intake space to better ensure a private conversation;**
    - (c) conducting separate interviews/intake with each member of a couple;**
    - (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
    - (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
    - (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**
  - 2. measured its ability to ensure the safety of DV survivors the project served.**
- (limit 2,000 characters)**

- a. Safety is EVE's primary concern. New EVE staff shadow advocates for 2 weeks to learn safety planning techniques and tools. EVE's staff attend 20 hrs. of new service provider training by the Michigan Coalition Against Domestic and Sexual Violence (MCADSV) that includes safety planning, CPS reporting, etc.. EVE staff attend ongoing safety training at annual DV conferences, MCOLES, webinars, etc. EVE trains entire CoC annually on DV.
  - b. At EVE's DV shelter, intake occurs behind closed doors either in a staff office or in the crisis line area, with white noise machines. The CEA comes to EVE to do SPDATS. Other agencies do DV intake behind closed doors.
  - c. Shelters serving couples who suspect DV conduct separate interviews. EVE does not work with couples, nor abusers.
  - d. EVE uses tools to develop safety plans with survivors that includes safe housing (see attachment 1F-4c). EVE works with landlords and homeless agencies to locate housing the survivor feels is safe and secure. If the survivor is not comfortable with a proposed location or type of housing the search continues. Survivors make the final choice. Leases must contain VAWA Emergency Transfer Plan clause.
  - e. All area shelters (congregate) maintain HUD Minimum Standards' safety requirements and receive annual City Code inspections and monitoring by multiple funding agencies, including the CoC Recipient. EVE has a secure entry system, door and window alarms, cameras, a metal fence to parking lot, and a 911 call system that alerts all staff in all buildings. Police regularly patrol the area.
  - f. The EVE's shelter location is confidential, and former DV RRH program survivors are allowed to use EVE's PO Box for their mail to help maintain a confidential address. RRH unit locations are confidential.
2. EVE surveys survivors at their 3rd meeting with staff to measure whether they have: 1) been given tools or information related to safety; and, 2) established a safety plan (received 95 – 100% positive responses).

#### **1F-4d. Trauma-Informed, Victim-Centered Approaches.**

**Applicants must describe:**

- 1. project applicant's experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and**
  - 2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**
    - (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;**
    - (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
    - (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
    - (d) placing emphasis on the participant's strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
    - (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
    - (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
    - (g) offering support for parenting, e.g., parenting classes, childcare.**
- (limit 4,000 characters)**

1. EVE's staff, services, and policies are trauma-informed and victim-centered. Open since 1977, EVE uses an empowerment strengths-based model to help survivors create their own goals and support their choices. EVE receives VAWA and VOCA funds and all EVE counselors are MSW's with certifications in Trauma Focused and Cognitive Behavioral Therapy methods, with a focus on PTSD. EVE's philosophy: "EVE believes victims of dating and domestic violence, including sexual violence, have the right to be treated with dignity and respect. EVE's survivor services promote safety, access to information and available options, and community resources that empower survivors to assert their right to self-determination. Support and advocacy are available to survivors at their request." Staff engages and encourages survivors, helping them identify their own strengths and offering support. EVE maintains data confidentiality by maintaining a comparable data base. ROIs are time-limited and specific.

2a. Survivors make the choices and decisions about their own housing, creating housing goals, and choosing locations. EVE assists with the emotional trauma and impact of abuse while connecting DV survivors to housing resources. EVE has shown great flexibility in extending shelter stays to avoid DV family homelessness, while they search for housing. The DV RRH program will work with survivors who have chosen to leave and find new housing, helping address housing barriers, offering resources and potential solutions, in an accepting, hopeful, and supportive way. Survivors can choose to be an "unnamed record" for HMIS when enrolled in CoC housing programs.

b. EVE's staff directive is the following: "EVE clients are very important to us. Staff is to be courteous, polite, respectful, and patient at all times. If staff violate this policy they will have consequences with their supervisor." (EVE's policy manual) Equality & power differentials are addressed throughout all EVE's

policies that are non-punitive and based on empowerment, respect, and survivor self-determination. Complaint and Grievance policies are also available and readily accessible.

c. Survivors frequently receive trauma-related information and tools (see attachments 1F-4d(2)(c)&(d)) in multiple ways and are counseled by EVE's Trauma certified Counselors with a PTSD specialty. Support groups are professionally led and provide peer support.

d. EVE's strengths-based approach is infused in all interactions with survivors including coaching and in case plans. Assessment tools help survivors identify their own strengths, e.g. survivor goal sheet, strengths assessment tool, equality wheel, Power & Control wheel. (see attachments 1F-4d(2)(d))

e. As a CoC partner, EVE is trained and ascribes to the CoC's Equal Access requirements and policy. EVE staff are trained in cultural competency and diversity from the MCADSV. EVE has established an internal social justice committee to identify diversity or competency gaps and make recommendations to address them. EVE works to diversify their staff, board and volunteer pool.

f. EVE hosts a number of peer support groups for DV survivors and their children, including family therapy groups. Volunteers and interns provide mentoring and survivors are encouraged to create new or maintain informal support systems with safety in mind. Congregate shelter living provides many informal connections.

g. EVE provides family counseling that addresses parenting skills, especially for children who have witnessed abuse, and offers children and teen groups as needed. Child care is available during EVE Counseling Groups. Safe, supervised play areas are provided. See tools for parents (attachments 1F-4d(2)(g)).

#### **1F-4e. Meeting Service Needs of DV Survivors.**

**Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:**

- Child Custody
- Legal Services
- Criminal History
- Bad Credit History
- Education
- Job Training
- Employment
- Physical/Mental Healthcare
- Drug and Alcohol Treatment
- Childcare

**(limit 2,000 characters)**

Safety is the first priority for EVE and the CoC when working with DV survivors. EVE partners with several mainstream services in the area to safely address DV survivor's needs, especially related to housing barriers like family legal issues and increasing income. EVE's legal advocacy helps navigate court systems, law enforcement, Friend of the Court, custody, resolve credit issues, etc. EVE helps connect survivors to housing resources safely, by bringing

services to them. EVE helps with benefit applications, recovering assets from abusers, gathering documents, job searches or training, and connecting to educational resources. EVE also locates work clothing and refers to free clinics for health care. Primary partners include the above plus Department of Health and Human Services, Social Security Administration, Child & Family Charities (free respite child care), other DV shelters, Michigan Works, Lansing Community College, Financial Empowerment Center, Rent Smart, Tri County Area Agency on Aging, Legal services, Community Mental Health and Mid-Michigan Recovery Services (substance use treatment). EVE's goal is to engage partners that can help support survivors long-term, in a coordinated care approach.

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

### Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

### Resources:

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**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

### 2A-1. HMIS Vendor Identification. Wellsky

**Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.**

### 2A-2. Bed Coverage Rate Using HIC and HMIS Data.

**Using 2019 HIC and HMIS data, applicants must report by project type:**

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	473	30	443	100.00%
Safe Haven (SH) beds	9	0	9	100.00%
Transitional Housing (TH) beds	62	0	62	100.00%
Rapid Re-Housing (RRH) beds	161	0	161	100.00%
Permanent Supportive Housing (PSH) beds	481	0	267	55.51%
Other Permanent Housing (OPH) beds	70	0	70	100.00%

### 2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.

**For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-2., applicants must describe:**



**1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and  
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.  
(limit 2,000 characters)**

The only PSH beds not represented in the local HMIS implementation are HUD-VASH units and beds.

1. The steps to bring HUD-VASH units/beds onto HMIS include: meeting with the Lansing Housing Commission - the PHA administering the HUD-VASH vouchers - and the local VA representative to understand the processes, data collection points and privacy concerns; identifying existing data sources for clients entering HUD-VASH, such as the GPD and SSVF providers who are already entering information in HMIS to see if existing information collected for veterans can be used to ease the data entry burden – the CoC has a sharing agreement in place that could be expanded to include the entities operating HUD-VASH; estimate and identify resources needed for the data entry and upkeep of records on HMIS.

2. The CoC will implement the above steps by: collaborating with community partners, communicating the importance of having complete bed coverage in HMIS to the CoC leadership, generate buy-in with the agencies involved with the administration and housing of HUD-VASH to support the unfunded efforts needed to input the information in HMIS, and leveraging relationships with the VA, PHA, and GPD and SSVF providers to develop a plan that is amiable to all parties. Given the large number of vouchers in the community, it may be less burdensome to begin by entering new voucher recipients as they are enrolled and housed rather than attempting to backdate all 180 participant households. The CoC's Continuous Quality Improvement committee could be charged with monitoring progress on the plan.

**\*2A-3. Longitudinal System Analysis (LSA) Submission.**

**Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0.** Yes

**\*2A-4. HIC HDX Submission Date.**

**Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).  
(mm/dd/yyyy)** 04/30/2019

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

### Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

**2B-1. PIT Count Date.** 01/30/2019

**Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).**

**2B-2. PIT Count Data–HDX Submission Date.** 04/30/2019

**Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).**

**2B-3. Sheltered PIT Count–Change in Implementation.**

**Applicants must describe:**

**1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and**

**2. how the changes affected the CoC's sheltered PIT count results; or**

**3. state "Not Applicable" if there were no changes.**

**(limit 2,000 characters)**

The sheltered count changed as a result of a shelter joining the HMIS implementation in December 2018. Prior to 2019 the shelter used survey forms to collect data from people they were sheltering on the night of the count. This year we were able to leverage the information collected during their intake process and entered in HMIS for the count. This helped with the accuracy and completeness of their data since it allowed for data quality reviews pre- and post-count. While the change may not have impacted the number of people counted at the shelter, it did provide a more complete data set of the characteristics and homeless history of the people at this shelter. Having all

non-DV shelters represented on HMIS made it easier to ensure that people were only counted one time, at the location they resided on the night of the count.

Another change was the opening of an overnight "Outreach Center" in mid-January 2019 operated by the City Rescue Mission. The Outreach Center is a low-barrier drop-in shelter that provides a safe and secure place for men and women who struggle in the typical community living environment of most other shelters. This new location is able to shelter up to 40 people and was not in operation during the 2018 PIT.

**\*2B-4. Sheltered PIT Count—Changes Due to Presidentially-declared Disaster.**

**Applicants must select whether the CoC added or removed 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 2019 sheltered PIT count.** No

**2B-5. Unsheltered PIT Count—Changes in Implementation.**

**Applicants must describe:**

**1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and**

**2. how the changes affected the CoC's unsheltered PIT count results; or**

**3. state "Not Applicable" if there were no changes.**

**(limit 2,000 characters)**

"Polar vortex" weather conditions leading up to and during this year's PIT date affected the unsheltered count. The Governor declared a State of Emergency in Michigan due to a winter storm leading to dangerous wind chills of -35 to -50 degrees on the night of the count. As such, the unsheltered count was not conducted according to plan as shelters and emergency warming centers were opened to address safety concerns of people without a warm safe to spend the night. Knowing that many people who may have otherwise been unsheltered had moved into sheltered situations the outreach portion of the count was conducted with fewer and smaller groups of staff, volunteers and emergency services personnel visiting targeted locations to ensure that people were not out in the elements. Volunteers were also sent to indoor service-based locations during the early morning following the night of the count to identify people who were homeless, but did not stay in a shelter or warming center. There were people identified, but many fewer than have been counted in a typical year. Additionally, as a result of the expanded shelter accommodations and life-threatening weather conditions, the shelter count was larger than it had been in recent years.

A notable difference between the 2019 unsheltered PIT and prior years is that there were no people counted based only on observations in 2019. With the safety concerns in mind, any person encountered was engaged to ensure they

had a safe, warm place to spend the night and if not, arrangements were made to get them to a warming center. This improved the quality of the information collected from people counted in unsheltered situations because there were opportunities to go through the entire PIT survey with each person.

**\*2B-6. PIT Count–Identifying Youth Experiencing Homelessness.**

**Applicants must:**

**Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count.** Yes

**2B-6a. PIT Count–Involving Youth in Implementation.**

**Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:**

- 1. plan the 2019 PIT count;**
  - 2. select locations where youth experiencing homelessness are most likely to be identified; and**
  - 3. involve youth in counting during the 2019 PIT count.**
- (limit 2,000 characters)**

1. The coordinator of CoC's youth street outreach program was involved throughout the PIT planning process. The PIT planning committee uses a digital map for identifying and sharing locations and youth outreach workers contributed known locations to the map, identifying locations where youth may be found during the unsheltered count. On the day and night of the count, the staff of the youth outreach program visited the known locations in attempt to identify homeless youth. Having familiar faces visiting the locations may have encouraged youth to participate in the count or to be more forthcoming with their circumstances than they may have been with an unfamiliar adult.

2. A youth-specific street outreach program also works in neighboring Eaton and Clinton Counties and is familiar with locations and patterns of youth moving around the tri-county area. Information from the youth outreach was incorporated into the PIT planning. Additionally, outreach providers meet monthly to share information about locations where people, including youth, experiencing unsheltered homelessness have been identified. The group documents these locations throughout the year and locations are incorporated into the PIT planning.

3. Youth experiencing homelessness were involved indirectly by sharing information with the youth outreach team about locations to canvass. Additionally, the CoC has a youth-only shelter and transitional housing. Staff learn from the youth staying in their programs about where they had been and how they get by while homeless. This information can inform outreach works about new locations to visit where more youth may be. This information is shared with the planning committee and incorporated into the PIT map of known locations.

**2B-7. PIT Count–Improvements to Implementation.**

**Applicants must describe the CoC's actions implemented in its 2019 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)**

1. After the count people who identified as chronically homeless were cross-referenced with the CoC's chronically homeless By Name List (BNL) maintained by the Coordinated Entry provider. PIT records were checked to make sure all known people were counted. HMIS records were reviewed to verify shelter stays and length of time homeless of people who self-reported as experiencing chronic homelessness. Due to extreme weather conditions, more people were sheltered this year allowing for staff to do assessments rather than volunteers administering surveys in the field. A shelter joining the HMIS implementation at the beginning of the year helped by allowing PIT information to be taken from HMIS rather than surveys, which may have improved accuracy of the homeless history information.

2. The PIT survey format was revised last year to improve data collection from families by making it easier to collect information from all household members on the same form as the head of household. and was more user-friendly for the surveyors. The inclusion of another shelter in the HMIS implementation also helped. In prior years surveys had been used at the shelter, but this year HMIS records were used for the PIT. Having the shelter staff enter clients in HMIS likely led to more accurate and complete information because HMIS was used for pre- and post-count data quality reviews to ensure reliable data was collected and reported.

3. The CoC maintains a By Name List of veterans experiencing homelessness. After the count, people identifying as veterans were cross-referenced with the BNL. This helped to ensure that all veterans known to be experiencing homelessness were accounted for in the PIT. As part of a quality review we collaborated with the VA to verify the veteran status of people who self-reported as a veteran, but were not on the BNL. This also helped to ensure that the BNL was complete and representative of all homeless veterans in the CoC.

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

### Instructions

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**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

### \*3A-1. First Time Homeless as Reported in HDX.

#### Applicants must:

Report the Number of First Time Homeless as Reported in HDX.
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1,817
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### 3A-1a. First Time Homeless Risk Factors.

#### Applicants must:

1. describe the process the CoC developed to identify 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. To identify risk factors, the CoC taps knowledge & data from local homeless service providers and mainstream agencies (Coordinated Entry Agency (CEA), RRH, PHA, city governments, Legal Services, VA, McKinney- Vento liaisons, Dept of Health & Human Services (DHHS)) primarily at Network meetings as: evictions, unpaid utilities, 48 month lifetime TANF limits, unexpected expenses or health crises, substance use, job loss, untreated mental illness, etc. The Coordinated Entry Agency screens people seeking housing assistance to understand their needs. The screening includes questions about current housing status and housing history to identify people who may become homeless for the first time and to determine the most appropriate resources and

referrals to offer people.

2. Based on above, strategies are: Eviction Diversion Program (EDP) at two District Courts; ESG, City, or DHHS Prevention or Emergency funds for financial assistance, rental arrears or utilities; Joint ESG-Legal Services Corporation (LSC) funded Legal representation/mediation; CEA diversion strategies that maximize family supports, refer to employment & education agencies. City funded program with the PHA pays rent, arrears, utilities or other bills to maintain subsidized housing. Local Ability Law Clinic & SOAR program helps with SSI/SSDI applications. Free Medical/Dental Clinics address health crises. City's Landlord liaison identifies issues with housing stock & affordability. CEA & shelters refer to mainstream programs that provide food, clothing, employment training to at-risk persons. Bridges Crisis Unit shelters mentally ill persons. Youth Agency diffuses family conflicts to prevent homelessness. City funded local utilities program fills gaps. CoC Network meetings provide ongoing resource information and training on all programs that address these risk factors.

3. CRHC-COC Board & Strategic Plan Committee

**\*3A-2. Length of Time Homeless as Reported in HDX.**

**Applicants must:**

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.
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52
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**3A-2a. Strategy to Reduce Length of Time Homeless.**

**Applicants must:**

- 1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;**
  - 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and**
  - 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.**
- (limit 2,000 characters)**

1. Strategies include: following the Housing First philosophy and focusing on moving people from the streets or shelter into housing before completing additional service needs assessments. Supportive services are prioritized after housing has been stabilized. Working with participants to proactively identify potential tenant screening barriers and providing active assistance locating permanent housing that is safe and affordable. Expanding relationships with landlords willing to work with participants with poor rental/credit history and other housing barriers. Shelters are involved in an NAEH learning collaborative receiving TA to help adopt a stronger housing focus. As a result of the ongoing TA, the day one conversation with people in shelter is about developing a housing plan and how to move from shelter to a housing situation. Shelters and coordinated entry staff work to address barriers to housing – prioritization assessment, getting birth certificates, applying for benefits, identifying housing, completing rental applications, credit/background checks - all in a trauma-informed, client- centered way. The CEA & shelters have landlord "lists" that are

cultivated and provided to clients. Shelters are reporting monthly metrics about inflows and outflows to housing and evaluating changes in housing outcomes along through the course of the TA. The City's Rent Smart program teaches people how to be successful tenants including budgeting/cost analysis.

2. The Outreach team pro-actively identifies street homeless, often CH with longer LOTs homeless. All are screened and prioritized at the CEA/Shelters for longest time homeless and most severe services needs using VI-SPDAT and CPD-16-11 Orders of Priority. The CEA verifies LOT, uses a CH By-Name-List, makes referrals to available RRH and PSH. The Interdisciplinary Team (IDT) confers on high needs people.

3. CRHC CoC Continuous Quality Improvement Committee (CQI) & CoC Board.

**\*3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.**

**Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	35%
2. Report 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 as reported in HDX.	96%

**3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.**

**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;

2. provide the organization name or position title responsible for overseeing 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;

3. 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; and

4. provide the organization name or position title responsible for overseeing 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. Nearly all local shelters are involved in an NAEH learning collaborative that aims to improve exits from shelters to housing. The TA is about helping the shelter system as a whole adopting a low-barrier, housing-focused model that is better integrated into the CoC's systemic response to homelessness. Additional strategies include: working with people in shelter on developing client-centered housing plans, intensive and progressive engagement to establish connections



with hard-to-reach persons, IDT case conferencing, Coordinated Entry Agency makes specific referrals according to needs and eligibility, using housing “locator” to identify housing leads, strength-based and trauma-informed case management, linkages to benefits and employment programs, & follow-up after housing to ensure ongoing stability. Offering the Rent Smart program which teaches about tenants rights & being good tenants. Ongoing communication and recruitment of landlords to work with.

2. CoC Board, Strategic Planning Committee & CoC’s Shelter and RRH committees.

3. Strategies include intensive case management to connect with resources to maintain housing, identification of housing retention barriers, need for employment or disability benefits/services, low-cost child-care, etc. The Interdisciplinary Team (IDT) provides case consults that reviews difficult cases to generate solutions and enlists help addressing barriers. Some PSH use master leasing to remove the “timely rental payments” barrier. Others requesting alerts from landlords about late or unpaid rent. Success with PSH exits is the result of intensive case management, using trauma-informed practices, helping people identify affordable housing at the beginning, priority for homeless persons in public housing, and a Move Up voucher program created specifically for people ready to transition from PSH. Case management follow-up is also key to their success.

4. CoC Board, Strategic Planning Committee & CoC’s Shelter and RRH committees

#### **\*3A-4. Returns to Homelessness as Reported in HDX.**

##### **Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	9%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	19%

#### **3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.**

##### **Applicants must:**

**1. describe the strategy the CoC has implemented to identify 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 return to homelessness.**

**(limit 2,000 characters)**

1. The Coordinated Entry Agency screens people seeking housing assistance to understand their needs. The screening includes questions about current housing status and housing history to identify people who are returning to homelessness. The CoC also uses the VI-SPDAT assessment tool that asks about a household’s history of homelessness. The CE teams visit all local

shelters to conduct screenings and meets with people who are in unsheltered situations identified by street outreach. PSH and RRH providers also play a role in identifying when participants in programs are in jeopardy of eviction and/or returning to homelessness by communicating with participants and landlords.

2. Strategies to reduce rate of returns include: ensuring participants are aware of mainstream resources and services that are available to address their basic needs - DHHS cash assistance, food, clothing, rent, utilities, medical care, child care, employment services, educational resources, substance use, mental health, financial literacy and prevention funds. Ongoing assessment of housing retention barriers & “step-down” case management for clients preparing to exit housing programs. City HRCS focus on eviction prevention for public housing & addressing basic needs. Weekly Eviction Diversion Program at District Court (EDP) identifies people with eviction notices and offers mediation & prevention funds. The Rent Smart program teaches people how to mediate with landlords, care for housing units, budgeting, etc. Obtaining more preferences in public housing/vouchers. Educate “at-risk” people about mainstream programs through awareness events. CoC also educates mainstream agencies, many who are CoC members, to refer people “at-risk” to resources that can help to prevent homelessness.

3. Quarterly CQI reports to CoC Board focuses on these measures. Overseen by CoC Board and Strategic Planning.

### **\*3A-5. Cash Income Changes as Reported in HDX.**

#### **Applicants must:**

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	8%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	18%

### **3A-5a. Increasing Employment Income.**

#### **Applicants must:**

1. describe the CoC's strategy to increase employment income;
  2. describe the CoC's strategy to increase access to employment;
  3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
  4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.
- (limit 2,000 characters)**

1. Strategies to increase earned income include: Housing plans have job/income /financial literacy goals, “warm hand-offs” to One-Stop employment centers, MI Talent Connect, Peckham, Inc. (voc rehab), youth job programs, community colleges, training programs, job application help, literacy programs, hiring homeless persons, link to volunteer work, referrals to GED, ESL, or

refugee services, and transportation assistance. Life skills education takes place within programs and is sometimes a precursor to employment. Vouchers to local thrift shops and “community closets” are used to help people acquire work attire or clothing for interviews.

2. Strategies to increase access to employment include: counseling, education and providing resource opportunities to participants. Employment case management services includes help with applying for jobs, creating resumes, and teaching soft skills to help maintain employment. Participants are referred to Peckham Vocational Industries, PAR Rehab vocational rehabilitation or a variety of temp agencies, based on participant interests and abilities. These resources can help connect people with disabilities to part-time employment opportunities.

3. CoC provides a “warm hand-off” to mainstream agencies such as Michigan Works!, Michigan Rehabilitation Services, Aging & Disability Resource Centers (ADRC), Independent Living Centers, AAAs, AARP, SOAR, and Community College programs which offer resources, support, and skills development to people needing employment services. Services and referrals are provided to develop and improve soft skills that lead to promotional opportunities. CoC agencies have VA, homeless sub-contracts to assist in job searches. Many of these agencies above are CoC members, attending and presenting their resources/opportunities at Network meetings.

4. CRHC CoC Board and all homeless provider and mainstream agencies.

### **3A-5b. Increasing Non-employment Cash Income.**

#### **Applicants must:**

- 1. describe the CoC's strategy to increase non-employment cash income;**
- 2. describe the CoC's strategy to increase access to non-employment cash sources;**
- 3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.**

1. The primary strategy for increasing non-employment income when work is not an option is to apply for SSI/SSDI benefits. The Ability Benefits Clinic helps people apply for disability income and represents them in hearings and appeals to help secure benefits. Those eligible for SSI/SSDI also apply for State Disability Assistance. PATH and CMH staff also help people access income from benefits, such as SSI/SSDI and veteran benefits. For families, particularly single-parent households, parents are encouraged to file for Child Support as a means to increase income. Families with children are also instructed to apply for TANF assistance.

2. A barrier to access to non-employment income is not having identification documents. To address this the City of Lansing offers assistance to people experiencing homelessness to secure identification documents and the Michigan Secretary of State implemented a policy to accept HMIS-generated ID cards as a form of identification people may use to obtain a State ID and to qualify for a State ID fee waiver. A large portion of PSH participants are candidates for SSI and are referred to SOAR specialists, Disability Appeals Advocates or the Ability Benefits Clinic to help with SSI/SSDI applications or appeals. Access to these resources are available to people before, during and after their stay in a shelter or enrollment in a housing program. PATH outreach workers are SOAR-trained and share information about income benefits to people who are unsheltered. Referrals are also made to MDHHS for State

Disability Assistance, cash/food assistance, Medicaid & other benefits.  
3. CRHC CoC Board and all homeless provider and mainstream agencies.

### 3A-5c. Increasing Employment. Attachment Required.

**Applicants must describe how the CoC:**

**1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and**

**2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.**

**(limit 2,000 characters)**

1.CoC strategies led to 32% of stayers and 41% of leavers increasing their total incomes, an 8% and 12% increase from 2017, respectively. Strategies to increase access to employment opportunities include: Community Connect events invite employers to staff booths, Housing plans have job/income /financial literacy goals, “warm hand-offs” to One-Stop employment centers, MI Talent Connect, Peckham, Inc. (voc rehab),youth job programs, community colleges, training programs, job application help, literacy programs, hiring homeless persons, link to volunteer work, and referrals to GED, ESL, or refugee services. Life skills education takes place within TH, PSH programs and is sometimes precursor to employment.

2.CoC provides a “warm hand-off” to mainstream agencies such as Michigan Works!, Aging & Disability Resource Centers (ADRC), Independent Living Centers, AAAs, AARP, SOAR, Peckham, Inc. and Community College programs to refer and support people needing employment services. CoC agencies have VA, homeless sub-contracts to assist in job searches. Many of the employment agencies above are CoC members, attending, presenting and recruiting at Network meetings.

### 3A-5d. Promoting Employment, Volunteerism, and Community Service.

**Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC’s geographic area:**

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	<input type="checkbox"/>
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	<input type="checkbox"/>
3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	<input type="checkbox"/>
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	<input type="checkbox"/>
5. The CoC works with organizations to create volunteer opportunities for program participants.	<input type="checkbox"/>
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	<input type="checkbox"/>

7. Provider organizations within the CoC have incentives for employment.	<input type="checkbox"/>
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	<input type="checkbox"/>

**3A-6. System Performance Measures** 05/31/2019  
**Data–HDX Submission Date**

**Applicants must enter the date the CoCs  
submitted its FY 2018 System Performance  
Measures data in HDX. (mm/dd/yyyy)**

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

### Instructions

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### 3B-1. Prioritizing Households with Children.

**Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.**

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of previous homeless episodes	<input checked="" type="checkbox"/>
3. Unsheltered homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad credit or rental history	<input checked="" type="checkbox"/>
6. Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

### 3B-1a. Rapid Rehousing of Families with Children.

**Applicants must:**

**1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;**

**2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once**

assistance ends; and

**3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.**

**(limit 2,000 characters)**

1.The CoC RRH-Families and Fresh Start RRH house families with children. 31% of the RRH-Families were housed within 30 days. The CoC 's strategy is to increase RRH units in the last three NOFAs through reallocation and has increased by 25 units. Two new RRH programs began in 2018, one a youth TH-RRH program. The CoC priority is to avoid unsheltered family homelessness. Hoteling is used only when all shelters are full. CEA and family shelters use Housing First, low barrier approaches & conduct the VI-Family SPDAT within 48 hours to prioritize on factors such as severity of service needs, length of time (LOT) homeless, unsheltered status, DV, disability, etc.

Strategies include creating a Housing Plan and Goals and:

- If higher SPDAT scores or possible CH, review PSH vacancies, add to By Name or High Acuity Lists and notify PSH providers;
- For medium SPDAT scores, refer to CoC RRH family programs, ESG State RRH program, and DHHS State Emergency Relief;
- If disability refer to Ability Law Clinic for SSI/SSDI application;
- For Landlord mediation or credit issues refer to Legal Services ESG Prevention;
- For permanent housing beyond RRH, enroll in HCV lists, PHA lists;
- Provide Landlord leads, Housing Locator search, and progressive case management.

2.Once assistance ends, families are contacted monthly for at least six months to assess and address housing retention barriers that may lead to failure – e.g. job loss, credit issues, budgeting, family issues, children's needs, health care, and so on. These connections start while still in the program, and families are encouraged to call the agency if they run into problems. Families are also informed of special events/programs that distribute food, children's clothing, etc., as well as City of Lansing's Rent Smart classes that provide help with landlord relationships.

3.CoC Board, RRH sub-committee

### **3B-1b. 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 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 any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.**

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	<input type="checkbox"/>
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	<input checked="" type="checkbox"/>

3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>

### 3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.

Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:

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

### 3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.

Applicants must check all that apply that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
3. Unsheltered Homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad Credit or Rental History	<input checked="" type="checkbox"/>

### 3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.

Applicants must describe how the CoC increased availability of housing and services for:

1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and
2. youth experiencing unsheltered homelessness including creating new



**youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.  
(limit 3,000 characters)**

1. The CoC voted to increase housing and services for homeless youth in the 2017 NOFA through a reallocation and a 65% funding increase to create a Joint TH-RRH program to provide more options for youth, especially those who cannot live in congregate settings. In the first year, 18-19, the RRH for Youth program served 47 youth, 14 in TH and 33 in RRH, including youth with children. 21 have been enrolled in RRH for 6 months or more (64%). Life coaches help youth build life skills and case management addresses housing barriers, helps with benefits applications and more.

Another new resource (Maternity Group Home federal grant) for young families provides rental assistance up to 18 months. Other Prevention and Short-Term Emergency Shelter funds were increased to expand family unification services to youth. Many local youth programs receive Runaway & Homeless Youth funds.

2. 73% of youth entering the new RRH for Youth program came from the streets in the past year. This speaks to an effective youth focused Street Outreach Team and their success in engaging youth. Availability of housing and services for unsheltered youth is sufficient with a robust Street Outreach program funded in part by the City & State ESG programs and the Youth Transitional Housing and Emergency shelter that has multiple funders and has enough space to meet the current need. This is based on analysis of utilization rates. The CoC Strategic Plan is assessing needs for a low-barrier youth drop-in center with short-term, crisis beds for older youth, to improve engagement with unsheltered youth, or those in human trafficking or who have failed in other systems (e.g. aging out of foster care, mental health systems or unsupported independent living.)

**3B-1d.1. Youth Experiencing Homelessness—Measuring Effectiveness of Housing and Services Strategies.**

**Applicants must:**

- 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. 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 both strategies in question 3B-1d.; and**
- 3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d.  
(limit 3,000 characters)**

1. The evidence to measure the efficacy of the reallocation to increase the availability of housing and services to the RRH for Youth program is based on the larger numbers of youth served (47), especially coming from the streets to RRH and the 64% retention rate. The TH-RRH program has served more youth overall and in ways that are more client-centered and flexible with options to stay in TH or RRH or a combination. The second strategy is to support the Street Outreach program and prioritize unsheltered youth for housing and services and is evidenced by numbers of youth contacted, numbers engaged, numbers receiving outreach services such as harm reduction and safety plans, hygiene products, connections to safer housing, etc., and resulting numbers who came into shelters, TH or RRH. These numbers increased this year.

2.The measures for the Joint TH-RRH objectives are similar to other RRH programs to measure % who exit to permanent housing, % who retain permanent housing. The first program year ended 8/31/19 so data is still preliminary. Measures for Street Outreach are primarily numbers and percent who are engaged, connected to services, move to a safer setting, shelter, TH, or receive immediate assistance. For youth, family reunification is also an acceptable measure of success.

3.These measures are acceptable as they are already used and approved by either the HUD HMIS or HDX system or the Runaway and Homeless Youth program, both federally funded programs. It should be noted Child and Family Charities - Gateway Youth Division is a long-standing youth services agency with staff trained in trauma-informed care, positive youth development practices, and specialized youth assessment tools that are used across all their services. CFC is considered the youth experts in this community and have been long-time CoC members.

### **3B-1e. Collaboration–Education Services.**

#### **Applicants must describe:**

- 1. the formal partnerships with:**
  - a. youth education providers;**
  - b. McKinney-Vento LEA or SEA; and**
  - c. school districts; and**
- 2. how the CoC collaborates with:**
  - a. youth education providers;**
  - b. McKinney-Vento Local LEA or SEA; and**
  - c. school districts.**

**(limit 2,000 characters)**

1. Formal partnerships include a permanent CoC Board seat for the primary McKinney-Vento liaison from the Lansing School District that encompasses most families in the homeless system. This allows a decision- making role in all CoC policies/decisions. Formal CoC policies are also established for the McKinney-Vento liaison and Head Start agency as partners.
- 2.a. The CoC works with youth education providers, both public and private, throughout the area, who participate as CoC members and are contacted on a daily basis by CoC shelter and DV agencies who must arrange rides to school and related services for children/youth. Head Start and Early Head Start are also Network members. The CoC coordinates with education providers through joint events, case consultations and annual orientations on homeless services.
- 2.b. The CoC works with the SEA and LEA primarily through the CoC's CEA and Local Liaisons, one of whom serves as a CoC board member and is very active in linking homeless services with her families encountered at school. She is well-versed on the homeless services offered and has frequent contacts with CoC-funded agencies to secure services where needed. She is especially aware of Prevention/RRH programs that can serve "at-risk" families and alerts the CoC to her school programs and resources for homeless families. She also educates her colleagues on the homeless system and ways to intersect and obtain services.
- 2.c. The CoC coordinates with all schools districts in the area, primarily the Lansing School District, but also East Lansing, Okemos, Haslett, Waverly,

Mason and Leslie in the outlying areas. Schools are well aware of services available through their Local Liaisons. Each year, the youth services agency, Child and Family Charities, contacts all liaisons and school counselors/social workers in the Tri-County area through their Outreach team, resulting in many referrals.

**3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.**

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

CoC Co-Chair Rose Taphouse is liaison for Lansing School District and McKinney Vento representative for district. She is the primary contact for all local shelters and PSH programs who are required to ensure any school-aged children in families they house are aware of their rights to education services. She arranges rides to school, keeps tabs on the at-risk and doubled up families, as well as homeless providing a wide variety of services to them. Each homeless provider is required to designate a staff member who is in charge of making the connections to education services. This is the primary CoC policy and each agency is monitored annually on this requirement.

**3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.**

**Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.**

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	Yes
Federal Home Visiting Program	No	Yes
Healthy Start	No	Yes
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	Yes
Other: (limit 50 characters)		

**3B-2. Active List of Veterans Experiencing Homelessness.**

**Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC.** Yes

**3B-2a. VA Coordination–Ending Veterans Homelessness.**

**Applicants must indicate whether the CoC is actively working with the U.S. Department of Veterans Affairs (VA) and VA-funded programs to achieve the benchmarks and criteria for ending veteran homelessness.** Yes

**3B-2b. Housing First for Veterans.**

**Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach.** Yes

**3B-3. Racial Disparity Assessment. Attachment Required.**

**Applicants must:**  
**1. select all that apply to indicate the findings from the CoC's Racial Disparity Assessment; or**  
**2. select 7 if the CoC did not conduct a Racial Disparity Assessment.**

1. People of different races or ethnicities are more likely to receive homeless assistance.	<input checked="" type="checkbox"/>
2. People of different races or ethnicities are less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	<input checked="" type="checkbox"/>
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	<input checked="" type="checkbox"/>
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
7. The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

**3B-3a. Addressing Racial Disparities.**

**Applicants must select all that apply to indicate the CoC's strategy to address any racial disparities identified in its Racial Disparities Assessment:**

1. The CoC is ensuring that staff at the project level are representative of the persons accessing homeless services in the CoC.	<input checked="" type="checkbox"/>
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	<input checked="" type="checkbox"/>
3. The CoC has identified strategies to reduce disparities in their homeless system.	<input checked="" type="checkbox"/>
4. The CoC has implemented strategies to reduce disparities in their homeless system.	<input checked="" type="checkbox"/>
5. The CoC has identified resources available to reduce disparities in their homeless system.	<input type="checkbox"/>
6: The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

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

### Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

#### Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

**Warning! The CoC Application score could be affected if information is incomplete on this formlet.**

### 4A-1. Healthcare—Enrollment/Effective Utilization

**Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and 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	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

### 4A-1a. Mainstream Benefits.

**Applicants must:**

1. describe how the CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;
2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;
3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in

health insurance;  
4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and  
5. 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)

CoC promote access to employment opportunities w/pvt employers and orgs along with public wkf. Through partnershipsC directly accesses employers and coordinates hiring events/job fairs and staffing partnerships monthly. Several employment orgs participate regularly with IN including Goodwill, training opportunities with vendors U-HAUL etc. The CoC cosponsored the pop-up business entrepreneurial opportunities for clients particularly CoC shelter jobs hiring event in May 2019 which connects clients with both deep discount housing and labor opportunity jobs. ongoing placement opportunities with multiple pvt employers and leverages work supports such a

#### 4A-2. Lowering Barriers to Entry Data:

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 has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	12
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	12
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

#### 4A-3. Street Outreach.

Applicants must:

1. describe the CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;  
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. PATH is the primary outreach along with RHY-funded youth outreach and outreach by the Coordinated Entry Team. Teams have regular daily/weekly outreach efforts scheduled. Relationships have been fostered with community partners. An interdisciplinary approach is used to engage the vulnerable using medical benefits, dental care, street medicine through the MSU Dept of Medicine & students; Community policing officers work closely with outreach.

Agencies hold outreach meetings to review referrals made to the prioritization list &/or participate in the Inter-Disciplinary Team (IDT) meetings to discuss high utilizer areas & places for encampments. Agencies & partners use smartphone APP to share locations and get resources where needed all over the region. Agencies participate with CoC planning & coordinating community crisis responses.

2. Outreach Teams uses a community relational approach to cover the entire CoC area educating area leaders, law enforcement, schools, 24-hour businesses, faith based groups, community centers, & others. The teams work to engage 24/7 to build trust with different areas & are reliable when offering resources. This creates a geographical grid to support a large area. PIT & Homeless Awareness Week educate the public & build recognition.

3. Street outreach is daily for PATH Outreach program & weekly and call out for Youth Outreach Team, CEA Outreach Team is weekly. The Outreach Teams will go out 24/7 for a call out. They are connected with law enforcement via a smart phone app to get reach all over county & get emergency resources-food, cloths, & street medicine.

4. Unique teams target different groups, youth-specific or people with SMI &/or substance use. Areas that have high risk/known hangouts are targeted using a relational approach & always working to build trust. Besides interdisciplinary approach, Critical Timing Intervention is used to assist people at their most critical time to motive them to receive help.

#### **4A-4. RRH Beds as Reported in 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 2018 and 2019.**

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	145	161	16

#### **4A-5. Rehabilitation/Construction Costs–New Projects.** No

**Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.**

#### **4A-6. Projects Serving Homeless under Other Federal Statutes.** No

**Applicants must indicate whether the CoC is 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.**

## 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
FY 2019 CoC Competition Report (HDX Report)	Yes	FY 2019 CoC Compe...	09/17/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No	PHA Moving On Mul...	09/27/2019
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Administrativ...	09/27/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	CE Assessment Tool	09/27/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	Projects Accepted...	09/27/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	Project Rejected/...	09/27/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	Local Competition...	09/27/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	Local Competition...	09/27/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes		
3A. Written Agreement with Local Education or Training Organization.	No		
3A. Written Agreement with State or Local Workforce Development Board.	No		
3B-3. Summary of Racial Disparity Assessment.	Yes	Racial Disparity ...	09/27/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No		
Other	No		

Other	No		
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## **Attachment Details**

**Document Description:** FY 2019 CoC Competition Report

## **Attachment Details**

**Document Description:** PHA Moving On Multifamily Preference

## **Attachment Details**

**Document Description:** PHA Administrative Plan Preference

## **Attachment Details**

**Document Description:** CE Assessment Tool

## **Attachment Details**

**Document Description:** Projects Accepted Notification

## **Attachment Details**

**Document Description:** Project Rejected/Reduced Notification

## **Attachment Details**

**Document Description:** Local Competition Deadline

## **Attachment Details**

**Document Description:** Local Competition Public Announcement

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** Racial Disparity Assessment Summary

## **Attachment Details**

**Document Description:**

## **Attachment Details**

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**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

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

Page	Last Updated
1A. Identification	09/13/2019
1B. Engagement	Please Complete
1C. Coordination	09/27/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/27/2019
1F. DV Bonus	09/27/2019
2A. HMIS Implementation	09/26/2019
2B. PIT Count	09/27/2019
3A. System Performance	09/27/2019
3B. Performance and Strategic Planning	09/27/2019
4A. Mainstream Benefits and Additional Policies	09/27/2019
4B. Attachments	Please Complete

FY2019 CoC Application	Page 59	09/27/2019
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**Submission Summary**

No Input Required

**Notes:**

By selecting "other" you must identify what "other" is.



## 2019 HDX Competition Report

### PIT Count Data for MI-508 - Lansing, East Lansing/Ingham County CoC

#### Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	471	435	419	476
Emergency Shelter Total	296	350	340	412
Safe Haven Total	0	0	6	6
Transitional Housing Total	59	40	34	48
Total Sheltered Count	355	390	380	466
Total Unsheltered Count	116	45	39	10

#### Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	44	45	43	40
Sheltered Count of Chronically Homeless Persons	34	31	38	37
Unsheltered Count of Chronically Homeless Persons	10	14	5	3

## 2019 HDX Competition Report

### PIT Count Data for MI-508 - Lansing, East Lansing/Ingham County CoC

#### Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	49	42	37	54
Sheltered Count of Homeless Households with Children	36	40	37	54
Unsheltered Count of Homeless Households with Children	13	2	0	0

#### Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	78	54	27	30	26
Sheltered Count of Homeless Veterans	72	43	25	28	25
Unsheltered Count of Homeless Veterans	6	11	2	2	1

## 2019 HDX Competition Report

### HIC Data for MI-508 - Lansing, East Lansing/Ingham County CoC

#### HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	473	30	443	100.00%
Safe Haven (SH) Beds	9	0	9	100.00%
Transitional Housing (TH) Beds	62	0	62	100.00%
Rapid Re-Housing (RRH) Beds	161	0	161	100.00%
Permanent Supportive Housing (PSH) Beds	481	0	267	55.51%
Other Permanent Housing (OPH) Beds	70	0	70	100.00%
Total Beds	1,256	30	1012	82.54%

## 2019 HDX Competition Report

### HIC Data for MI-508 - Lansing, East Lansing/Ingham County CoC

#### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	122	183	183	133

#### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC	49	30	37	37

#### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC	205	130	145	161

# 2019 HDX Competition Report

## FY2018 - Performance Measurement Module (Sys PM)

### Summary Report for MI-508 - Lansing, East Lansing/Ingham County CoC

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

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	2680	2482	42	45	3	22	28	6
1.2 Persons in ES, SH, and TH	2824	2604	48	52	4	25	31	6

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.

## 2019 HDX Competition Report

### FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2708	2533	192	131	-61	46	51	5
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2857	2657	196	139	-57	50	56	6

# 2019 HDX Competition Report

## FY2018 - 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 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	34	3	9%	3	9%	0	0%	6	18%
Exit was from ES	557	58	10%	67	12%	52	9%	177	32%
Exit was from TH	93	8	9%	6	6%	3	3%	17	18%
Exit was from SH	0	0		0		0		0	
Exit was from PH	393	31	8%	34	9%	39	10%	104	26%
TOTAL Returns to Homelessness	1077	100	9%	110	10%	94	9%	304	28%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

## 2019 HDX Competition Report

### FY2018 - 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 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	435	419	-16
Emergency Shelter Total	350	340	-10
Safe Haven Total	0	6	6
Transitional Housing Total	40	34	-6
Total Sheltered Count	390	380	-10
Unsheltered Count	45	39	-6

### Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	2854	2648	-206
Emergency Shelter Total	2686	2498	-188
Safe Haven Total	0	29	29
Transitional Housing Total	216	190	-26



## 2019 HDX Competition Report

### FY2018 - 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 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	158	173	15
Number of adults with increased earned income	8	19	11
Percentage of adults who increased earned income	5%	11%	6%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	158	173	15
Number of adults with increased non-employment cash income	45	61	16
Percentage of adults who increased non-employment cash income	28%	35%	7%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	158	173	15
Number of adults with increased total income	50	67	17
Percentage of adults who increased total income	32%	39%	7%

## 2019 HDX Competition Report

### FY2018 - Performance Measurement Module (Sys PM)

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	113	239	126
Number of adults who exited with increased earned income	31	19	-12
Percentage of adults who increased earned income	27%	8%	-19%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	113	239	126
Number of adults who exited with increased non-employment cash income	21	43	22
Percentage of adults who increased non-employment cash income	19%	18%	-1%

#### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	113	239	126
Number of adults who exited with increased total income	46	60	14
Percentage of adults who increased total income	41%	25%	-16%

## 2019 HDX Competition Report

### FY2018 - 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 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2682	2578	-104
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.	772	832	60
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)	1910	1746	-164

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2921	2746	-175
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.	884	929	45
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.)	2037	1817	-220

## 2019 HDX Competition Report

### FY2018 - 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 FY2018 (Oct 1, 2017 - Sept 30, 2018) 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 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	348	300	-48
Of persons above, those who exited to temporary & some institutional destinations	53	69	16
Of the persons above, those who exited to permanent housing destinations	67	72	5
% Successful exits	34%	47%	13%

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

## 2019 HDX Competition Report

### FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2729	2335	-394
Of the persons above, those who exited to permanent housing destinations	997	825	-172
% Successful exits	37%	35%	-2%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	453	427	-26
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	435	410	-25
% Successful exits/retention	96%	96%	0%

## 2019 HDX Competition Report

### **FY2018 - SysPM Data Quality**

#### **MI-508 - Lansing, East Lansing/Ingham County 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.

## 2019 HDX Competition Report

### FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	310	274	253	301	69	75	55	58	1161	1771	2014	619	214	205	130	145				
2. Number of HMIS Beds	234	198	253	301	69	63	55	58	302	271	370	400	214	205	130	145				
3. HMIS Participation Rate from HIC ( % )	75.48	72.26	100.00	100.00	100.00	84.00	100.00	100.00	26.01	15.30	18.37	64.62	100.00	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	2753	2721	2686	2532	186	173	153	113	397	386	481	453	931	689	579	625	9	61	62	113
5. Total Leavers (HMIS)	2517	2503	2444	2251	150	127	134	84	92	112	56	122	747	552	501	503	6	56	61	98
6. Destination of Don't Know, Refused, or Missing (HMIS)	653	795	655	666	14	6	12	2	12	12	10	5	7	3	0	25	1	9	2	9
7. Destination Error Rate (%)	25.94	31.76	26.80	29.59	9.33	4.72	8.96	2.38	13.04	10.71	17.86	4.10	0.94	0.54	0.00	4.97	16.67	16.07	3.28	9.18

## 2019 HDX Competition Report

### Submission and Count Dates for MI-508 - Lansing, East Lansing/Ingham County CoC

#### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/30/2019	

#### Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/30/2019	Yes
2019 HIC Count Submittal Date	4/30/2019	Yes
2018 System PM Submittal Date	5/31/2019	Yes





# Admissions and Continued Occupancy Policy for the Public Housing Program

A 3D architectural rendering of a building corner, showing dark grey and light grey geometric blocks. The year "2014" is displayed in white text on the right-hand block.

2014

## Special Category Preferences

Preferences are given to the following, as households are processed from the current Public Housing Waiting List: for every 4 households approved to move into a Public Housing unit one household from each of the 3 categories below will be processed to determine eligibility and suitability.

- ✓ Households participating in the Permanent Supportive Housing I and II program (PSH I & II),
- ✓ individuals aging out of Foster Care, at the time of application, with supportive services,
- ✓ VASH Voucher Holders recommended by the Veteran's Administration who have successfully completed the VASH program as determined by the Veterans Administration.

In addition, for every 10 new Public Housing "move ins" - 1 Chronically Homeless household applicant (as determined by HARA) will be processed to determine eligibility and suitability for tenancy in public housing.

**\*Note:** Each household must pass the suitability and eligibility standards as identified in the LHC Admissions and Continued Occupancy Plan ("ACOP"). Households described above who successfully meet LHC's eligibility and suitability for tenancy requirements will be offered a lease by LHC.

## Income Targeting Requirement [24 CFR 960.202(b)]

LHC will monitor its admissions to ensure that at least 40% of Families admitted to public housing in each fiscal year have incomes that do not exceed 30% of area median income.

Families whose incomes do not exceed 30% of area median income will be referred to as "extremely low-income families" in this ACOP.

Once LHC has met the 40% targeted income requirement for new admissions of extremely low-income families, LHC will fill the remainder of its new admission units with families whose incomes do not exceed 80% of the HUD approved area median income.

## Procedure to be Used when there are Insufficient Applicants on the Waiting List

## Mixed Population Developments [24 CFR 960.407]

A mixed population development is a public housing development or portion of a

MI-508 Lansing/East Lansing/Ingham County CoC

FY19 HUD CoC Local Competition

No project applications were rejected or reduced.

**Racial Disparities Review**  
**Strategic Planning Committee Report to**  
**Capital Region Housing Collaborative CoC Board, MI-508**

9/24/19

At the request of the CoC Strategic Planning Committee, the HMIS Administrator/Lead provided an analysis of the Racial and Ethnic composition of those receiving CoC services in Ingham County, as recorded in HMIS, and compared the result to both Ingham County and City of Lansing population data to ascertain if racial disparities exist in the provision or outcome of homeless assistance. A copy of the analysis follows this memo. This is the second year for this assessment.

The primary finding is that there are racial disparities in the provision and outcome of homeless assistance in our CoC. Those differences are seen as a much higher percentage of people of color being served by our CoC system than is reflected in the general population. Consider the following:

- HMIS data shows 49% of those served identified as black or African American, while they represent just 11% of the County and 22% of the City of Lansing populations. (Based on a nine year average, +38% and +27% respectively.) This is, in fact, a significant over-representation that needs a systemic approach, especially by anti-poverty and prevention programs.
- HMIS data shows 8.4% (7.6% is nine-year average) of those served identified as Hispanic or Latino in 2018, while they represent 7.5% of the County and 12.5% of the City of Lansing populations. This deserves further examination by our CoC but does not show they are under-served nor overrepresented in the homeless population served.
- The Housing outcomes data showed a higher percent of positive exits from programs for black or African Americans in 2018 when compared to whites. (42% vs 35%) Positive exits increased by 6% for African American households in the past year, with the Adult/Child Households having the highest rates in this category at 55%. Child only households have the highest positive housing rates overall with Hispanic/Latino at 100%. (Note: This is a very small sample size.)

The Strategic Planning Committee presented this information to the CoC Board who confirmed the assessment and findings. Board members discussed the possible causes of the over-representation of black/African Americans in the homeless system, and the high number of those served from other counties (19%), as this means less resources for local residents. Our place as a “hub” community causes many people to come here to use our shelter systems, both ES and TH, and some relocate here.

The Board requested the Strategic Planning Committee create further CoC strategic goals related to resolving racial disparities. The Strategic Planning Committee has discussed possible causes for the disparities such as higher poverty rates for black/African Americans vs whites (32% vs 17% in County, 34% vs 22% in City of Lansing), job discrimination, reduced educational opportunities, etc.

Possible solutions might be to increase prevention programming to target populations, improve shelter diversion strategies, become involved in local racial equity initiatives, educate agency staff on cultural responsiveness, diversify our providers, and engage in major anti-poverty initiatives.

## Racial Disparities in Homelessness in Ingham County

### Racial and Ethnic Composition of Ingham County – 2010 to 2017

– Data from American Community Survey 5-year Estimates

Federal data from 2010 to 2017 shows that most people in Ingham County identify as white, 76% on average and 75% most recently (2017). On average, 11% of people identified as black or African American. The percent of people identifying as black or African American has remained in a close range over the past 8 years, between 11.0% - 11.2% while the percent of people identifying as white has slowly declined, dropping from 77.3% in 2010 to 75.0% in 2017. Two racial groups have increased since 2010, Asian and people identifying as two or more races (multi-racial).

Data on ethnicity is only available about people identifying as Hispanic or Latino. The percent of the Ingham County population that identifies as Hispanic or Latino was 7.6% in 2017. This population has shown a modest increase from 7.0% in 2010.

<b>Ingham County</b>									
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>Avg.</b>
One race	96.0%	95.5%	95.3%	95.0%	94.8%	94.6%	94.4%	94.3%	95.0%
Two or more races	4.0%	4.5%	4.7%	5.0%	5.2%	5.4%	5.6%	5.7%	5.0%
White	77.3%	76.9%	76.6%	76.5%	76.0%	75.5%	75.2%	75.0%	76.1%
Black or African American	11.2%	11.1%	11.1%	11.0%	11.1%	11.2%	11.2%	11.1%	11.1%
American Indian and Alaska Native	0.4%	0.3%	0.4%	0.4%	0.4%	0.4%	0.4%	0.3%	0.4%
Asian	5.0%	5.1%	5.2%	5.3%	5.4%	5.7%	5.8%	6.0%	5.5%
Native Hawaiian and Other Pacific Islander	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Some other race	2.1%	2.0%	1.9%	1.8%	1.8%	1.8%	1.7%	1.7%	1.9%
Two or more races	4.0%	4.5%	4.7%	5.0%	5.2%	5.4%	5.6%	5.0%	5.0%
*White and Black or African American	1.5%	1.8%	1.8%	2.1%	2.2%	2.2%	2.4%	2.1%	2.1%
*One sub-set of people identifying as two or more races									
Hispanic or Latino (of any race)	7.0%	7.2%	7.3%	7.4%	7.5%	7.5%	7.5%	7.6%	7.4%
Not Hispanic or Latino	93.0%	92.8%	92.7%	92.6%	92.5%	92.5%	92.5%	92.4%	92.6%

## Racial Disparities in Homelessness in Ingham County

### Racial and Ethnic Composition of the City of Lansing – 2010 to 2017

– Data from American Community Survey 5-year Estimates

Federal data from 2010 to 2017 shows that the City of Lansing is more diverse than the whole of Ingham County, but, similarly, people identifying as white make up the majority of the population. People identifying as white in the most recent estimates represent 61% of the population while people identifying as black or African American represent 22%. Another similarity to the County data is the increasing portion of people identifying as multi-racial since 2010.

However, unlike the whole of Ingham County where the population of people identifying as Hispanic or Latino has been growing slowly, it has decreased slightly in Lansing. The percentage has decreased by less than a full percentage point from 12.8% in 2010 to 12.2% in 2017.

<b>City of Lansing</b>									
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>Avg.</b>
One race	93.6%	92.7%	92.5%	92.0%	91.7%	91.3%	90.5%	90.7%	91.9%
Two or more races	6.4%	7.3%	7.5%	8.0%	8.3%	8.7%	9.5%	9.3%	8.1%
White	63.2%	61.9%	61.8%	62.0%	61.7%	61.5%	61.2%	61.3%	61.8%
Black or African American	22.2%	22.7%	22.5%	22.2%	21.8%	21.8%	21.7%	22.0%	22.1%
American Indian and Alaska Native	0.6%	0.5%	0.6%	0.6%	0.6%	0.5%	0.5%	0.5%	0.5%
Asian	3.7%	4.0%	4.2%	4.0%	4.1%	4.1%	3.9%	3.7%	4.0%
Native Hawaiian and Other Pacific Islander	0.1%	0.1%	0.1%	0.0%	0.1%	0.0%	0.1%	0.1%	0.1%
Some other race	3.8%	3.6%	3.4%	3.2%	3.4%	3.3%	3.1%	3.1%	3.4%
Two or more races	6.4%	7.3%	7.5%	8.0%	8.3%	8.7%	9.5%	9.3%	8.1%
*White and Black or African American	2.6%	3.1%	3.0%	3.7%	3.7%	3.9%	4.6%	4.7%	3.7%
*One sub-set of people identifying as two or more races									
Hispanic or Latino (of any race)	12.8%	12.7%	12.6%	12.5%	12.6%	12.3%	12.0%	12.2%	12.5%
Not Hispanic or Latino	87.2%	87.3%	87.4%	87.5%	87.4%	87.7%	88.0%	87.8%	87.5%

# **Racial and Ethnic Composition of People At-Risk of or Experiencing Homelessness per HUD’s definition in the Lansing/East Lansing/Ingham County Continuum of Care**

– Data from Ingham County homeless assistance providers using the ServicePoint Homeless Management Information System – Annual Homelessness Assessment Report (AHAR) for Congress and local annual reports

There are caveats in examining the race and ethnicity information of people experiencing homelessness. The HMIS data included in the analysis is representative of adults only as opposed to all persons, as it is with the census figures. Additionally, the HMIS data includes adults seeking and or receiving homeless assistance services from an HMIS-participating agency in Ingham County. However, not all people seeking assistance from an organization in Ingham County are residents of the county. Over the past five years, 2013 through 2018, 19% of adults seeking assistance in Ingham County reported the zip code of their last primary residence as outside of Ingham County. It is possible to limit the scope of the analysis of the HMIS data to only self-reported Ingham County residents to be more comparable to the ACS data, if it is necessary to do so. Both data sources rely on self-reported information to compile racial and ethnic characteristics of people.

**Adults who identify as black or African American are overrepresented in the population of people who have been at-risk of or experienced homelessness in Ingham County.** Based on calendar year annual homeless demographic information from 2010 through 2018, 49% of people identified as black or African American and 47% as white. This is in stark contrast to the census demographics of Ingham County and the City of Lansing where black or African Americans make up just 11% and 22% of the population, respectively. The remaining 4% of people at-risk of or experiencing homelessness is distributed among the other racial groups with no one group making up more than 2% of the total.

<b>Adults At-Risk Of or Experiencing Homelessness</b>										
	2010	2011	2012	2013	2014	2015	2016	2017	2018*	Avg.
American Indian or Alaska Native	2.0%	1.8%	1.8%	1.9%	1.6%	1.5%	1.3%	1.1%	1.0%	1.5%
Asian	0.6%	0.7%	0.3%	0.3%	0.4%	0.6%	0.5%	0.4%	0.3%	0.4%
Black or African American	47.7%	47.2%	48.1%	49.6%	48.9%	50.6%	49.2%	48.5%	49.2%	48.9%
Multi-Racial	1.1%	0.3%	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.2%
Other	3.3%	2.1%	0.8%	0.4%	0.2%	0.0%	0.0%	0.1%	0.0%	0.7%
Native Hawaiian and Other Pacific Islander	0.2%	0.2%	0.3%	0.3%	0.2%	0.4%	0.5%	0.7%	0.4%	0.4%
Unknown (Missing Data)	0.6%	0.8%	2.3%	0.3%	0.2%	0.3%	0.6%	0.2%	0.1%	0.6%
White	44.6%	46.9%	46.3%	47.0%	48.3%	46.6%	48.0%	49.0%	48.8%	47.4%
Hispanic or Latino	7.3%	6.5%	8.0%	N/A	N/A	7.5%	7.4%	8.0%	8.4%	7.6%
Missing Data	2.4%	2.6%	1.1%	N/A	N/A	0.0%	0.0%	0.0%	0.0%	0.7%
None Specified	15.7%	7.0%	2.3%	N/A	N/A	0.0%	0.0%	0.0%	0.0%	3.0%
Non-Hispanic	74.6%	84.0%	88.6%	N/A	N/A	92.5%	92.6%	92.0%	91.6%	88.7%

\*Note 2018 data set is only inclusive of people who were category 1 literally homeless

## Racial Disparities in Homelessness in Ingham County

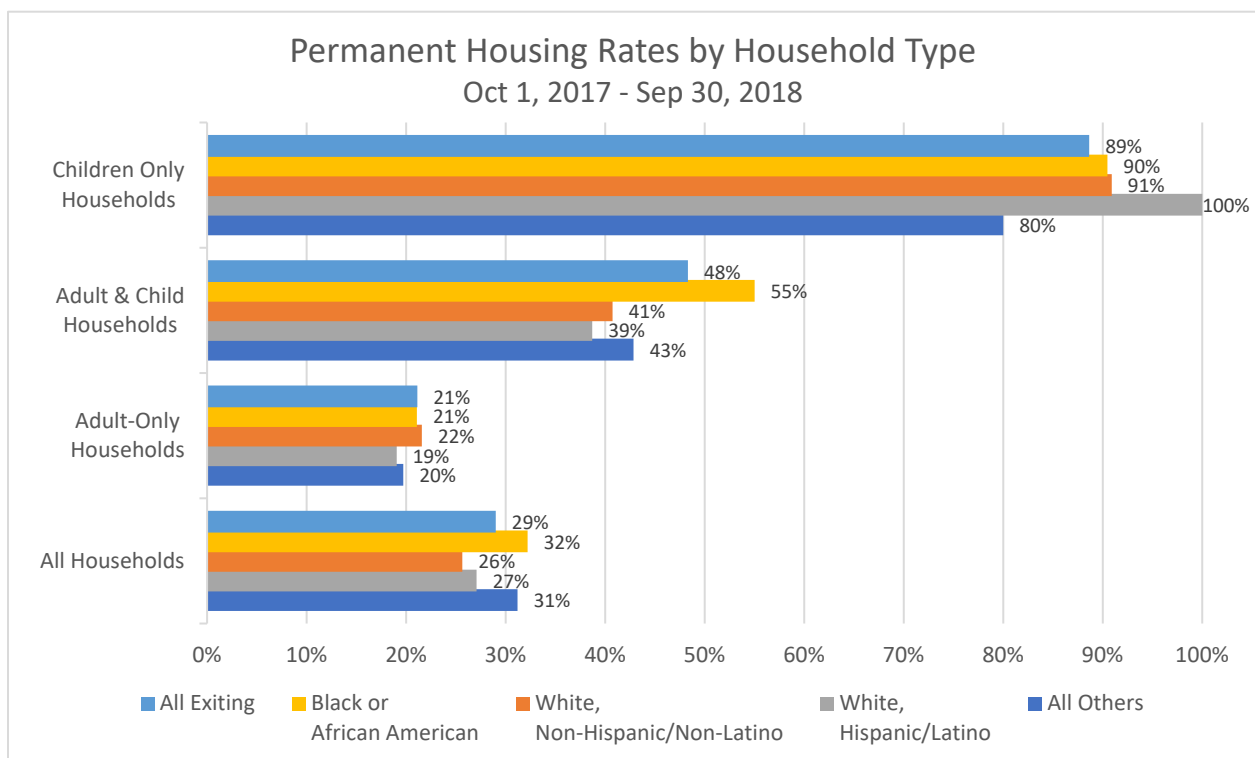
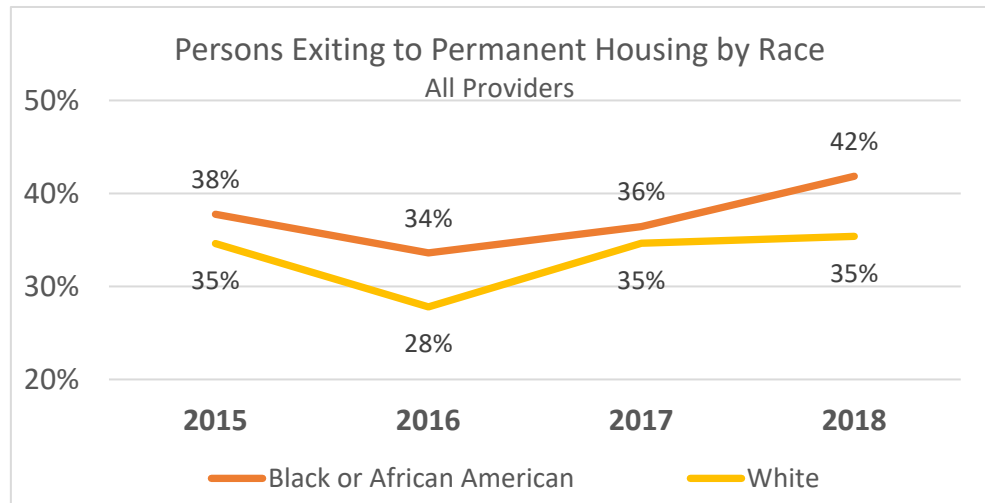
**The data does not suggest that people identifying as Hispanic or Latino are disproportionately at-risk of or experiencing homelessness compared to the county population.** People who identify as Hispanic or Latino represent 7.6% of the people who have been at-risk of or experienced homelessness, which is less than the 12.5% in the city of Lansing and comparable to the 7.4% in all of Ingham County. There is a gap in the dataset for 2013 and 2014 when ethnicity information was not a part of the annual demographics report.

### Housing Outcomes

Outcome data from homeless assistance programs shows that people who identify as black or African American are more often leaving programs to permanent housing.

**While black or African American households are**

**disproportionately affected by homelessness, the evidence does not suggest they are less likely to achieve positive outcomes through the homeless assistance system.** In fact, they have a slightly higher housing rate than the system-wide average with 32% compared to 29% for all households. Furthermore, families with a black or African American head of household had the highest rate of permanent housing exits, 55%, compared to 48% for all families, system-wide.





## Racial Disparities in Homelessness in Ingham County

Data does not suggest a disparity in the length of time people of different racial groups spend in the homeless system. **Overall, households spend 64 days in the homeless system on average. The average for households with a black or African American head of households is slightly less, at 62 days.**

However, when considering only families with children, black or African American households spend an average of 3 days longer homeless than the average for all families, 49 days versus 46 days. In light of the better than average permanent housing rate and the fact that black or African Americans represent 57% of adults enrolled in Rapid Re-housing Programs, this is not thought to be a meaningful disparity in system outcomes.