Before Starting the CoC Application

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

 The Collaborative Applicant is responsible for:

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

 2. Ensuring all questions are answered completely.

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

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

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

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

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

For CoC Application Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: ME-500 - Maine Balance of State CoC

1A-2. Collaborative Applicant Name: Maine State Housing Authority

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Maine State Housing Authority

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

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

Veteran Service providers	Yes	Yes
State Government Agencies	Yes	Yes
HOPWA Agency	Yes	Yes

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.
(limit 1000 characters)

All MCOC meetings are open to the public. MCOC has an open membership & members are eligible to vote as described in the MCOC governance (posted on MCoC's website, www.mainehomelessplanning.org) Monthly meeting notices are also posted on the website which is publicly accessible & subscribed to by over 1000 providers, advocates & individuals statewide. MCOC solicits & considers opinions & involvement of Statewide & Regional Homeless Councils, HOPWA & ESG subrecipients, housing developers & others as needed. Remote connectivity through ITV options is available at up to 7 locations statewide for people who cannot attend in person & there is a call-in number to encourage participation via phone.

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

Increasing membership & participation is an ongoing process for MCOC & Recruitment is a task assigned to our Resource Committee, though all members are encouraged to invite others to participate. Special Outreach efforts are made whenever MCOC launches a new initiative, such as Coordinated Entry, or hosts a special event, such as our recent visit from HUD Field Office Representatives. All MCOC meetings are open to the public & monthly meeting notices are posted on MCOC's website, www.mainehomelessplanning.org, which is publicly accessible & subscribed to by over 1000 providers, advocates & individuals statewide. MCOC reports out monthly at the Statewide & Regional Homeless Council meetings, as well as meetings of other local provider groups where invitations to participate are regularly extended. MCOC meetings are connected through teleconferencing sites accessible at MaineHousing & up to 6 Public Library locations across the state.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.
(limit 1000 characters)

MCOC welcomes proposals from applicants who have not previously received funding. The NOFA Announcement & invitation to apply for funding was publicly posted on the MCOC website on 7/18/17 w/ more info including scoring criteria & available new funds posted 8/4/17. Application opportunities, processes & deadlines are shared at Regional & Statewide Homeless Council meetings, Shelter Directors & other meetings of homeless-serving providers. All new projects are considered & scored using a scoring tool designed specifically for new projects; this tool is posted on the MCOC website to ensure the scoring/ranking criteria is broadly known. Scoring criteria include the extent to which they meet HUD/MCOC priorities, program type, experience, capacity, target population & administration. New Projects are included in the project listing & ranked according to their score. All new project applicants are given their scoring results in writing; ranking results are also posted on the CoC's website.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Housing and Service programs funded through the VA	Yes
Housing and service programs funded though VAWA	Yes

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

MCOC & ESG subrecipients are actively engaged in the planning & allocation of ESG Funds & consult with each other regularly. MaineHousing (MH) & City of Portland (CoP) are the only ESG recipients of the 7 Con Plan jurisdictions in

MCOC. MH & CoP regularly participate in MCOC meetings. MCOC, MH & CoP collaborate in crafting responses for the Con Plans & Annual Con Plan Updates to ensure MCOC strategic plan goals are included. MCOC provides input in the development phase of the plans & makes recommendations for the allocation of funds. MCOC reviews & comments on the Plans during the Public Comment period to provide additional feedback & input to the final Plans. Annually MH compiles PIT & HIC reports & distributes them to stakeholders across Maine. MCOC has made available & highly publicized annual PIT & HIC data. MCOC ensures that all Con Plan jurisdictions have access to the reports for their Con Plan & Plan updates & will provide any additional information or TA they need.

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

The Maine Coalition to End Domestic Violence, a statewide network of DV providers, works w/ MCOC & our CA to ensure persons & families fleeing DV have access to housing & services unique to their needs that prioritize safety & confidentiality of participants including development of Emergency Transfer Plans & protocols for DV referrals in our Coordinated Entry process. The 2017 MCOC HIC lists 186 ES bds, 166 TH bds, & 50 PH bds dedicated to DV households, & many DV households qualify for rental assistance programs. This ensures availability of supportive housing & services. The Maine Plan to End & Prevent Homelessness includes DV as a sub-population w/ specific strategies for engagement & ongoing support for stability in housing unique to the needs of the population. The Maine Homeless Rule, which establishes eligibility for ESG funding, includes provisions for maintaining confidentiality of all DV client data & PII, & prohibits involuntary family separation including in DV programs.

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

Members of Maine's DV Coalition participate in MCOC, provide info & trainings on DV to non-DV providers & are involved in Maine's Coordinated Entry system (CE) to ensure safety & planning protocols are in place. Maine's CE assessment begins w/ asking if the person would prefer to talk to a DV provider & DV referrals are a priority. Strict confidentiality is maintained regarding all PII. MCOC collects & utilizes available DV data from PIT, HIC, Annual Reports & aggregate data from comparable databases as part of a needs & gaps analysis process. Revisions to Maine's Plan to End & Prevent Homelessness specifically address DV populations & services including strategies for engagement & support. All ESG funded Shelters including DV employ Navigators w/ access to

housing vouchers & the ability to provide support for stability in housing. Maine has developed Emergency Transfer Plan templates that are being shared w/ all CoC & non-CoC housing programs on our HIC & w/ Landlords in RA programs.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.
Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Maine State Housing Authority	62.72%	Yes-Both
Portland Housing Authority	25.50%	Yes-Both
Lewiston Housing Authority	2.00%	Yes-Public Housing
Bangor Housing Authority	4.00%	No
Westbrook Housing Authority	1.00%	Yes-HCV

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

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy.
(limit 1000 characters)

MCOC encourages HAs w/out such policies to establish homeless admission preferences via written communication, meetings w/ HA leadership, invitations to join CoC meetings, seeking membership on HA boards & networking at community stakeholder events. The above list includes only the 5 largest of the 24 PHA's in the MCOC coverage area (all of Maine). While the Bangor HA does not have a Homeless Admission Preference, MCoC & area shelters have strong relationships w/ the HA to serve homeless households. Bangor HA's service area has a large saturation of PBS8 provided by MaineHousing, which has historically been why it has not included specific preferences in its Admin Plan. A long-standing MCoC member recently joined the Bangor HA Board & will work to include a Homeless Preference Policy in its Admin Plan. MCOC regularly invites all HAs to participate in MCOC meetings & initiatives such as inviting them to join us when our local HUD Field Office representatives visited MCOC this spring.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of

Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effecctively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Idenity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy.
(limit 1000 characters)

MCOC supported a Preble Street/New Beginnings application for housing & services for LGBT youth. Maine is part of the LGBTQ Homeless Youth Transitional Services Demonstration Project to create a continuum of transitional services to support clients from crisis to stability in housing. MCOC implementation & monitoring of anti-discrimination policies ensures the needs of LGBTQ individuals & their families experiencing homelessness are met through equal access to ESG & CoC funded programs, Housing Navigation & Stabilization services & ES, SH, TH, & PH. ESHAP trainings include Fair Housing & Non-Discrimination regs & Maine's Homeless Rule, governing funding of shelters & related services, requires shelters to post non-discrimination policies & inform clients of these policies. MCOC distributed information about & encouraged participation in HUD's Equal Access & Gender Identity Rule training in Nov. 2016 & posted links to this & similar webinars on the MHP site.

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

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders	X
Implemented communitywide plans:	X
No strategies have been implemented	
Other:(limit 50 characters)	
Work w/ volunteer lawyers' projects & judiciary	X
HomelessVoicesForJustice train PoliceAcademyCadets	X
ME developing a Homeless Bill of Rights	X

When "No Strategies have been implemented" is selected no other checkbox may be selected.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

N/A (all boxes checked)

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

Foster Care:	X
Health Care:	X

Mental Health Care:	X
Correctional Facilities:	X
None:	

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

Instructions

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

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

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

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

1E-2. Severity of Needs and Vulnerabilities
CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)
(limit 1000 characters)

MCOC scoring/ranking/selection process & tools prioritize projects that serve homeless individuals & families w/ the most severe needs & vulnerabilities. MCOC revised its scoring/ranking/selection policies & procedures to prioritize severity of needs & vulnerability of participants by factoring CH, Longest Histories of Homelessness, DV/Abuse/victimization/trafficking, Childhood Abuse, low or no income, criminal history, unaccompanied youth, Veterans, Mental Illness, Substance Abuse, & disabilities. Project scoring (new & renewal) considers, the degree to which projects have implemented a Housing First approach, prioritize CH, & serve high need/vulnerable populations (described above) to provide additional points for projects that reduce barriers to project entry & serve populations w/ severe needs & vulnerabilities. The ranking/selection processes are directly related to these scoring metrics. MCoC has included HUD's notice CPD-14-012 for prioritizing CH in our Written

Standards.

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

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

Public Posting	
CoC or other Website	X
Email	X
Mail	
Advertising in Local Newspaper(s)	
Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	

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

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

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

Reallocation: Option 1

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

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps.   09/13/2017

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

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps.   09/13/2017

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

Reallocation Supporting Documentation

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

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	Maine 2017 COC NO...	09/25/2017

Attachment Details

Document Description: Maine 2017 COC NOFA Summary posted 8-4-17

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

Yes

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

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

MOU: CoC pg 3, HMIS Lead pg 4-5

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual.

Yes

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

Mediware

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

Single CoC

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

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	1,217	186	881	85.45%
Safe Haven (SH) beds	15	0	15	100.00%
Transitional Housing (TH) beds	1,225	166	1,011	95.47%
Rapid Re-Housing (RRH) beds	369	0	369	100.00%
Permanent Supportive Housing (PSH) beds	2,500	26	2,441	98.67%
Other Permanent Housing (OPH) beds	24	24	0	0.00%

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

The only category for which MCOC's HMIS Bed Coverage Rate appears to be below 85% in table 2A-5 is for Project Type "Other Permanent Housing". The answer should be "N/A (Not Applicable)", rather than "0.00%", but esnaps does not allow this. Detailed Instructions for the FY2017 CoC Application indicate that "beds funded by victim service providers must not be included in this calculation." & the 2017 HDX Competition Report correctly shows the HMIS Bed Coverage Rate for these beds as "NA". All 24 beds categorized as Other Permanent Housing on the 2017 MCOC HIC are in projects dedicated to serving victims of Domestic Violence & are therefore prohibited from participating in HMIS. MCOC should receive full credit for this project type because there are no eligible beds that are not participating. If any non-DV providers are added to our HIC in the OPH project type category, we will work with them to ensure they have the access, training, & support needed to fully participate in HMIS.

2A-6. Annual Housing Assessment Report (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR? 12

2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/28/2017

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

Instructions:

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

2B-1. Indicate the date of the CoC's 2017 PIT   01/24/2017
count (mm/dd/yyyy). If the PIT count was
conducted outside the last 10 days of
January 2017, HUD will verify the CoC
received a HUD-approved exception.

2B-2. Enter the date the CoC submitted the   05/01/2017
PIT count data in HDX.
(mm/dd/yyyy)

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

Instructions:

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

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

There were no significant changes to the MCOC sheltered PIT count implementation, methodology, or data quality. However, it should be noted that the Portland Continuum of Care (ME-502) merged w/ the Maine Continuum of Care (ME-500) after the 2017 PIT & HIC data was collected but prior to submission of the data in the HDX. We worked closely w/ our local HUD Field Office & HUD TA providers to combine the PIT & HIC data from both ME-500 & ME-502 for the 2017 HDX submission. The historical HIC data in the HDX has also since been combined, but the historical PIT data has not, so PIT data in the HDX for 2016 & back reflects only ME-500, not the combined ME-500 & ME-502 data. The Maine & Portland Continuums had always shared one statewide HMIS implementation & always coordinated PIT & HIC planning, data collection, and reporting processes so again, despite the merger, there were no significant changes to the implementation, methodology, or data quality.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count?   No

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

Beds Added:	0
Beds Removed:	0
Total:	0

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count?   No

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

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017?
CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

Yes

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

The only changes to the MCOC Unsheltered PIT Count involved the addition of a set of questions specifically for homeless youth, & increased outreach efforts to find & interview unsheltered homeless youth, as detailed in the narrative for question 2C-5a. In 2016, MCOC reported a total of 2 unsheltered unaccompanied youth under 18 yrs old, 11 unsheltered unaccompanied youth between 18 & 24 yrs old, & 1 unsheltered parenting youth household of two parents between 18 & 24 with 1 child. In 2017, MCOC reported 12 unsheltered unaccompanied youth under 18 yrs old, 23 unsheltered unaccompanied youth 18 to 24 yrs old, & 4 unsheltered parenting youth households consisting of 2 parents under 18, 3 parents 18 to 24, & 4 children. While the weather may have been a factor for some of the increase in 2017, being relatively warm & dry compared to the 2016 count, we believe that the increased outreach efforts specifically targeting unsheltered youth allowed us to capture significantly more information.

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

Yes

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

Additional questions specifically for youth were added as an addendum to the standard MCOC PIT Outreach data collection form & distributed to outreach teams throughout the state. MCOC & Maine's Homeless Youth Provider Group engaged youth & non-youth providers, schools & colleges to recruit volunteers to assist with PIT Outreach efforts. Maine participated in the Chapin Hall Voices of Youth Study & conducted focus groups on engaging youth, identifying where homeless &/or at risk youth might be found & conducted a Youth specific PIT as part of that initiative. Youth participated in the Chapin Hall study & lessons learned from that effort were applied to the CoC level PIT, particularly in regard to the increased emphasis on counting homeless youth.

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

Other than the changes described above in regard to our Youth outreach efforts MCOC did not make any other changes to our PIT implementation, methodology or data quality specific to individuals & families experiencing Chronic Homelessness, Families w/ children, or Veterans experiencing homelessness. The PIT methodology we have had in place for the last 2 years, which we review annually, already incorporates processes & procedures designed to ensure a thorough & accurate count of these populations including: Data Sharing agreements among Shelters allows for better identification of CH individuals & Families; PATH workers experienced w/ CH individuals & families participate in PIT outreach; work w/ McKinney-Vento School Liaisons helps connect outreach teams w/ homeless families w/ children not at shelters; most of our County level 'PIT Crew' leaders are from local veteran service organizations familiar w/ homeless veterans & where they are most likely to be found on the night of the PIT.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

There were 706 fewer people who became homeless for the first time during FY2016 compared to FY2015 (2017 HDX Competition Report, table 5.1). When PH is added to this calculation the number becomes 744 fewer (table 5.2). Our Emergency shelter response system tracks reasons for requests for assistance & monitors the number of individuals who are first-time homeless. Our process to identify risk factors uses these data to plan & direct prevention/diversion resources/services outlined in Maine's Plan to End & Prevent Homelessness. Strategies to address individuals & families at risk of becoming homeless include: CDBG, ESG, SSVF, PATH Outreach/Prevention/Diversion efforts; Discharge Planning; Local & State Funded Rental Assistance; Community Legal Services; Eviction Prevention efforts. Maine's Statewide & Regional Homeless Councils, per Maine's Plan, are responsible for overseeing Maine's strategy to reduce the number of individuals & families experiencing homelessness for the first time.

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

Avg. LOT in ES & SH went up by 7 days from FY15 to FY16 & the Mdn. LOT increased by 5 days. W/ TH the avg. is 28 days & the median is still 5 days. Increase due to: big drop in LOT in prior yr; low vacancy; opioid crisis; subsidy freezes; immigration status issues. The primary action implemented by the CoC

to reduce the LOT individuals/families remain homeless is Maine's Long Term Stayer (LTS) Initiative. This prioritizes housing subsidies/services for CH/LTS. Other actions include RRH from shelters. HMIS data is used to identify the longest LOT homeless. LTS By-Name-Lists are used at local/regional levels to further identify/house CH/LTS. More strategies include: landlord outreach /engagement; Housing Navigator services; coordination of PATH w/ shelters & navigators; VI/SPDAT; Housing First; partner w/ MeDHHS for services/housing; partner w/ PHAs. Maine's Statewide & Regional Homeless Councils are responsible for overseeing Maine's strategy to reduce the LOT people remain homeless.

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

The % of exits from ES, SH, TH & PH-RRH to PH increased by 5% from FY15 to FY16 (39% to 44%). The % of exit/retention (those who stayed in PH or exited to another form of PH) remained at 93% in both FY15 & FY16. Strategies to increase successful PH placement & retention include: ESHAP program offers Incentive funding for this performance measure; all ESG funded shelters must have Housing Navigators on staff who focus on engaging clients from crisis to stabilization in & retention of the most appropriate housing resource. Navigators work w/ clients to develop Housing Stability Plans that emphasize client choice. Navigators connect clients w/ Community Agencies/ACT/PATH for ongoing supports for stability in housing. Maine's Plan to End & Prevent Homelessness includes the goal of PH appropriate to individual or family needs w/ an adequate support network. Maine's Statewide & Regional Homeless Councils are responsible for overseeing Maine's strategy for retention of, or placement in PH.

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

Numerical change is 24% over 2 years. Most returns are in the first six months. MCOC serves the most long term/vulnerable using Housing First approach which may impact returns as people work on vulnerability (mental health, substance use, financial instability). Other returns due to unrenewed leases when landlords decide to redevelop & increase to rents subsidies can't afford; staying w/housed people engaging in activities that break leases. Data sharing improved tracking returns across multiple shelters, increasing documented returns & reducing duplication. Before, shelters would only identify returns in

their own system. Strategies to identify returns: providers review HMIS data & identify returns. Strategies CoC will use to reduce returns: diversion; housing navigators; developing supportive landlord relationships; use private/local/state funds to assist w/back rent/utilities; ESG/CDBG/SSVF funded prevention; Coordinated Entry. Statewide Homeless Council oversees MCoC's efforts.

3A-5. Performance Measures: Job and Income Growth
Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)

Strategies implemented to increase access to employment & benefits: MCoC works w/ employment orgs to help individuals & families increase their cash income; works w/ CareerCenters & Voc Rehab (VR) that provide access to job listings, trainings & fairs; MCOC Resource Committee alerts providers to employment resources; Referrals to VR, DOL for work readiness/job training by employment specialists; Vocational Clubhouses statewide help w/ training, job retention, transportation; navigators help people w/ employment/income goals; work w/ Adult Ed, Goodwill Industries, & community colleges' job training programs; work w/ hospitals' Employment Specialists; PATH & navigators help consumers access/retain mainstream benefits: GA, Medicaid, TANF, SNAP, SSI/SSDI. PATH/SSVF providers are SOAR trained. CoC program-funded projects are assisted to implement the strategies via frequent trainings & annual monitoring/TA. The Statewide Homeless Council is responsible for overseeing these strategies.

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

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

N/A (no geographic areas were completely excluded)

3A-7. Enter the date the CoC submitted the 06/06/2017

**System Performance Measures data in HDX, which included the data quality section for FY 2016.
(mm/dd/yyyy)**

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

Instructions

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

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	298	328	30

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

Total number of beds dedicated as Dedicated Plus	76
Total number of beds dedicated to individuals and families experiencing chronic homelessness	164
Total	240

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

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

History of or Vulnerability to Victimization	X
Number of previous homeless episodes	X

Unsheltered homelessness	X
Criminal History	☐
Bad credit or rental history (including not having been a leaseholder)	☐
Head of Household with Mental/Physical Disability	X

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

MCOC has developed CoC/ESG written standards that include strategies & benchmarks for rapidly rehousing every family w/ children w/in a timeframe of 30 days of becoming homeless. All MCOC Shelters assess families upon entry & develop housing plans for rapid exits to PH; provide streamlined referrals to appropriate resource; work w/ community legal services to eliminate barriers to housing, & use a housing 1st approach including SSVF for veteran families. MCOC reviews HMIS data to ensure implamentation of the strategies; CoC/ESG monitoring evaluates measures for the strategies & successful implementation at the project level. Coordinated Entry will ensure streamlined access to services & housing to help w/ the strategies & benchmarks for rapidly rehousing families w/ children w/in 30 days of becoming homeless. Maine's Statewide & Regional Homeless Councils are responsible for overseeing Main's strategy to rapidly rehouse every family w/children w/in 30 days of becoming homeless.

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	33	102	69

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

MCOC implementation & monitoring of anti-discrimination policies ensures the needs of all individuals & their families experiencing homelessness are met through equal access to ESG & CoC funded programs, Housing Navigation & Stabilization services & ES, SH, TH, & PH. Navigator trainings include Fair

Housing & Non-Discrimination regs. Maine's Homeless Rule, governing funding of shelters & related services, requires shelters to post non-discrimination policies & inform clients of these policies & prohibits separation of family members based on age, sex, gender, LGBT status, marital status or disability.. MCOC distributed information about & encouraged participation in HUD's Equal Access & Gender Identity Rule training in Nov. 2016 & posted links to this & similar webinars on the MHP site.

3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

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

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

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

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

MCoC uses strategies to increase housing/services for homeless youth, specifically applying for new funding. Successful apps for homeless youth grants including: LGBTQ Homeless Youth Transition Services Demonstration Project - RRH & transition-in-place (TIP) housing; new CoC-funded RRH targeting youth. Other strategies used: navigator/PATH services for youth housing & retention, including outreach to unsheltered youth. Strategies are effective b/c more youth engaged in services/housing, improved youth shelter

capacity, better youth outreach/engagement. Measures for effectiveness: Successful Transitions to Adulthood Research study evaluates strategies w/ success measures; PIT & specialized youth counts - tracks # of youth homeless & progress vs. prev. yr; HIC - increase in housing/services for homeless youth vs. prev. yr; System performance measures - Analyze youth data to gauge progress in ending youth homelessness. Measures are appropriate b/c they are data-driven, youth-specific.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services.
(limit 1000 characters)

MCOC requires CoC/ESG providers inform families w/children & unaccompanied youth of their McKinney-Vento Educational Assurances Act rights w/forms/flyers. MH requires ESG programs have staff to work w/LEA liaisons. Providers working w/homeless youth meet about practices & policy, sharing info w/McKinney-Vento liaisons. MCOC/ESG sub-recipients work w/ LEAs on enrollment, transportation, ESL, support plans, immunizations, records, testing, etc. HMIS asks if kids are connected to LEAs. Local DOEs work closely w/family/youth programs. Shelters consult w/school district liaisons to ensure kids in shelter stay enrolled locally & to arrange any testing/educational/homeless/on-site services needed to stay in school. School liaisons/social workers refer to CoC providers/partners if students appear homeless/at risk. All DV shelters have policies on youth/child educational needs. Maine DOE Truancy, Dropouts, Homeless, & Alternative Education Coordinator attends Statewide Homeless Council & MCOC.

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

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

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

MCoC Veteran Committee includes SSVF, VA & PATH workers who conduct regular outreach to identify sheltered & unsheltered homeless veterans. HMIS entry forms ask about veteran status; SSVF & VA regularly access HMIS data to identify veterans through CoC data sharing agreements. MCoC Veteran Committee utilizes a Veteran specific Coordinated Entry & Assessment process in conjunction w/ the MCoC CE system. Via CE Veterans are referred to SSVF, GPD or VA for assessment & VI-SPDAT is used to target resources to veterans w/ highest vulnerability. All veterans are assessed for eligibility for VA & Non-VA funded benefits & services including SSVF, HUD-VASH, HVRP, GPD, VA Health, VBA & SSI/SSDI (SSVF funded SOAR). MCOC Veteran Committee manages a by-name list of veterans & meets weekly to plan & coordinate services. CH Veterans are targeted & prioritized for assistance through HMIS CH/LTS Stayer Reports. SSVF, GPD & VA participate in MCOC meetings & the community planning process.

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

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

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

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

Instructions:

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

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

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		
Veteran's Health Administration	Yes	Yes

4A-1a. Mainstream Benefits

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

CoC program-funded projects supplement CoC funds w/ other resources. MCoC works w/ mainstream programs (PATH/navigators) that assist homeless program participants to apply for/receive mainstream benefits such as: GA, Medicaid, TANF, SNAP, SSI/SSDI. Staff are SOAR trained. MCoC works w/ programs directly to ensure collaboration & consumer access to programs/benefits. Resource Committee outreaches mainstream programs to enhance partnerships. State/local mainstream programs are MCoC voting members & part of Coordinated Entry. Info is regularly disseminated b/w MCoC & mainstream providers. MCoC monitors & scores projects based on their ability to connect participants to mainstream resources, specifically non CoC-funded benefits. MCoC systematically informs programs/staff regarding mainstream resources available through frequent trainings & TA which are

publicly posted & disseminated. The Statewide Homeless Council is responsible for overseeing these strategies for mainstream benefits.

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

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	39.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	36.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	92.31%

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

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	39.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	36.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	92.31%

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

MCoC outreaches to the unsheltered using a network of programs/providers covering all of Maine that is available 24/7/365. Shelters conduct outreach in their catchment areas. PATH outreaches to those living w/ serious MI who are homeless. PATH workers engage eligible persons & establish trust to assist w/: links to housing/vouchers; Mainstream Resources/benefits; case management & services. ESHAP Navigators work w/ those not staying at shelters. Youth shelters/providers are contracted by ME DHHS to conduct outreach. MCoC coordinated development of Regional outreach & by-name lists to meet the needs of those who are unsheltered statewide. These efforts identify those least likely to engage/request assistance, are targeted to meet the needs of each individual & address service gaps, including for specific subpopulations that have historically been reluctant to seek assistance such as LGBTQ, persons fleeing DV, unsheltered youth & those suffering w/ a severe & persistent MI, SUD, or both.

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as

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

MCoC adopted an Affirmatively Furthering Fair Housing & Access to Supportive Services Policy. MCoC projects must: comply w/ all local/state/federal fair housing, accessibility, occupancy & selection procedures laws/regs; not discriminate based on age, race, color, sex, religion, national origin, handicap, disability, LGBTQ or familial status; practice affirmative marketing=positive efforts to ensure persons of various races, religions, familial status, color, sex, disability, LGBTQ & national origins, whom are least likely to apply for housing/services w/out special outreach, are made aware of projects & their benefits. MCoC projects contact local shelters/providers alerting them to programs. Project ads/signs must include Equal Housing Opportunity statement/logo & HUD's Fair Housing Poster. Materials are in diff languages & interpreters are available for effective communication to people w/ limited English. Policies are communicated to people w/ disabilities to ensure comprehension.

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

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	79	369	290

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	ME-500 Selection ...	09/20/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	2017 ME-500 MCOC ...	09/25/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	ME-500 MCOC Scori...	09/21/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	ME-500 Scoring an...	09/21/2017
05. CoCs Process for Reallocating	Yes	ME-500 Reallocati...	09/21/2017
06. CoC's Governance Charter	Yes	ME-500 MCOC Gover...	09/26/2017
07. HMIS Policy and Procedures Manual	Yes	ME-500 HMIS Polic...	09/21/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	Me-500 PHA inform...	09/22/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No	ME-500 MCOC HMIS MOU	09/25/2017
11. CoC Written Standards for Order of Priority	No	ME-500 MCOC Order...	09/26/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	2017 ME-500 HDX C...	09/21/2017
14. Other	No		
15. Other	No		

Attachment Details

Document Description: ME-500 Selection Results Announcement (none rejected)

Attachment Details

Document Description: 2017 ME-500 MCOC NOFA App Public Posting

Attachment Details

Document Description: ME-500 MCOC Scoring and Selection info

Attachment Details

Document Description: ME-500 Scoring and Ranking info Public Posting

Attachment Details

Document Description: ME-500 Reallocation Process

Attachment Details

Document Description: ME-500 MCOC Governance

Attachment Details

Document Description: ME-500 HMIS Policies and Procedures Manual

Attachment Details

Document Description:

Attachment Details

Document Description: Me-500 PHA information

Attachment Details

Document Description: ME-500 MCOC HMIS MOU

Attachment Details

Document Description: ME-500 MCOC Order of Priority

Attachment Details

Document Description:

Attachment Details

Document Description: 2017 ME-500 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	08/23/2017
1B. Engagement	09/26/2017
1C. Coordination	09/20/2017
1D. Discharge Planning	08/23/2017
1E. Project Review	09/21/2017
1F. Reallocation Supporting Documentation	09/25/2017
2A. HMIS Implementation	09/22/2017
2B. PIT Count	09/22/2017
2C. Sheltered Data - Methods	09/15/2017
3A. System Performance	09/22/2017
3B. Performance and Strategic Planning	09/14/2017

4A. Mainstream Benefits and Additional Policies	09/20/2017
4B. Attachments	09/26/2017
Submission Summary	No Input Required

FY 2017 CoC NOFA Summary for Maine

This summary provides highlights of important information but all potential applicants must read the full NOFA and all HUD and esnaps guidance for additional details.

Funding Opportunity Title: Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2017 Continuum of Care Program Competition
Announcement Type: Initial
Funding Opportunity Number: FR-6000-N-25
Primary CFDA Number: 14.267
Due Date for Applications: CoC Application Due 9/28/2017. Project Applications Due 8/30/17.

Applicants are required to complete and submit their applications in *e-snaps* at www.hud.gov/esnaps

For Further Information: Questions regarding specific program requirements should be directed to the local HUD Field Office, Robert.D.Shumeyko@hud.gov or Morrow, Lynn Lynn.Morrow@hud.gov

Training and Resources: CoC Program interim rule (24 CFR part 578 published July 31, 2012 at 77 CFR 45422), training materials, and program resources via the HUD Exchange at www.hudexchange.info/homelessness-assistance/

The HUD Exchange Ask A Question (AAQ). HUD Exchange *e-snaps* AAQ at www.hudexchange.info/get-assistance /. The AAQ is accessible 24 hours each day.

HUD Homeless Assistance Listserv: To join the Listserv visit: www.hudexchange.info/mailinglist

Incorporation of the General Section: Applications must meet all requirements of the General Section in addition to the requirements of this NOFA to be considered and potentially receive funding.

General Section Questions. The Notice of FY 2017 Policy Requirements and General Section to HUD's FY 2017 NOFAs for Discretionary Programs (General Section) can found at https://www.hudexchange.info/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/.

Eligible Costs: Provisions at 24 CFR 578.37 through 578.63 identify the eligible costs

Match: 24 CFR 578.73 describes match requirements. Project Applicants that intend to use program income as match must provide an estimate of how much program income will be used for match.

Other Requirements: *DUNS number and SAM*. Project applicants are required to register with Dun and Bradstreet to obtain a DATA Universal Numbering System (DUNS) number, if they have not already done so, and complete or renew their registration in the System for Award Management (SAM) per Section V.A.1.of the FY2017 General Section.

Statutory and Regulatory Requirements. To be eligible for funding under this NOFA, project applicants must meet all statutory and regulatory requirements in the Act and 24 CFR part 578.

Local Competition Deadlines: All project applications are required to be submitted to the CoC no later than 30 days before the application deadline of September 28, 2017. The CoC must notify all project applicants no later than 15 days before the FY 2017 application deadline regarding whether their project applications will be accepted and ranked, rejected, or reduced as part of the CoC Consolidated Application submission.
For Maine: Projects must submit applications in esnaps no later than August 30th. They will be notified of the CoC's Scoring and Ranking results of their project no later than September 13th.

Available Funds: Tier 1 is equal to 94% of the CoC's FY 2017 Annual Renewal Demand (ARD). Tier 2 is the difference between Tier 1 and the CoC's ARD plus any amount available for the permanent housing bonus. Maine will have approximately $713,500 available for one or more qualifying Bonus projects.

CoC Review of Project Applications: New and renewal projects must provide a description of the proposed project including the population/sub-population it will serve, the type of housing and services that will be provided, and the budget activities that are being requested. For more information see Section V. of the NOFA.

Threshold review will include ensuring that:
a. all proposed program participants will be eligible for the program component type selected;
b. the proposed activities are eligible under 24 CFR part 578;
c. each project narrative is fully responsive to the question being asked and it meets all the criteria for that question as required by this NOFA
d. the data provided in various parts of the project application are consistent; and,
e. required attachments correspond to the attachment list in esnaps and the attachments must contain accurate and complete information, and are dated between May1, 2017 and September 28, 2017.
More detailed threshold requirements are listed in Section V. of the Program NOFA.

HUD's Homeless Policy Priorities
   1. ***Ending homelessness for all persons.***
   2. ***Create a systemic response to homelessness.***
   3. ***Strategically allocating and using resources.***
   4. ***Using a Housing First approach.***

CoC Program Implementation. The following list highlights important information that applicants should consider as they are preparing the FY 2017 CoC Application and project applications(s). This is not an exhaustive list of considerations or requirements; therefore, all applicants and CoC stakeholders should carefully review 24 CFR part 578 for comprehensive information.

1. The FY 2016 Appropriations Act established certain requirements for the FY 2016 Competition that HUD will continue to require in the FY 2017 CoC Program Competition:
   a. CoCs cannot receive grants for new projects, other than through reallocation, unless the CoC competitively ranks projects based on how they improve system performance;
   b. HUD is increasing the share of the CoC score that is based on performance criteria; and
   c. HUD will prioritize funding for CoCs that have demonstrated the ability to reallocate resources to higher performing projects.

2. In addition to grants for CoC planning and UFA Costs, **CoCs may create new projects by making funds available through reallocation or by using amounts available through the permanent housing bonus.**
   a. The following types of projects may be created using funds that the CoC has made available through **reallocation**:
      (1) CoCs may create new permanent supportive housing projects that meet the requirements of DedicatedPLUS as defined in Section III.A.3.d. of this NOFA or new permanent supportive housing projects where 100 percent of the beds are dedicated to chronic homelessness.
      (2) CoCs may create new rapid rehousing projects that will serve homeless individuals and families, including unaccompanied youth, who meet the following criteria:
         (a) residing in a place not meant for human habitation;
         (b) residing in an emergency shelter;
         (c) persons meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence situations;
         (d) residing in a transitional housing project that was eliminated in the FY 2017 CoC Program Competition;
         (e) residing in transitional housing funded by a Joint TH and PH-RRH component project (see Section III.A.3.h. of this NOFA); or
         (f) receiving services from a VA-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.
      (3) CoCs may create new Joint TH and PH-RRH component projects as defined in Section III.A.3.h. of this NOFA to better serve homeless individuals and families, including individuals or families fleeing or attempting to flee domestic violence.
      (4) CoCs may create a new dedicated Homeless Management Information System (HMIS) project for the costs at 24 CFR 578.37(a)(2) that can only be carried outby the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and that is listed on the HMIS Lead form in the CoC Applicant Profile in e-snaps.
      (5) CoCs may create a new supportive services only project to develop or operate a new centralized or coordinated assessment system.

b. **CoCs may create new projects through the permanent housing bonus** up to 6 percent of the CoC's Final Pro Rata Need (FPRN) for the following types of new projects:

(1) CoCs may create new permanent supportive housing projects that meet the requirements of DedicatedPLUS as defined in Section III.A.3.d. of this NOFA or new permanent supportive housing projects where 100 percent of the beds are dedicated to chronic homelessness.

(2) CoCs may create new rapid rehousing projects that will serve homeless individuals and families, including unaccompanied youth, who meet the following criteria:

(a) residing in a place not meant for human habitation;

(b) residing in an emergency shelter;

(c) persons meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence situations;

(d) residing in a transitional housing project that was eliminated in the FY 2017 CoC Program Competition;

(e) residing in transitional housing funded by a Joint TH and PH-RRH component project (see Section III.A.3.h. of this NOFA); or

(f) receiving services from a VA-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

(3) CoCs may create new Joint TH and PH-RRH component projects as defined in Section III.A.3.h. of this NOFA to better serve homeless individuals and families, including individuals or families fleeing or attempting to flee domestic violence.

3. Because new Joint TH and PH-RRH projects and permanent housing projects (permanent supportive housing and rapid rehousing) may be created through either reallocation or the permanent housing bonus, HUD may reclassify these projects that a project applicant or a CoC has classified as reallocation or permanent housing bonus if the project would be ineligible for funding because the CoC exceeded either its reallocation or permanent housing bonus amount. New Joint TH and PH-RRH component projects and permanent housing projects will be evaluated using the same criteria regardless of whether the CoC has identified them as bonus or reallocation projects.

4. **New in the FY 2017 CoC Program Competition, HUD will allow project applicants to apply for a new expansion project under the reallocation process or permanent housing bonus in order to expand existing eligible renewal projects that will increase the number of units in the project, or allow the recipient to serve additional persons.** Project applicants that intend to submit a new reallocation or permanent housing bonus project for the purposes of expanding an eligible renewal project must:

a. provide the eligible renewal grant number that the project applicant requests to expand on the new project application;

b. indicate how the new project application will expand units, beds, services, persons served, or in the case of HMIS projects, how the current HMIS grant activities will be expanded for the CoC's geographic area; and

c. ensure the funding request for the new expansion project is within the funding parameters allowed under the reallocation process or permanent housing bonus.

CoCs may request that up to 10% of funding for each fiscal year awarded under this NOFA be approved to serve homeless households with children & youth defined as homeless under other Federal statutes who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). Approved CoCs must determine which project(s) will be permitted to use some or all of their funding for this purpose. The only eligible project types are Transitional Housing, Supportive Services Only, and the Joint TH and PH-RHH component projects. CoCs must demonstrate that serving this population is of equal or greater priority …than serving the homeless as defined under paragraphs (1), (2), & (4)

HUD will allow new reallocated projects to request funding for 1 year. Any new reallocated projects requesting capital costs (i.e., new construction, acquisition, or rehabilitation) are not eligible for 1-year requests and HUD will increase the grant term to 3-years if they are submitted for 1-year terms.

HUD will continue the Tier 1 & Tier 2 funding process.

a. Tier 1 is equal to the greater of the combined amount of ARA for all permanent housing and HMIS projects eligible for renewal up to $1,000,000 or 94 percent of the CoC's FY 2017 ARD, as described in Section III.A.3.a. of this NOFA. The CoC's ARD amount will be based on the amount of funds requested by eligible renewal project applications on the Renewal Project Listing combined with the eligible renewal project amount(s) that were reallocated. Projects in this tier will be conditionally selected from the highest scoring CoC to the lowest scoring CoC, provided the project applications pass both eligibility and threshold review. Any type of new or renewal project application can be placed in Tier 1, except for CoC Planning and UFA projects, which are not ranked. However, in the event insufficient funding is available under this NOFA to award all Tier 1 projects, Tier 1 will be reduced proportionately, which could result in some Tier 1 projects falling into Tier 2. Therefore, CoCs should carefully determine the priority and ranking for all project applications in Tier 1 as well as Tier 2, which is described below.

b. Tier 2 is the difference between Tier 1 and the CoC's ARD plus any amount available for the permanent housing bonus (before adjustments are made to permanent housing leasing, operating, and rental assistance budget line items based on changes to FMR) as described in Section II.B.2.b. of this NOFA. This does not include the amounts available for CoC planning and UFA Costs. Project applications that are in Tier 2 will be selected for FY 2017 CoC Program funding using the process described in Section II.B.17. of this NOFA. Projects placed in Tier 2 will be assessed for eligibility and threshold requirements, and funding will be determined using the CoC Application score as well as the factors listed in Section II.B.17. of this NOFA.

c. If a project application straddles the Tier 1 and Tier 2 funding line, HUD will conditionally select the project up to the amount of funding that falls within Tier 1 as stated above; and then, using the CoC score and other factors described in Section II.B.17. of this NOFA, HUD may fund the Tier 2 portion of the project. If HUD does not fund the Tier 2 portion of the project, HUD may award the project at the reduced amount, provided the project is still feasible with the reduced funding (e.g., is able to continue serving homeless program participants effectively).

d. As previously stated, CoC planning and UFA Costs are not ranked and; therefore, will not be included in Tier 1 or Tier 2. CoC planning and UFA Costs projects that pass eligibility and review threshold will be conditionally selected using CoC scores from the highest scoring CoC to the lowest scoring CoC.
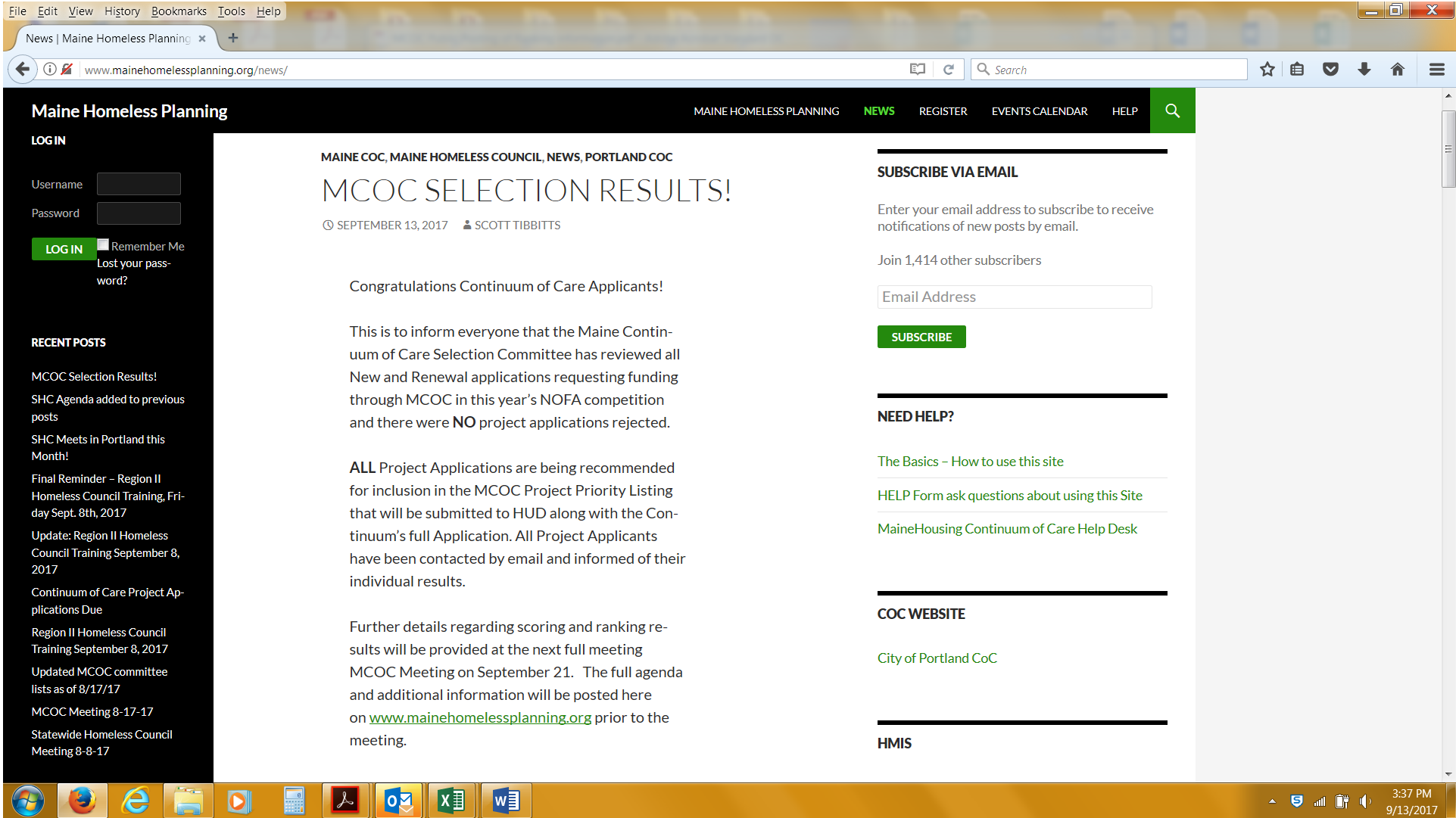
While the CoC will determine the order in which project applications are ranked, HUD will calculate which projects fall in Tier 1 and Tier 2 based on all project applications that pass eligibility and threshold review.

HUD will award a point value to each new and renewal project application that is in Tier 2 using a 100-point scale:
a. CoC Score. Up to 50 points in direct proportion to the score received on the CoC Application. For example, if a CoC received 100 out of 200 points on the CoC Application, the project application would receive 25 out of 50 points for this criterion. CoCs must receive all 200 CoC Application points available to receive the full 50 points for the CoC Application score.
b. CoC Project Ranking. Up to 40 points for the CoC's ranking of the project application(s). To more evenly distribute funding across CoCs and take into account the CoCs ranking of projects, point values will be assigned directly related to the CoCs ranking of projects. The calculation of point values will be 40 times the quantity (1-x) where x is the ratio of the cumulative funding requests for all projects or portions of projects ranked higher by the CoC in Tier 2 plus one half of the funding of the project of interest to the total amount of funding available in Tier 2. For example, if a CoC is eligible to apply for projects totaling $500,000 in Tier 2 and applies for 5 projects ranked in Tier 2 of $100,000 each: the highest ranked project would receive 36 points and then the subsequently ranked projects would receive 28, 20, 12, and 4 points.
c. Commitment to Housing First. Up to 10 points for how the permanent housing project application commits to applying the Housing First model. Transitional housing, Joint TH and PH-RRH component, safe haven, and SSO projects that are not for centralized or coordinated assessment can receive up to 10 points for how the project demonstrates that it is low-barrier, prioritizes rapid placement and stabilization in permanent housing, and does not have service participation requirements or preconditions to entry (such as sobriety or a minimum income threshold). HMIS projects and SSO projects for a centralized or coordinated assessment system will automatically receive 10 points.

Maine Homeless Planning

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MCOC SELECTION RESULTS!

🕒 SEPTEMBER 13, 2017   👤 SCOTT TIBBITTS

Congratulations Continuum of Care Applicants!

This is to inform everyone that the Maine Continuum of Care Selection Committee has reviewed all New and Renewal applications requesting funding through MCOC in this year's NOFA competition and there were **NO** project applications rejected.

ALL Project Applications are being recommended for inclusion in the MCOC Project Priority Listing that will be submitted to HUD along with the Continuum's full Application. All Project Applicants have been contacted by email and informed of their individual results.

Further details regarding scoring and ranking results will be provided at the next full meeting MCOC Meeting on September 21.   The full agenda and additional information will be posted here on www.mainehomelessplanning.org prior to the meeting.

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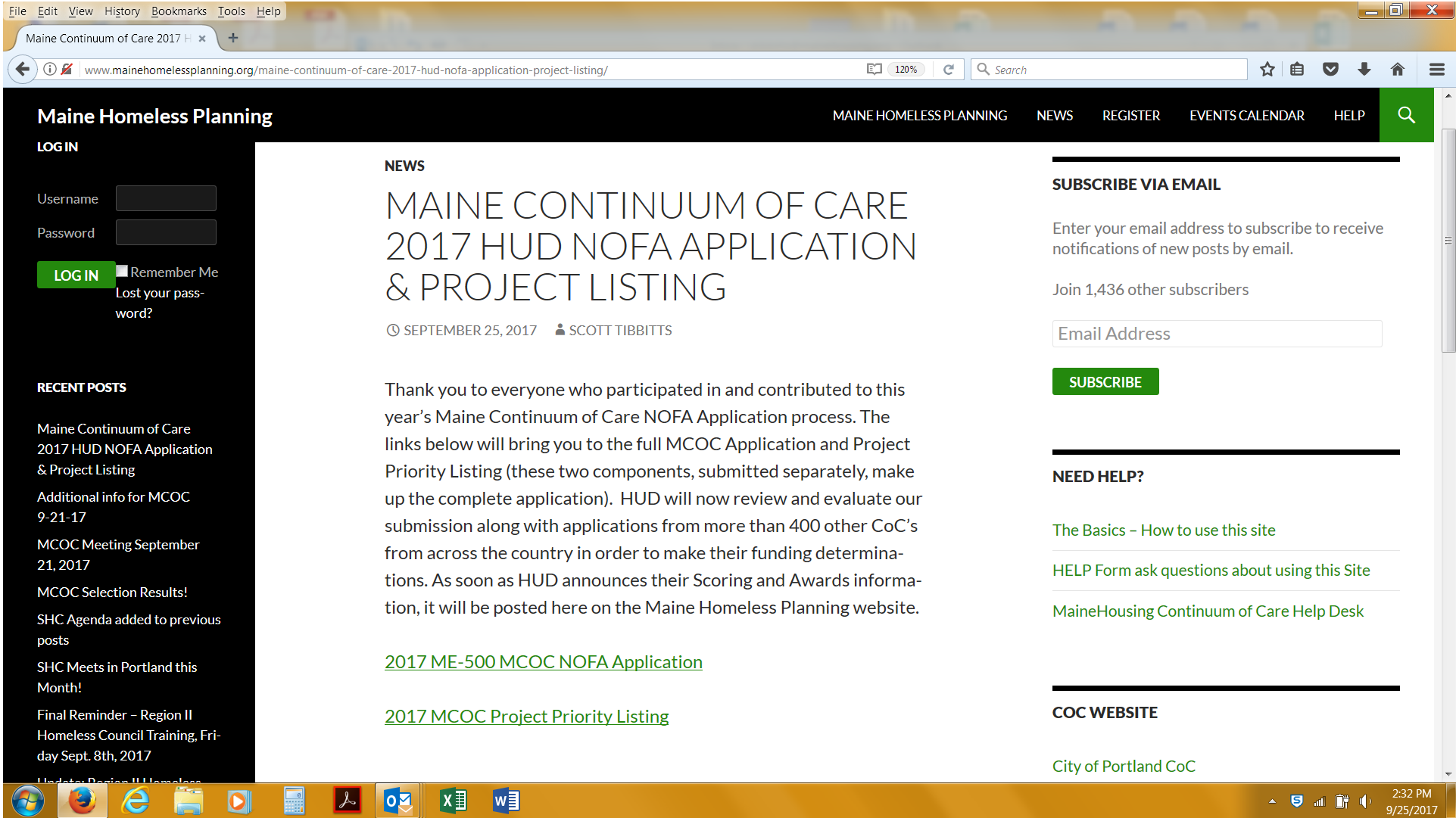Join 1,414 other subscribers

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Maine Continuum of Care
2017 HUD NOFA Application
& Project Listing

Additional info for MCOC
9-21-17

MCOC Meeting September
21, 2017

MCOC Selection Results!

SHC Agenda added to previous
posts

SHC Meets in Portland this
Month!

Final Reminder – Region II
Homeless Council Training, Fri-
day Sept. 8th, 2017

Update: Region II Homeless

NEWS

MAINE CONTINUUM OF CARE 2017 HUD NOFA APPLICATION & PROJECT LISTING

🕓 SEPTEMBER 25, 2017   👤 SCOTT TIBBITTS

Thank you to everyone who participated in and contributed to this
year's Maine Continuum of Care NOFA Application process. The
links below will bring you to the full MCOC Application and Project
Priority Listing (these two components, submitted separately, make
up the complete application). HUD will now review and evaluate our
submission along with applications from more than 400 other CoC's
from across the country in order to make their funding determina-
tions. As soon as HUD announces their Scoring and Awards informa-
tion, it will be posted here on the Maine Homeless Planning website.

2017 ME-500 MCOC NOFA Application

2017 MCOC Project Priority Listing

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2017 MCOC NOFA Information for New and Renewal Applicants

ME HVAC By-Name-List Report (March 2017)

ME HVAC By-Name-List Report (April 2017)

ME HVAC By-Name-List Report (May 2017)

ME HVAC By-Name-List Report (June 2017)

By-Name-List Quarterly Report (June 2017)

ME HVAC Meeting Minutes (June 2017)

ME HVAC Meeting Minutes (May 2017)

ME HVAC Meeting Minutes (April)

Most recent MCOC committee membership lists

CATEGORIES

In case you missed this, News Shared

Maine CoC

Maine Homeless Council

News

Portland CoC

Region 1

Region 2

Region 3

System Performance Measures

Uncategorized

User List

IN CASE YOU MISSED THIS, NEWS SHARED, MAINE COC, MAINE HOMELESS COUNCIL, NEWS, PORTLAND COC, REGION 1, REGION 2, REGION 3

2017 MCOC NOFA INFORMATION FOR NEW AND RENEWAL APPLICANTS

⏱ AUGUST 4, 2017   👤 SCOTT TIBBITTS

The Maine Continuum of Care is pleased to announce that we are accepting New and Renewal Project Applications for the FY2017 Continuum of Care Program Competition.

Any agency that intends to submit an application for either a New or a Renewal Project must read the full NOFA announcement, and any and all additional guidance from HUD in order to be fully informed of the requirements and processes involved. More information can be found at the HUD Exchange website: https://www.hudexchange.info/news/fy-2017-continuum-of-care-coc-program-competition-e-snaps-is-now-available/

For any potential New Project applicants, please be aware that MaineHousing will *not* be providing "Match" funding for New Construction or Acquisition & Rehab ("Bricks & Mortar") Projects in conjunction with this year's Continuum of Care competition. If you wish to develop such a project you must secure Match funding from other sources.

The following materials include a Maine Summary of information related to the NOFA and this competition, Highlights of new information and changes from prior competitions, and copies of the Scoring tools that will be used for New and Renewal Applications. Projects will be ranked according to Score, with Renewal Projects prioritized above New Projects.

Maine-Summary-of-FY-2017-Continuum-of-Care-Program-Competition

fy-2017-coc-program-competition-nofa-whats-new-changes-and-highlights

2017-MCOC-New-Project-Scorecard

2017-MCOC-Renewal-Project-Scorecard

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Maine HMIS

HUD WEBSITES

e-snaps

HUD Exchange.info

HUD Homelessness Data Exchange

HUD Homelessness Resource Exchange

HUD Website

RESOURCES

From MCOC Governance:

Article 9. Selection Process

A. MCOC shall provide information and materials to all committee members to familiarize them with the purpose and responsibilities of the committee.

B. Applications, Scoring Templates, and all other relevant materials will be given to the Selection Committee members for review prior to scoring.

C. All projects shall be scored using the appropriate approved Scoring Template.

D. Ranking of applications will be based on scoring results and adjusted as appropriate to address MCOC and HUD priorities and to maximize potential funding.

E. The Selection Committee shall draw up a slate of project applications in ranked order of prioritization to be recommended to MCOC for inclusion in the Application.

From the MCOC Governance:

Article 11. Reallocation Procedure

HUD expects communities to use the reallocation process to ensure that funding for the CoC program remains as competitive as possible. The goals include helping communities progress toward HUD-identified priority areas, ensuring high standards for performance outcomes, and ensuring effective use of limited funding. CoC's are scored overall each year through the CoC Consolidated Application, and this score determines the CoC's competitiveness for renewal and new funding. Part of the score has historically included the CoC's use of the reallocation process.

HUD encourages communities to analyze their portfolio of grants to determine if there is the right mix of housing and services, and whether funding for some projects, in whole or in part, should be reallocated to make resources available for new efforts.

The MCoC is responsible for decisions regarding the reallocation process each year. This includes consideration for voluntary and involuntary reallocations.

> Voluntary reallocations are initiated by a renewal project applicant by choice. There are different reasons a renewal project applicant might choose reallocation. An applicant might see a greater need in the community for a different type of project from the one they are currently operating. They might also recognize that a different type of project will better meet HUD's priorities for the CoC program, possibly making the CoC overall more competitive for additional funds for new projects. Or, an applicant may be prompted to consider changes to their project if they scored very low during the most recent CoC renewal competition.

> Renewal applicants may voluntarily reallocate their project(s) at any point in time, up to and including during the annual NOFA process. Renewal applicants may choose to voluntarily reallocate funding for their project(s) and instead submit a new application for funding, based upon eligibility outlined in the HUD's NOFA. Based on the score and ranking approved by the CoC, renewal applicants may choose to resubmit their application as a voluntary reallocation (in whole or in part) to a new type of project, according to HUD's final rules published with the NOFA. Any new projects submitted in this way will be re-scored, which may result in a change of rankings for all projects.

> Involuntary reallocations include any renewal projects that are entirely eliminated by the CoC, or that have their possible renewal funding reduced by the CoC. The CoC may pursue involuntary reallocation for renewal projects for multiple reasons, such as unspent funds, repeated negative findings during the annual monitoring process, or scoring very low during the recent MCOC renewal competition.

Maine Continuum of Care - MCOC
Governance & Structure
Revised September 2017

Article 1. Organization

A. This affiliation is established by and in accordance with the U.S. Department of Housing and Urban Development (HUD) regulations.
B. The name of this affiliation shall be the Maine Continuum of Care, hereinafter referred to as "MCOC."
C. MCOC covers the entire State of Maine.
D. MCOC will establish a Collaborative Applicant (CA) that is responsible for the general coordination, oversight, and planning efforts of MCOC for the purpose of submission of the funding application. The CA shall have the authority by the MCOC to certify and submit the annual HUD Homeless Assistance Grant funding application on behalf of the MCOC.
E. The Business address for MCOC will be maintained by the identified CA. See addendum.
F. The CA cannot hold a Chair position of the MCOC.
G. The MCOC is governed by the Continuum of Care Board of Directors (CoC Board). The CoC Board serves as the oversight body for the Maine Continuum of Care and serves the entire state of Maine (ME 500 CoC), and exists to:
   - Coordinate a statewide commitment to the goal of ending homelessness;
   - Approve CoC funding recommendations for ending homelessness;
   - Promote access to, and effective use of mainstream resources by homeless individuals and families;
   - Promote housing retention, stability, success, and optimize self-sufficiency in the community for people who have experienced homelessness;
   - Review and assess system performance;
   - Ensure implementation of statewide Coordinated Entry; and
   - Provide guidance on HUD Topics and Policies to the MCOC.

   The CoC Board shall assume and carry out duties as detailed by the HUD Continuum of Care Board of Directors Bylaws.

Article 2. Purpose and Mission

The mission of MCOC is to plan and coordinate an inclusive system that helps Maine people avoid or exit quickly from homelessness, and to address the underlying causes of homelessness. MCOC shall accomplish this mission by conducting the following activities:

A. MCOC develops and manages the annual Continuum of Care (CoC) Application process to ensure that MCOC receives the maximum amount of federal McKinney-Vento funding from HUD.
B. MCOC fosters and promotes comprehensive, cohesive, and coordinated approaches to housing and community resources for people and families who are homeless or at risk of becoming homeless through:
   1. Diversion and prevention
   2. Outreach and engagement services
   3. Emergency shelters and supportive services
   4. Transitional housing
   5. Permanent housing
      i. Permanent supportive housing
      ii. Rapid rehousing
      iii. Market rate and affordable housing
   6. Linkages to mainstream and community resources.

C. MCOC identifies and prioritizes the housing and service needs of people who are homeless, and supports a system of intervention, assessment, referral, direct care and aftercare for individuals and families experiencing homelessness.

D. MCOC identifies and addresses service gaps, risk factors, and priorities on an annual basis. MCOC develops specific priorities and action steps to address homelessness throughout the service area. These are posted publically on MaineHomelessPlanning.org.

E. MCOC participates in planning activities supporting Maine's Plan to End and Prevent Homelessness with the following:

    a. The CoC Board;

    b. The Statewide Homeless Council;

    c. The Regional Homeless Councils; and

    d. Local groups, alliances, and coalitions.

F. MCOC collaborates with community providers and stakeholders regarding continuum specific goals and objectives related to ending and preventing homelessness in Maine.

G. MCOC advocates for necessary funding at the state and federal level to develop needed housing and services for people who are homeless in Maine.

H. MCOC develops and supports public policy to assist people who are homeless and advocates for systems change to help end and prevent homelessness in Maine.

I. MCOC educates and helps advocate for people experiencing homelessness in Maine.

J. MCOC educates and helps advocate for entities that help people who are homeless.

Article 3. Meetings:

A. MCOC shall hold scheduled meetings of the general membership at a time and place agreed upon by the membership at least semi-annually.

B. All meetings of the MCOC are open to the public and an invitation to join the MCOC is posted publicly at least annually.

C. Notice of meetings will be provided to the full MCOC membership by the CA.

D. A quorum must be present to hold a vote or conduct business at regular MCOC meetings. A quorum shall be 51% of the number of eligible voting members, and determined prior to the start of each meeting. If a quorum is not present at a meeting, discussion may still take place, but business and voting will not be conducted. The CA shall track attendance and voting member status to determine quorum status for meetings.

E. Committee meetings shall not require a quorum with the exception of the Steering Committee for the purposes of conducting business and voting on behalf of the MCOC (refer to Article 8 - Steering Committee).

F. Voting shall be conducted as outlined in Article 5 for general meetings.

G. If at any time there is a conflict of interest whereby an organization or individual will have a direct interest in the funding, scoring, ranking, or policy decision making, then that organization, representative of the organization, or individual may recuse themselves or abstain for the process in order to mitigate any perceived conflict of interest. The recusal or abstention may be oral or written. In addition, the MCOC may request an organization, representative of organization, or individual to recuse themselves from any activities.

H. In all procedural matters not otherwise specified in this document, MCOC shall be guided by the provisions of *Robert's Rules of Order Newly Revised (11th ed.)* – *Simplified and Applied* (A Webster's new World Book © 1999 by Robert McConnell Productions).

Article 4. Membership:

Each member of MCOC is a vital link in a collaborative community network, and as such, shares in ideas, concerns and decisions regarding the development, and deployment of resources to address the needs of people who are homeless and those at risk of becoming homeless.

A. MCOC has open membership for all individuals and/or organizations within the service area that have an interest in and subscribe to the mission and policies of MCOC, and who, through their participation, will contribute to MCOC's ability to carry out its mission.
B. There is no membership fee.
C. MCOC membership and participation is **required** for all agencies actively receiving MCOC funds. At a minimum, participation shall be defined as maintaining voting eligibility at regular meetings.
D. Regular meeting attendance will be recorded and maintained by the CA. The CA will provide MCOC Chairs with attendance tracking sheets prior to the regular scheduled MCOC meetings for the Chairs to determine voting eligibility as defined in Article 5.

Article 5. Members General Voting Rights:

A. There shall be one vote per Agency, Association, or Individual in attendance and eligible to vote on all MCOC matters that come up at general MCOC meetings.
B. Participation by conference call or other electronic means shall count as attendance and eligible members may vote by electronic means.
C. For voting purposes: An Agency is defined as "an IRS Corporate Entity." Therefore, if a person receives a 1099 as a consultant or a W-2 as an employee they are a member of said Agency. An Association is defined as a group of people who voluntarily enter into an agreement to establish an organization to accomplish a specific purpose. An Individual shall be defined as anyone who has no formal or informal relationship to any Agency or Association otherwise recognized by MCOC.
D. If an agency, association or company holds different corporations, it is the intention of Article 5 that only the parent agency and not the separate corporations may cast a vote. It is the responsibility of said agency, association, parent company, or corporation to determine who will vote on their behalf.
E. An Agency or Association shall be considered in attendance if they are represented by any member of their organization (it need not be the same person at all meetings).
F. A member must have attended at least 50% of the meetings in the previous 12 months to be eligible to vote.
G. Committee meetings will not be included for voting or quorum calculation purposes.
H. All items placed for voting must be made by motion and seconded. Motions may be made and seconded by anyone in attendance (you need not be eligible to vote in order to make or second a motion).
I. A simple majority (at least 51%) affirmative vote by those in attendance and eligible to vote shall determine the outcome of the vote. If specified in the motion, a vote may be taken by roll call or by written ballot, and/or via electronic means.

Article 6. Officers & Elections:

A. MCOC will have three Chairs, who will each serve for a three-year term.
   a. Chairs shall be responsible for planning and conducting general and Steering Committee meetings.
   b. Any Chair may act as the designated signatory for MCOC correspondence.
   c. Chairs must be members of eligible voting organizations (Something about regions)
B. One new Chair shall be nominated and elected by MCOC on an annual basis. Notifications for upcoming nominations shall occur in November. Nominations for a new Chair will be taken prior to and at the *December* MCOC meeting. Elections shall be held at the *January* meeting. The new Chair will begin serving upon election.
C. Term of Office shall be three years. There is no limit on terms, but all Chairs must be re-nominated and re-elected to serve another term once their initial term has expired.
D. Officers may resign in writing during their term and shall, to the best of their ability, give at least one-month notice of such resignation. Any vacancies shall be filled for the remainder of the term by nomination and election at the next regular meeting.

Article 7. HMIS:
   A. Designate Review, revise, and approve privacy, security, and data quality plans;
   B. Ensure consistent participation of recipients/subrecipients in HMIS; and
   C. Ensure that the HMIS is administered in compliance with HUD requirements.

   D. The MCOC will establish a HMIS advisory committee to meet with the HMIS lead agency on a (minimum) quarterly basis to address HMIS issues and or concerns along with review of HUD changes or requirements which may need to be adopted into the HMIS governance.

Article 8. MCOC Committees
   A. The committees detailed below shall be Standing Committees of MCOC. In addition to the duties detailed below, Committees may investigate other topics or perform other tasks as assigned by MCOC.
   B. With the exception of the Steering Committee, each committee shall elect co-chairs annually after the January meeting of the MCOC. These Co-chairs are responsible for planning, calling, and conducting committee meetings.
   C. Co-chairs from each Standing Committee shall participate on the Steering Committee. Committees shall not make any policy or funding related decisions. Committees may make recommendations to MCOC, which may be presented for voting approval to the MCOC.
   D. All Standing Committees shall designate a Secretary to record minutes of the meetings and make them available.

Steering Committee – The committee will be comprised of: The three MCOC chairs; Co-Chairs from each of the other Standing Committees; the chair of the Statewide Homeless Council (regardless of being a MCOC Chair or a Co-Chair on a MCOC Standing Committee); at least one representative from DHHS (regardless of being a MCOC Chair or a Co-Chair on a MCOC Standing Committee); at least one representative from MaineHousing (regardless of being a Co-Chair on a MCOC Standing Committee); and the CA (*at the COC BOD on 6/8/17 three members of the former PCOC were added as voting members to ensure representation*).
The Steering Committee exists to:
   A. Set COC Agendas and Big Thinking Topics
   B. Coordinate with the Standing committees to ensure information is disseminated to the MCOC.
   C. Facilitates the NOFA process and make funding recommendations
   D. Review monitoring results & recommend action to BOD for underperforming projects
   E. Make recommendations for priorities
The Steering Committee operation standards are:
   A. The MCOC Chairs and/or the Collaborative Applicant may call a Steering Committee meeting at any time to address immediate needs.
   B. Recommendations from the Steering Committee shall go to MCOC to be voted on at the next regular meeting.
   C. For immediate, emergency, or time sensitive decisions regarding the COC Application Process, or for other specific decisions or letters of support, as assigned by MCOC, the Steering Committee has the authority from MCOC to make appropriate decisions. In all other matters, the Steering Committee can only make recommendations to MCOC.
   D. Votes taken by the Steering Committee related to immediate, emergency, or time sensitive decisions, as detailed above, shall be governed similarly to Article 5, Members General Voting Rights. For Steering Committee votes, a member must have attended at least 50% of the Steering Committee meetings in the previous 12 months to be eligible to vote.
   E. Any such decisions made by the Steering Committee shall be reported back to the MCOC at the next regular meeting and by email or posting on the Homeless Planning Website.

F. The 'One Agency- One Vote' rule shall also apply to the Steering Committee. Therefore, as many agencies and individuals as possible should be encouraged to participate as Chairs on various committees.

Project Monitoring and Template Committee
The Project Monitoring and Template Committee exists to:
   A. Oversee the processes and methodologies used to monitor COC and Emergency Solutions Grant (ESG) recipient(s).
   B. Monitor Renewal Projects that receive ongoing funding through COC and Emergency Solutions Grant (ESG) recipient(s) and provide results and recommendations to the Steering Committee.
   C. Establish the criteria and protocols used to score and rank projects seeking funding through the COC.

The Monitoring Process for CoC-Funded Projects:
   A. Refer and adhere to the Monitoring and Evaluation Policies and Procedures.
   B. Develop and refine the Monitoring Questionnaires and methodology used to monitor and evaluate ongoing program performance. The Monitoring Questionnaires will be presented for approval by MCOC prior to the start of the Monitoring process.
   C. Once approved, the Monitoring Questionnaires will be provided to all projects up for renewal in the current funding round, along with a request for the project's most recent E-snaps APR and the most recent HMIS-generated APR.
   D. The Project Committee will monitor project performance which results in a threshold score. If an agency fails to meet threshold, as determined by the MCOC, they will be put on a Performance Improvement Plan which will be reviewed as needed, annually at minimum, and with technical assistance from the appropriate MCOC committee(s) will be required to demonstrate performance improvement. The Project Committee will also offer and/or refer agencies to appropriate assistance and training if available.
   E. This Committee then prepares the information collected and presents their recommendations to the Steering and the MCOC membership for processes of prioritization and performance improvement and the Selection Committee for scoring and ranking.

The Monitoring Process for ESG Recipient(s):
   A. Refer and adhere to the Monitoring and Evaluation Policies and Procedures.
   B. Develop and refine the Monitoring Questionnaire(s) and methodology used to monitor and evaluate ESG program performance. The Monitoring Questionnaires will be presented for approval by MCOC prior to the start of the Monitoring process.
   C. Once approved, the Monitoring Questionnaires will be provided to the ESG recipient(s).
   D. The Project Committee will monitor project performance which results in a threshold score. If an agency/program fails to meet threshold, as determined by the MCOC, they will be put on a Performance Improvement Plan which will be reviewed as needed, annually at minimum, and with technical assistance from the appropriate MCOC committee(s) will be required to demonstrate performance improvement. The Project Committee will also offer and/or refer agencies to appropriate assistance and training if available.
   E. This Committee then prepares the information collected and presents their recommendations to Steering and the MCOC membership for processes of prioritization and performance improvement.

The Scoring Template Process and Criteria:
   A. Develop and refine the Scoring Templates, methodology and protocols used to score and rank project applications seeking funding through the MCOC annual Collaborative Application to HUD.
   B. This Committee will work closely with other committees to determine appropriate criteria for the separate scoring templates for new and renewal projects, and HMIS applications. Scoring Templates will be based on priorities established by MCOC and by HUD and will be reviewed and adjusted annually at least at the start of the NOFA to account for HUD changing priorities.

C. This Committee will establish a list of protocols and instructions to be provided to the Selection Committee who utilize the scoring templates.

D. The scoring templates, protocols and instructions shall be presented for to MCOC for approval, copies of the approved forms will be provided to the Selection Committee and to all new, and renewal projects including HMIS project applicants prior to the Selection process.

Data Committee - The Data Committee collects information on homelessness throughout the state and to improve data collection techniques and data analysis methods for use in the MCOC Application and to better inform MCOC members, and the general public regarding homelessness in Maine.

The Data Committee exists to:

A. Review data obtained through the annual Point-in-Time count of sheltered and unsheltered persons and the annual Housing Inventory of shelter, transitional housing, and permanent supportive housing in the MCOC area.

B. Evaluate best practices, new guidance, and emerging approaches on data collection, methodology, sharing, and analysis.

C. Review and makes recommendations pertaining to HMIS data quality and completeness for all HMIS participating projects within the MCOC.

D. Coordinate with the other Standing Committees to ensure that they have the information they need to properly perform their functions.

E. Include at least one member of MaineHousing, as MaineHousing is also the statewide HMIS Lead Agency

Resources Committee - The Resource Committee exists to engage the community and the MCOC members, and collects, organizes, and shares information on homelessness in the state of Maine.

The Resource Committee exists to:

A. Work to recruit and orient new members to MCOC and its Committees to involve the broader public including private businesses, landlords, law enforcement, educators, citizens, faith-based organizations, and persons who are homeless or were formerly homeless in the Continuum of Care planning activities.

B. Plan and implement training and education opportunities for members and other providers.

C. Assist in resource development strategies to access new funding sources and improve connections with other agencies and organization.

D. Engage with the community and supports local initiatives to reduce and end homelessness throughout the MCOC area, particularly in our rural communities.

E. Seek to educate and inform MCOC member organizations and the general public on issues regarding homelessness and availability and access to mainstream and other resources.

F. Plan and organize the annual Point in Time (PIT) count for the MCOC.

G. Provide technical assistance, resources and support

Selection Committee - The Selection Committee consists of agencies and/or individuals not competing for project funding during the current round of the MCOC application process. The committee is responsible for the selection, scoring, and ranking of projects to be included in the annual MCOC Collaborative Application according to the Selection Process outlined below in Article 9.

The Selection Committee exists to:

A. Read, review, and score all COC applications

B. Rank applications based on score and make recommendations based on rank

C. Follow Articles 9: Selection Process and Article 10 Appeals Process, outlined below

D. Provide recommendations for continuous improvement

Policy Committee -This committee is a Joint Standing Committee of the MCOC and the Statewide Homeless Council, formally known as the Maine Homeless Policy Committee. This committee is an action oriented group that collects, organizes, and shares information regarding numerous, ongoing policy initiatives. This committee advocates on the local, state, and federal levels for resources and funding for homeless services necessary to fulfill the mission, goals, and objectives of the Continuum of Care.

The Policy Committee exists to:

A. Disseminate information on a regular basis pertaining to current and upcoming policy initiatives relating to homelessness at the regional and statewide levels so Maine presents as a united front around homeless policy;
B. Serve as an informative liaison to the Statewide Homeless Council, Regional Homeless Councils, both Continuums of Care, and other local committees and coalitions regarding local, state, and federal legislation as it pertains to homelessness;
C. Advocate for fully funding McKinney Vento so that the HEARTH Act can be properly implemented; Advocate for adequate Section 8 funding; Advocate for funding for the National Housing Trust Fund; Advocate for the continuation of the Low Income Housing Tax Credit program, including ensuring support for the continuation of the Community Reinvestment Act;
D. Maintain contact with the State and Federal Delegations, acting as a resource for information pertaining to homeless services in Maine; Advocate for federal resources for homeless services and affordable housing; Advocate for state resources for homeless services and affordable housing;
E. Advocate for local/municipal resources for homeless services and affordable housing;
F. Advocate for a sustainable state budget to protect homeless services; Maintain Maine's Plan to Prevent and End Homelessness as a local priority; Engage with the community and support local, state, and federal policy initiatives to reduce and end homelessness.

Veteran Committee – This committee, formally known as The Maine Homeless Veterans Action Committee (MHVAC) was formed in collaboration with several Maine agencies and organizations. This committee is an action oriented group that collects, organizes, and shares information regarding all homeless Veterans in Maine. We work to ensure that Veterans are immediately identified, have access to shelter, are assisted in developing an active housing plan, and permanently housed as quickly as possible.

This Veteran Committee exists to:

A. Actively engaged in the Maine's Coordinated Entry System with the COC.
B. Update COCs on BNL progress (as agreed upon by all parties).
C. Prioritizing and matching Veterans to housing and services.
D. Manage and update Veterans By-Name-List (BNL).
E. Actively participate in local COC meetings.
F. Ensure privacy, release of information, and consent protocols are in place to project Veteran information as contained on the BNL (per individual agency and organization requirements).
G. Stay abreast of current initiatives pertaining to ending and preventing homelessness for Veterans.

Youth Committee – This committee, formally known as The Maine Homeless Youth Provider Group (MHYPG) is a Joint Standing Committee of the Maine Continuum of Care (MCoC) and the Statewide Homeless Council (SWHC). It was formed in collaboration with several Maine agencies (DHHS, DOE & DOC) and youth serving organizations to address the need for a statewide strategy to meet the needs of youth who are homeless or at risk of homelessness, as well as to advocate for policy change to improve systems of care for those youth. This committee is an action oriented group that collects, organizes, and shares information regarding all homeless youth in Maine. We work to ensure that there is a system of services in place for youth who are identified as homeless or at risk of homelessness that follows best practices and meets federal and state standards of care. We work to improve communication between

provider agencies and coordinate care across the state so that youth have access to shelter, outreach and transitional living services.

This Youth Committee exists to:
   A.   Build awareness of best practices for serving homeless and at risk of homeless youth, and disseminate that information to provider agencies.
   B.   Creating opportunities for youth voice to be present and/or represented in policies and decisions regarding systems, services and programs that directly impact their lives.
   C.   Advocate for policies that improve access to resources for homeless and at risk of homeless youth.
   D.   Create opportunities for coordination of services between state agencies and youth serving organizations.
   E.   To serve as an expert resource on youth homelessness to the MCoC, SWHC and Maine State Agencies.
   F.   Stay abreast of current national initiatives aimed at ending and preventing youth homelessness and advocate on a statewide level for the pursuit of resources to end and prevent youth homelessness in Maine.

Sub-Populations and Advisory Councils- The Sub/ or Target Populations shall form independent Advisory Councils separate from the COC. Advisory Councils will inform and advise the COC Board of Directors, COC, Steering Committee and other committees' population specific advice, recommendations and updates as relevant.

Article 9. Selection Process
   A.   MCOC shall provide information and materials to all committee members to familiarize them with the purpose and responsibilities of the committee.
   B.   Applications, Scoring Templates, and all other relevant materials will be given to the Selection Committee members for review prior to scoring.
   C.   All projects shall be scored using the appropriate approved Scoring Template.
   D.   Ranking of applications will be based on scoring results and adjusted as appropriate to address MCOC and HUD priorities and to maximize potential funding.
   E.   The Selection Committee shall draw up a slate of project applications in ranked order of prioritization to be recommended to MCOC for inclusion in the Application.

Article 10. Appeals Process
   A.   The original decision or action being appealed shall remain in effect throughout the Appeals Process unless or until a Final Decision is reached. Timeframes may be adjusted in order to expedite the CoC Application Process. However, MCOC makes no assurances that an appeal will be resolved within any timeframe other than that outlined below or as prescribed by HUD.
   B.   STEP ONE APPEAL: An appeal must be submitted in writing to the CA within five (5) working days from the date of the decision or action the individual or agency is appealing. The appeal should include the date of the filing of the appeal, the specific decision or action the individual or agency is in disagreement with, suggestions about possible ways to resolve the situation, and must include how the individual or agency can be reached. (Send attention to: Maine Continuum of Care, using CA info as outlined in Appendix 1.)
   C.   Within ten (10) working days, the CA shall convene all available members of the Steering Committee or action to review and respond in writing to the Step One Appeal.
   D.   If the individual or agency is not satisfied with the outcome of the Step One Appeal, the individual or agency may appeal again within five (5) working days from the date the individual or agency received the Step One Decision by filing a written Step Two Appeal to the CA. If there is no Step Two Appeal or if the issues are resolved in Step One, the Step One Decision shall be Final.
   E.   STEP TWO APPEAL: Within ten (10) working days, CA shall convene all available members of the COC Board to review, investigate and respond in writing to the Step Two Appeal.

F. If dissatisfied with the Step Two Decision, the individual or agency may submit a Step Three Appeal to the CA, requesting that the issue be reviewed by an ad-hoc Appeals Committee of the Maine COC. The written Step Three Appeal must be sent within five (5) working days from the date the individual or agency received the Step 2 decision. The Step Two Decision shall be Final.

G. The above steps outline the MCOC Appeals Process. However, in the event the project does not agree with the MCOC decision, the agency may send a complaint / appeal to the MCOC HUD representative.

Article 11. Reallocation Procedure

HUD expects communities to use the reallocation process to ensure that funding for the CoC program remains as competitive as possible. The goals include helping communities progress toward HUD-identified priority areas, ensuring high standards for performance outcomes, and ensuring effective use of limited funding. CoC's are scored overall each year through the CoC Consolidated Application, and this score determines the CoC's competitiveness for renewal and new funding. Part of the score has historically included the CoC's use of the reallocation process.

HUD encourages communities to analyze their portfolio of grants to determine if there is the right mix of housing and services, and whether funding for some projects, in whole or in part, should be reallocated to make resources available for new efforts.

The MCoC is responsible for decisions regarding the reallocation process each year. This includes consideration for voluntary and involuntary reallocations.

Voluntary reallocations are initiated by a renewal project applicant by choice. There are different reasons a renewal project applicant might choose reallocation. An applicant might see a greater need in the community for a different type of project from the one they are currently operating. They might also recognize that a different type of project will better meet HUD's priorities for the CoC program, possibly making the CoC overall more competitive for additional funds for new projects. Or, an applicant may be prompted to consider changes to their project if they scored very low during the most recent CoC renewal competition.

Renewal applicants may voluntarily reallocate their project(s) at any point in time, up to and including during the annual NOFA process. Renewal applicants may choose to voluntarily reallocate funding for their project(s) and instead submit a new application for funding, based upon eligibility outlined in the HUD's NOFA. Based on the score and ranking approved by the CoC, renewal applicants may choose to resubmit their application as a voluntary reallocation (in whole or in part) to a new type of project, according to HUD's final rules published with the NOFA. Any new projects submitted in this way will be re-scored, which may result in a change of rankings for all projects.

Involuntary reallocations include any renewal projects that are entirely eliminated by the CoC, or that have their possible renewal funding reduced by the CoC. The CoC may pursue involuntary reallocation for renewal projects for multiple reasons, such as unspent funds, repeated negative findings during the annual monitoring process, or scoring very low during the recent MCOC renewal competition.

Article 12. Code of Conduct

A. All members of the Maine Continuum of Care have the responsibility for maintaining high standards of honesty, integrity, courtesy, respect, and ethical conduct in all MCOC activities. Members are expected to conduct themselves in a professional and responsible manner while carrying out the business of MCOC and to:
    a. Advocate on behalf of all people experiencing homelessness, or at imminent risk of homelessness, with respect, concern, courtesy, compassion, and responsiveness.
    b. Exercise reasonable care, good faith and due diligence in all MCOC business and act within the boundaries of his or her authority regarding MCOC business.
    c. Carefully prepare for, regularly attend, and actively participate in MCOC meetings, committees, and other assignments.
    d. Accept personal responsibility to be informed of emerging issues and to administer MCOC business with professional competence, fairness, efficiency, and effectiveness.
    e. Approach MCOC activities with a positive attitude and constructively support open communication, cooperation, creativity, dedication, and collaboration.
    f. Respect and value the work done by, and the diversity of, opinions expressed by, other members of MCOC, and our partnering agencies and organizations, and to formally register dissent or disagreement only in an appropriate and professional manner.
B. Members have an obligation to conduct MCOC business within guidelines that prohibit actual, perceived, or potential conflicts of interest and to serve in a manner as to avoid inappropriate personal gain resulting from the performance of MCOC duties.
    a. An actual, perceived, or potential conflict of interest occurs when a Member is in a position to influence a decision that may result in a personal gain for that Member, a relative, or an entity with which the member is associated. Personal gain may result from financial interest, a substantial gift, or any form of special consideration.
    b. MCOC members are expected to identify any conflicts prior to any activities where that would be an issue.
    c. No MCOC member may participate in any decision on any MCOC Application if that member has a direct or indirect interest in any entity that is a party to the application or that has a financial interest in the project.
    d. All members must respect and protect privileged information to which there is access in the course of MCOC duties and may not divulge or profit from the confidential information learned while performing MCOC duties.
C. Any concerns regarding Code of Conduct or Conflict of Interest matters must be brought to the attention of the Steering Committee who will consider all facts and will make a recommend to the full MCOC what further action, if any, should be taken.
D. **Abstention and Recusal Process** If at any time there is a conflict of interest whereby an organization or individual will have a direct interest in the funding, scoring, ranking, or policy decision making, then that organization, representative of the organization or individual will abstain and/or recuse themselves for the process in order to mitigate any perceived conflict of interest. The abstention and/or recusal may be oral or in writing. In addition, the CoC may request an organization, representative of organization or individual to abstain and/or recuse themselves from any activities. The CoC may also elect to develop a subcommittee consisting of members or individuals with no direct interest to make recommendations regarding funding, scoring, ranking, or policy decision.

Article 13. Adoption and Amendment of Governance Document
A. This Governance document shall be adopted and thereafter amended at a regular MCOC meeting by a simple majority (at least 51%) affirmative vote of the members present and eligible to vote.
B. Proposed amendments must be in written form and distributed to the members of the MCOC prior to the presentation and vote.
C. The MCOC can choose to fully revise the governance policy to include an agreed upon change or an Amended Article may be added for insertion into the existing document.

Addendum 1 for MCOC Governance

MCOC business address is:

Maine Continuum of Care (MCOC)
MaineHousing
353 Water Street
Augusta, Maine 04330-4633

MCOC Web Address is:
www.mainehomelessplanning.org

Maine Homeless Management Information System (Maine HMIS)

Policies and Procedures Manual

July 2017

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2   About this Document

In 2004, the Department of Housing and Urban Development (HUD) put forth rules regarding requirements for recipients of HUD related funding and other providers of services for the homeless to collect electronic data on their homeless clients through the Homeless Management Information Systems (HMIS). The State of Maine Homeless Management Information System (Maine HMIS) is a collaborative effort between MaineHousing, the dedicated lead agency, and the Maine Continuum of Care (MCoC). The MCoC has an ongoing role in ensuring the success of Maine's HMIS by giving input into HMIS policy decisions within the parameters established by HUD.

MaineHousing is also part of the New England Regional Homeless Management Information System (NERHMIS). By being a member in NERHMIS the Maine HMIS benefits from shared knowledge of the various New England members.

This manual contains information and procedures related to the Maine HMIS. The purpose of this document is to provide for uniform technical requirements of HMIS, for proper collection of data and maintenance of the database, and to ensure the confidentiality of the information in the database. HMIS Governance Standards (§ 580.31)

The importance of the integrity and security of HMIS cannot be overstated. Given such importance, it is equally important that HMIS is administered and operated under high standards of data quality and security. To strive to meet this objective, this section requires the HMIS Lead to adopt policies and procedures for the operation of its HMIS. These policies and procedures must not only meet HUD standards, but policies and procedures must meet applicable state or local governmental requirements

In addition to the Policies and Procedures listed here, all Maine HMIS Participating Agencies must make themselves knowledgeable of, and adhere to, all of the requirements and directives outlined in the following documents if applicable to their agency:

- The Agency Participation Agreement;
- User Policy and Agreement;
- The Maine HMIS Governance Model;
- The Maine HMIS Data Quality Plan and Best Practices Guide;
- The Maine HMIS Data Sharing Agreements;
- The HUD HMIS Data Standards Manual (https://www.hudexchange.info/resources/documents/HMIS- Data-Standards-Manual-2017.pdf);
- The HMIS Data Dictionary (https://www.hudexchange.info/resources/documents/HMIS-Data-Dictionary-2016.pdf);
- and the HUD 12/09/2011 Proposed Rule of Homeless Management Information Systems Requirements (https://www.federalregister.gov/documents/2011/12/09/2011-31634/homeless-management-information-systems-requirements). Note: The mandates within the Final Rule of the Homeless Management Information System Requirements will need to be in place within six months of the rule being finalized.

Additional resources and information pertaining to Maine HMIS, and the above mentioned documents, can be found at https://mainehmis.org.

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For more information regarding HMIS policies and procedures, please contact HMIShelp@mainehousing.org.

3   Roles and Responsibilities

3.1   Maine Continuum of Care (MCoC)

A CoC is a group composed of representatives from organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, participating agency districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve veterans, and homeless and formerly homeless persons organized to carry out the responsibilities of a Continuum of Care established under 24 CFR part 578.

The MCoC is responsible for ensuring that the HMIS for the CoC is operated in accordance with any current regulations and applicable Federal, state, and local laws and ordinances.

COCs can apply to HUD for McKinney-Vento funding. Local agencies wishing to access these funds must do so through their local CoC's application for funding. HUD requires that every CoC work together to implement a shared data system designed to provide an un-duplicated count of homeless individuals, provide information on the number of people who are homeless, related demographics, and their needs over time. In Maine, this work is accomplished by the MCoC. For additional information and detail please refer to www.mainehomelessplanning.org. This site assists with the year round planning process for the MCoC, the Point in Time Annual Count (PIT), ongoing Data Analysis and Performance Measures, and captures details about the outcomes of Maine's Plan to End and Prevent Homelessness.

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the MCoC must:

(a) Designate a single information system as the official HMIS software for the geographic area. The software must comply with   federal requirements.

(b) Designate an HMIS Lead, which may be itself, to operate the HMIS. The HMIS Lead must be a state or local government, an instrumentality of state or local government, or a private nonprofit organization.

(c) Develop a governance charter, which at a minimum includes:

> (i) A requirement that the HMIS Lead enter into written HMIS Participation Agreements with each Participating Agency requiring the Participating Agency to comply with this part and imposing sanctions for failure to comply;

> (ii) The participation fee charged by the HMIS; and

> (iii) Such additional requirements as may be issued by notice from time to time.

(d) Maintain documentation evidencing compliance with this part and with the governance charter; and

(e) Review, revise and approve the policies and plans (required by this part and by any notices issued from time to time.

MCoC Key responsibilities, as detailed in the Maine HMIS Governance Model include:

- Ensures that activities related to HMIS growth and use are developed, reviewed regularly, and are in accordance with the CoC's goals.
- Identifies general milestones for project management, including training, expanded system functionality, etc.
- Ensures the HMIS generates other client served, utilization summary, and demographic reports both at the system and program levels for purposes of understanding the nature and extent of homelessness in the CoC.
- Regularly monitors the HMIS Lead/Grantee on adherence to the agreement.
- Ensures membership of the HMIS Advisory Council is inclusive of decision makers representing the CoC.
- Ensures that the HMIS is managed in accordance to CoC policies, procedures, and goals.
- Regularly monitors program and agency-level participation in HMIS
- Ensures participation in the NOFA (Notice of Funding Availability), AHAR (Annual Homeless Assessment Report), PIT (Point in Time), and HIC (Housing Inventory Chart).
- Develops and enforces community level data quality plan and standards.
- Ensures the collection of each data variable and corresponding response categories on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating projects.
- Ensures the collection of each data variable and corresponding response categories specific to their program type on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating programs.
- Regularly reviews data quality reports at community planning level on data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- Provides training and regularly reviews the progress of the Community Planning Goals and Objectives.
- Ensures the HMIS Lead has adopted a drug-free workplace policy. The policy is posted and available for review.
- Participation can include but is not limited to Advisory Council leadership, advisory committees, staff positions, and sub-committee positions.
- The HMIS Grantee has adopted a conflict of interest policy for board members, staff, and volunteers.
- The HMIS Grantee has adopted an equal opportunity and non-discrimination policy.

3.1.1   Advisory Council

The Maine HMIS Advisory Council (Advisory Council) is made up of Participating Agencies from the MCoC, and the Lead Agency.

Advisory Council key responsibilities as detailed in the Maine HMIS Governance Model include:

- Ensures that activities related to HMIS growth and use are developed, reviewed regularly, and are in accordance with the CoC's goals;
- Identifies general milestones for project management, including training, expanded system functionality, etc.;

- Ensures a HMIS governance model is developed and formally documented between the HMIS Lead Agency/grantee and the community planning body(ies). Ensures that a formal agreement that outlines management processes, responsibilities, decision-making structures, and oversight of the HMIS projects has been executed;
- Manages and maintains mechanisms for soliciting, collecting, and analyzing feedback from end users, program managers, agency executive directors, and homeless persons. Feedback includes impressions of operational milestones and progress, system functionality, and general HMIS operations. Examples of feedback include satisfaction surveys, questionnaires, and focus groups;
- Ensures that the HMIS is managed in accordance to CoC policies, procedures, and goals;
- Develops and enforces community level data quality plan and standards;
- Ensures the collection of each data variable and corresponding response categories on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating projects;
- Ensures the collection of each data variable and corresponding response categories specific to their program type on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating programs;
- Regularly reviews data quality reports at community planning level on data entry completion, consistency with program model, and timeliness as compared to the community data quality standards;
- Provides training and guidance on business practices to support CoC and HMIS policies (CoC-specific protocols, ethics, strategies for communication, etc.);
- Ensures the existence and use of HMIS Policies and Procedures;
- And ensures at least one homeless person or formerly homeless person participates in policymaking. Participation can include but is not limited to Advisory Council leadership, advisory committees, staff positions, and sub-committee positions.

3.1.2   Data Committee

The MCoC Data Committee (Data Committee) is comprised of Participating Agencies, and the Lead Agency. The Data Committee reviews data analysis, systems mapping, the PIT, and other data-related issues and topics within the MCoC. The Data Committee also oversees the quality of the data that is put into HMIS and is responsible for developing and implementing an ongoing data quality plan.

Key CoC Data Committee responsibilities as detailed in the Maine HMIS Governance Model include;

- Coordinate the resolution of data issues;
- Recommend community level data quality plans and standards;
- Recommends policy and procedures for Maine HMIS as it relates to the data, including software application, data elements to be collected, and intervals for data gathering;
- Consider the effectiveness, and what improvements can be made, to the intake process;
- Work with Participating Agencies to identify training needs to improve data quality;
- Review Participating Agency data quality reports for compliance with the data quality benchmarks;
- And provides regular data quality reports to the CoC Board on the quality of the MCoC's data.

3.2   Lead Agency

HMIS Lead means an entity designated by the CoC to operate the Continuum's HMIS on its behalf.

HUD requires that every CoC work together to implement a shared data system designed to provide an un-duplicated count of homeless individuals, information on the number of people who are homeless, related demographics, and their needs over time. The HMIS Lead works with the Participating Agencies to meet this goal. MaineHousing is the designated Lead Agency.

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

(a)Ensure the operation of and consistent participation by recipients of funds from the Emergency Solutions Grants Program and from the other programs authorized by Title IV of the McKinney-Vento Act. Duties include establishing the HMIS; conducting oversight of the HMIS; and taking corrective action, if needed, to ensure that the HMIS is compliant with the requirements of this part;

(b) Develop written HMIS policies and procedures in accordance with § 580.31 for all Participating Agencies;

(c) Execute a written HMIS Participation Agreement with each PARTICIPATING AGENCY, which includes the obligations and authority of the HMIS Lead and PARTICIPATING AGENCY, the requirements of the security plan with which the PARTICIPATING AGENCY must abide, the requirements of the privacy policy with which the PARTICIPATING AGENCY must abide, the sanctions for violating the HMIS Participation Agreement (e.g., imposing a financial penalty, requiring completion of standardized or specialized training, suspending or revoking user licenses, suspending or revoking system privileges, or pursuing criminal prosecution), and an agreement that the HMIS Lead and the PARTICIPATING AGENCY will process Protected Identifying Information consistent with the agreement. The HMIS Participation Agreement may address other activities to meet local needs;

(d)Serve as the applicant to HUD for grant funds to be used for HMIS activities for the Continuum of Care's geographic area, as directed by the Continuum, and, if selected for an award by HUD, enter into a grant agreement with HUD to carry out the HUD-approved activities;

(e) Monitor and enforce compliance by all Participating Agencies with the requirements of this part and report on compliance to the Continuum of Care and HUD;

(f)The HMIS Lead must submit a security plan (see § 580.35), a data quality plan (see § 580.37), and a privacy policy (see § 580.31(g)) to the Continuum of Care for approval within [the date that is 6 months after the effective date of the final rule to be inserted at final rule stage] and within 6 months after the date that any change is made to the local HMIS. The HMIS Lead must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the Continuum of Care and Participating Agencies. The HMIS Lead must implement the plans and policy within 6 months of the date of approval by the Continuum of Care.

According to the Proposed HMIS Requirements (24 CFR Part 91) only the HMIS Lead may carry out the following activities:

(a) Host and maintain HMIS software or data;

(b) Backup, recovery, and repair of the HMIS software or data;

(c) Upgrade, customize, and enhance the HMIS;

(d) Integrate and warehouse data, including development of a data warehouse for use in aggregating data from subrecipients using multiple software systems;

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(e) System administration;

(f) Report to providers, the Continuum, and HUD;

(g) Conduct training for recipients on the use of the system, including the reasonable cost of travel to the training; and

(h) Such additional activities as may be authorized by HUD in notice.

 Additionally noted in the Proposed HMIS rule;

(a) An HMIS Lead must develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice.

(b) Every organization with access to protected identifying information must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance.

(c) An HMIS Lead or PARTICIPATING AGENCY that contracts with an HMIS vendor must, as part of its contract with an HMIS vendor, require the HMIS vendor and the software to comply with HMIS standards issued by HUD.

The HMIS Lead must implement the plans and policy within 6 months of the date of approval by the Continuum of Care.

Key Lead Agency Responsibilities as detailed in the Maine HMIS Governance Model:

* Ensures that activities related to HMIS growth and use are developed, reviewed regularly, and are in accordance with the CoC's goals.
* Identifies general milestones for project management, including training, expanded system functionality, etc.
* Ensures that the HMIS is able to manage the collection of each data element and corresponding response categories for the Universal Data Elements as outlined in the Current HMIS Data Standard.
* Ensures that the HMIS is able to manage the collection of each data variable and corresponding response categories for the Project-specific data elements as outlined in the Current HMIS Data Standard..
* Ensures the HMIS is able to generate a summary report of the number of unduplicated client records that have been entered into the HMIS.
* Ensures the HMIS is consistently able to produce a reliable required federal reports.
* Ensures the HMIS generates other client served, utilization summary, and demographic reports both at the system and program levels for purposes of understanding the nature and extent of homelessness in the CoC.
* Provides technical expertise commensurate with the general HMIS program oversight; provides timely support on high level technical matters; reviews and authorizes HMIS software changes in response to the changing requirements of participating Agencies; and, generally reviews and authorizes special issues brought to it by participating Agencies.
* Provides technical expertise commensurate with the requirements of the HMIS software and/or system; provides timely support on software technical matters; is responsible for implementation of authorized changes to the HMIS software and processes; and, generally implements resolutions to any special issues authorized by the HMIS Technical Support Entity within the software and/or overall system.

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- Maintains a regularly updated list of HMIS system service requests, activities, deliverables, and resolutions.
- Regularly reviews HMIS System service requests, activities, deliverables and resolutions. Provides authoritative support when necessary to expedite IT issue resolution.
- Maintains a current and accurate organization chart that clearly identifies all team members, roles and responsibilities, and general work activities/functions. Organization chart is available for review (see Appendix B: Organization Chart).
- Provides regular training on software usage, software and data security, and data entry techniques to participating Agencies. Develops, updates, and disseminates data entry tools and training materials, includes train the trainer. Monitors and ensures system and data security.
- Manages and maintains mechanisms for soliciting, collecting, and analyzing feedback from end users, program managers, agency executive directors, and homeless persons. Feedback includes impressions of operational milestones and progress, system functionality, and general HMIS operations. Examples of feedback include satisfaction surveys, questionnaires, and focus groups.
- Responsible for the day-to-day operation and maintains the HMIS System.
- Ensures that the HMIS is managed in accordance to CoC policies, procedures, and goals.
- Regularly monitors program and agency-level participation in HMIS
- Ensures the completion and documentation of Authorization for Disclosure of Health and/or Personal Information, as appropriate with the CoC's Authorization for Disclosure of Health and/or Personal Information Policies and Protocols.
- Ensures adherence by agency staff with the HMIS data and system security protocols as outlined by the CoC and the Current HMIS Data Standard.
- Develops and enforces community level data quality plan and standards.
- Ensures the collection of each data variable and corresponding response categories on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating projects.
- Ensures the collection of each data variable and corresponding response categories specific to their program type on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating programs.
- Regularly runs and disseminates data quality reports to participating programs that indicate levels of data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- Provides technical assistance and training in response to data quality reports disseminated to participating programs that indicate levels of data entry completion, consistency with program model, and timeliness as compared to the community data quality
- Regularly runs and disseminates data quality reports to the community planning entity that indicate cross program levels of data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- Regularly reviews data quality reports at community planning level on data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- Provides regular training on client confidentiality and privacy requirements to intake staff, data entry staff and reporting staff at participating Agencies. Ensures all Agencies have sufficient privacy policies and protocols in place.

- Provides regular training and guidance on program performance measurement.
- Provides training and regularly reviews the progress of the Community Planning Goals and Objectives.
- Provides training and guidance on business practices to support CoC and HMIS policies (CoC-specific protocols, ethics, strategies for communication, etc.).
- Maintains documentation of the number of participating Agencies (utilizing the HMIS system) is up-to-date. A comparative analysis of planned versus actual deployments at the project level is highly desired but not compulsory.
- Provides regular reports on HMIS participation rates to CoC Data Subcommittee. An analysis of agency-specific barriers with potential solutions is highly desired but not compulsory.
- Ensures the existence and use of HMIS Policies and Procedures.
- Ensures and maintains written agreements with participating Agencies that describes the protocols for participation in the HMIS.
- Ensures and maintains written agreements with participating Agencies who share client level data that describes the level of data element or program information sharing among the data sharing HMIS Agencies.
- Ensures and maintains a written agreement with each authorized user of the HMIS that defines participation protocols, including training criteria, consent protocols, system use, and privacy and security standards.
- Ensures that the CoC has a defined and documented client Acknowledgement protocol for use as a baseline practice among all participating HMIS users.
- Ensures that the CoC has a defined and documented HMIS data release protocol that governs release of all data from the HMIS.
- Ensures At least one homeless person or formerly homeless person participates in policymaking. Participation can include but is not limited to Advisory Council leadership, advisory committees, staff positions, and sub-committee positions.

3.3 PARTICIPATING AGENCY

Participating Agencies are responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission, and destruction of data and the maintenance privacy, security, and confidentiality protections are in place for their individual programs and projects. A Participating Agency will include both an Agency Admin and End Users.

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

(a)Purchase, lease, or license computer hardware and software;

(b)Purchase or lease equipment, including telephones, faxes, and furniture;

(c)Pay for technical support;

(d)Lease office space;

(e)Pay for electricity, gas, water, phone service, and high-speed data transmission costs necessary to operate and participate in the HMIS;

(f)Pay salaries for operating HMIS,

which includes:

> (i)Data entry;
>
> (ii)Monitor and review data quality;
>
> (iii)Data analysis;
>
> (iv)Report to the HMIS Lead;
>
> (v)Attend HUD-sponsored and HUD- approved training on HMIS and programs authorized by Title IV of the McKinney-Vento Act;
>
> (vi)Conduct training for PARTICIPATING AGENCYs on the HMIS or comparable database;
>
> (vii)Travel to conduct intake and to attend training;
>
> (viii)Implement and comply with HMIS requirements; and

(g)Pay the participation fee to the HMIS Lead that is established by the Continuum of Care in the governance

(h)If the PARTICIPATING AGENCY is a victim services provider, as defined under 24 CFR 580.3, or a legal services provider, establish and operate a comparable database that complies with 24 CFR 580.25; and

(i)Such other activities as authorized by HUD in notice.

Key Participating Agency Responsibilities as detailed in the Maine HMIS Governance Model:

- Ensures the completion and documentation of Authorization for Disclosure of Health and/or Personal Information, as appropriate with the CoC's Authorization for Disclosure of Health and/or Personal Information Policies and Protocols.
- Ensures adherence by agency staff with the HMIS data and system security protocols as outlined by the CoC and the Current HMIS Data Standard.
- Ensures the collection of each data variable and corresponding response categories on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating projects.
- Ensures the collection of each data variable and corresponding response categories specific to their program type on all clients served by HUD, other federally funded partners, the State of ME, and non-funded participating programs.
- Regularly runs and disseminates data quality reports to participating programs that indicate levels of data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- Provides regular training on client confidentiality and privacy requirements to intake staff, data entry staff and reporting staff at participating Agencies. Ensures all Agencies have sufficient privacy policies and protocols in place.

- Ensures and maintains a written agreement with each authorized user of the HMIS that defines participation protocols, including training criteria, consent protocols, system use, and privacy and security standards.
- Ensures that the CoC has a defined and documented client Acknowledgement protocol for use as a baseline practice among all participating HMIS users.
- Ensures that the CoC has a defined and documented HMIS data release protocol that governs release of all data from the HMIS.

4 The Maine HMIS Participation Policy

4.1 Participation Requirements

Participation in HMIS. The recipient must ensure that data on all persons served and all activities assisted under ESG are entered into the applicable HMIS for the geographic area in which those persons and activities are located, or a comparable database, as provided under 24 CFR part 580. The entry, storage, and use of this data are subject to the HMIS requirements at 24 CFR part 580.

4.1.1 Mandated Participation

All designated agencies that are funded to provide homeless services by MaineHousing, State of Maine Department of Health and Human Services (DHHS), Office of Child and Family Services (OFCS), Runaway and Homeless Youth (RHY), Projects for Assistance in Transition from Homelessness (PATH), Supportive Services for Veteran Families (SSVF), Veterans Affairs Supportive Housing (VASH) and/or HUD in the State of Maine, must meet the minimum Maine HMIS participation standards as defined by this Policy and Procedures Manual. The proposed HUD Rule found at 24 CFR Parts 91, detailing HMIS Requirements states; "With respect to scope, this rule clarifies that all recipients of financial assistance under the Continuum of Care program, the Emergency Solutions Grant program, the Rural Housing Stability Assistance (RHS) program, as well as HUD programs previously funded under the McKinney-Vento Act (the Supportive Housing Program, the Shelter Plus Care program, and the Section 8 Single Room Occupancy Moderate Rehabilitation program) are required to use HMIS to collect client- level data on persons served." Or for *victims service providers* a comparable database is to be used. A comparable database must have the ability to collect client-level data over time and generates unduplicated aggregate reports based on the data.

4.1.2 Voluntary Participation

While the MCoC cannot require non-funded providers to participate in the Maine HMIS, and the MCoC works closely with non-funded agencies to articulate the benefits of HMIS, and to strongly encourage their participation. Full participation in Maine HMIS ensures a comprehensive and accurate understanding of homelessness in the State of Maine. Non-funded agencies may voluntarily agree to participate but will need to meet minimum participation standards.

4.2 Participating Agency Standards

Participating Agencies are responsible for ensuring that a minimum set of data elements, referred to as the HUD Universal Data Elements (UDEs) as defined by the most current *HUD HMIS Data Standards Manual*, are collected and/or verified from all clients at their initial program enrollment, or as soon as possible thereafter (with the exception of those serving domestic violence victims). Participating Agencies must report client-level detail in the *"Required Response Categories"* for the UDE's that are shown in the most current *HUD HMIS Data Standards Manual.*

HUD Universal Data Elements		
Name	Social Security Number	Date of Birth
Race	Ethnicity	Gender
Veteran Status	Disabling Condition	Project Start Date
Project End Date	Destination	Relationship to Head of Household
Client Location	Housing Move-In Date	Living Situation

A separate set of Program-Specific Data Elements for client level data are required for all programs funded by State or Federal programs, including but not limited to SSVF, VASH, OFCS, DHHS, PATH, RHY, and ESHAP. These elements are defined by the most current HUD *HMIS Data Standards Manual* and are collected from all clients that are served by applicable HUD-funded programs.

HUD APR Program-Specific Data Elements	
Income and Sources	Substance Abuse
Non-Cash Benefits	Domestic Violence
Physical Disability	Services Received
Developmental Disability	Destination
HIV / AIDS	Reason for leaving
Mental Health	Substance Abuse

These standards are already incorporated into the Maine HMIS, and can be accessed from the Maine HMIS website at: http://mainethe HMIS.org/. Data entry must be completed within a specific timeframe, depending on the type of program (see the attached Maine Data Quality Plan and Best Practices Guide). The Maine HMIS uses all submitted data for analytic and administrative purposes, including the preparation of all Federal and State required reports.

4.2.1   Authorized Agency Users/ End Users
- Authorized Agency Users, also referred to as End Users, must enter client-level data directly into the HMIS database. End Users have rights to access data for clients served by their Agency and use the HMIS functionality based on their user level privileges. The Agency's data is stored in the HMIS central database server, which is protected by several levels of security to prevent access from unauthorized users.
- An End User has an active license to HMIS and uses ServicePoint as their primary tool for client intake, and reporting. An End User is expected to do the following;
- Adhere to all of the policy and procedures outlined in the Maine HMIS Policies & Procedures;
- At intake, gather the most complete and accurate information about each client and the services they need according to the workflow provided at HMIS training;
- **Enter quality client data into HMIS in a timely and accurate manner and using the appropriate required work flow**;

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- Adhere to the data requirements set by the HMIS staff and the HMIS Participating Agency;
- After HMIS training, pass the certification test with a score of 80% or better.
- Meet and follow the expectations of the Agency Admins.
- An End User has an active license to HMIS and uses ServicePoint as their primary tool for client intake, and reporting. An End User is expected to do the following;
- Regularly reviews data quality reports at community planning level on data entry completion, consistency with program model, and timeliness as compared to the community data quality standards.
- At intake, gather the most complete and accurate information about each client and the services they need according to the workflow provided at HMIS training;
- Enter quality client data into HMIS in a timely and accurate manner and using the appropriate required work flow;
- After HMIS training, pass the certification test with a score of 80% or better;
- Meet and follow the expectations of the Agency Admins;
- And adhere to all of the policy and procedures outlined in the Maine HMIS Policies & Procedures.

4.2.2   Agency Administrator

Each Agency must designate at least one Agency Administrator (Agency Admin) who is the point person and specialist regarding the Maine HMIS for their agency. Some of the key roles of the Agency Admin are;

- Running HUD Universal Data Elements, Data Incongruities Reports, and other data quality reports in ART at least monthly and upon request of the Maine HMIS staff and/or the CoCs to check client data.
- Completing the Agency Administrator training.
- Informing the Maine HMIS Staff of all program changes at least 5 business days prior to the change.
- Communicate and authorize personnel and security changes for End Users to the Maine HMIS Staff within 24 hours of a change; inactivating end users account when an End User leaves the agency
- Ensure that end-users are using the correct HMIS-related forms and are following the most current Maine HMIS procedures and work flow.
- Correct any data quality issues as soon as possible and notify the HMIS Staff of findings and timelines for correction.
- Provide technical support by troubleshooting data and escalating unresolved issues to the Maine HMIS Staff.
- Review and update HIC information in the HMIS annually
- Attend the Maine HMIS-required meetings and conference calls.
- Adhere to all of the policy and procedures outlined in the Maine HMIS Policies & Procedures

Each Agency must designate at least one Agency Administrator (Agency Admin) who is the point person and specialist regarding the Maine HMIS. The Agency Administrator is responsible for:

- Completing the Agency Administrator training.
- Informing the Maine HMIS Staff of all program changes at least 5 business days prior to the change.

- Running HUD Universal Data Elements, Data Incongruities Reports, and other data quality reports in ART at least monthly and upon request of the Maine HMIS staff and/or the CoCs to check client data.
- Correct any data quality issues as soon as possible and notify the HMIS Staff of findings and timelines for correction.
- Provide technical support by troubleshooting data and escalating unresolved issues to the Maine HMIS Staff.
- Review and update HIC information in the HMIS annually.
- Communicate and authorize personnel and security changes for End Users to the Maine HMIS Staff within 24 hours of a change. Inactivating end users account when an End User leaves the agency;
- Ensure that end-users are using the correct HMIS-related forms and are following the most current Maine HMIS procedures and work flow.
- Attend the Maine HMIS-required meetings and conference calls.
- Resetting End Users accounts when they are locked out.

5   Hardware, Connectivity and Computer Security Requirements

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

6   Technical Standards

§ 580.33   HMIS technical standards.

(a)In general. HMIS Leads and HMIS vendors are jointly responsible for ensuring compliance with the technical standards applicable to HMIS, as provided in this document and any supplemental notices, and for addressing any identified system or operating deficiencies promptly. Grant funds must be used only for software that meets the requirements of this part.

(b)Required functionality. The HMIS must meet all required functionality established by HUD in notice.

(c)Un-duplication requirements. An HMIS must be capable of un-duplicating client records as established by HUD in notice.

(d)Data collection requirements.

> (i) Collection of all data elements. An HMIS must contain fields for collection of all data elements established by HUD in notice. For fields that contain response categories, the response categories in the HMIS must either directly match or map to the response categories defined by HUD.

(ii) Maintaining historical data. An HMIS must be able to record data from a theoretically limitless number of service transactions and historical observations for data analysis over time and assessment of client outcomes, while following Federal, state, territorial, or local data retention laws and ordinances.

(e)Reporting requirements.

(i) Standard HUD reports. An HMIS must be able to generate the report outputs specified by HUD. The reporting feature must be able to represent dates in the past for all historical and transactional data elements.

(ii)Data quality reports. An HMIS must be capable of producing reports that enable the PARTICIPATING AGENCYs and the HMIS Lead to assess compliance with local data quality benchmarks and any HUD-established data quality benchmarks.

(iii)Audit reports. An HMIS must be capable of generating audit reports to allow the HMIS Lead to review the audit logs on demand, including minimum data requirements established by HUD in notice.

6.1　Workstation Specifications

6.1.1　Monitor
Screen Display - 1024 x 768 (XGA)

6.1.2　Processor
A Dual-Core processor is recommended. Avoid machines with single core processors, which are usually much older computers.

6.1.3　Browser
ServicePoint is designed to be compatible with the newest versions of Google Chrome, Mozilla Firefox, and Apple Safari

Browser Performance: In the context of ServicePoint 5, there are three factors that outweigh all others: data transfer efficiency, memory management, and machine speed.

6.1.4　Memory Management
Some browsers handle memory differently than others. The best practice for determining the best browser is to see if you experience any of the following issues.

Effects of poor memory management:

Your overall system performance may degrade.

Your browser may suddenly seem to completely stop working. Blank pages may appear or certain page components won't work.

Your browser may run more and more slowly.

What to do:

If you suspect that you may have poor browser memory management, try updating your browser to a more recent version before switching to a different brand of browser. More than likely, any major issue will have been fixed with a more current release. If you still have issues, try switching to one of the other 3 major browsers. If you need help updating your browser, contact your IT Department.

6.1.5   Machine Speed

Avoid machines with single core processors, which are usually much older computers. If your computer is a single-core machine operating at less than 2 GHZ, and you are not content with its performance:

Switch to one of the fastest browsers. Chrome is recommended, Firefox is a good alternate; Internet Explorer versions 8, 9 and 10 are acceptable (see below for information regarding Internet Explorer version 11).

Run no unnecessary programs while using ServicePoint.

Monitor your CPU usage in Task Manager. If it is frequently   at 100%, you need a more capable machine.

Think about getting more RAM. But before you buy enough RAM to max out your computer, consider replacing your old computer with a new or used dual-core machine. Even an old dual core tends to outperform a fully- upgraded, single-core in ServicePoint 5. Buying a used computer may actually cost less than buying a gigabyte or two of obsolete RAM for an older machine.

6.1.6   Art Users

ART only supports Java 7 release 7 (32 bit). Any higher versions of Java are not currently supported. We do not recommend the 64 bit version of Java because Chrome is a 32 bit only browser and the 64 bit version of Java does not function in Chrome.

6.1.7   Internet Connectivity

Participating Program must have Internet connectivity for each workstation accessing the HMIS. To optimize performance, all agencies are encouraged to secure a high speed Internet connection with a cable modem, DSL, FiOS, or T1 line.

6.1.8   Security Hardware/Software

All workstations accessing the HMIS need to be protected by a Firewall. If the workstations are part of an Agency computer network, the Firewall may be installed at a point between the network and the Internet or other systems rather than at each workstation. Each workstation also needs to have anti-virus and anti-spyware programs in use and properly maintained with automatic installation of all critical software updates.

Good examples of anti-virus software include McAfee and Symantec (Norton) Security systems, among others.

6.1.9   Agency Workstation Access Control

Access to the HMIS will be allowed only from computers specifically identified by the Participating Agency's Executive Director or authorized designee and THE HMIS Agency Administrator. Laptop computers will require an additional security statement indicating that they will not be used for unauthorized purposes from unauthorized locations. Access to these workstations will be controlled through both physical security measures and a password. Each Agency's THE HMIS Agency Administrator will determine the physical access controls appropriate for their organizational setting based on THE HMIS security policies, standards and guidelines.

Each workstation, including laptops used off-site, should have appropriate and current firewall, and virus protection as specified above, see *Section 5 (c) Security Hardware/Software*. Devices must only access secured, password- protected wi-fi with non-public access.

6.1.9.1 Access to Maine HMIS ServicePoint from an authorized Home Office

MaineHousing and other participants in the Maine HMIS who have written and enforced work-at-home policies may authorize home office locations as authorized agency location for Maine HMIS ServicePoint use given the home office location is structured to assure that viewing of client information by unauthorized persons does not happen. A signed copy of work at home authorization and the related work at home policy should be on file at the MaineHousing HMIS office for anyone who works with ServicePoint from a home office setting.

7 The Maine HMIS Training Requirements

7.1 Eligible Users
Each Participating Agency shall authorize use of the HMIS only to users who need access to the system for data entry, editing of client records, viewing of client records, report writing, administration or other **essential** activity associated with carrying out Participant Agency responsibilities.

7.1.1 Setting up a New HMIS End User
It is the responsibility of the Agency Administrator to contact the HMIS Staff when a new user starts and training is required.

The agency will email A "New User Agreement" to the HMIS HelpDesk at the HMIShelp@mainehousing.org, requesting access to THE HMIS/ServicesPoint. The HelpDesk will acknowledge receiving the "New User Agreement" that can be found here https://mainethe HMIS.org/new_user_training/.

7.1.1.1 New End User Training Requirements
All Agency Admins and End Users will be trained, either in person, or using the online training center. After training, users will be required to pass the Maine HMIS certification test. When the Maine HMIS verify the user has passed the test (with a grade of 80% or above), they will be given a password so they can access ServicePoint.

The HMIS Lead Agency shall authorize use of the HMIS only to users who need access to the system for technical administration of the system, report writing, data analysis and report generation, back-up administration or other essential activity associated with carrying out central server responsibilities.

The HMIS HelpDesk will assist in creating a Canvas account. Canvas is the platform HMIS will be using for online new user and program specific trainings found at https://canvas.instructure.com/. Agencies should be aware that Canvas emails may be filtered to spam or junk folders. Canvas will notify the HelpDesk and new user once training modules have been completed.

Once new user and program specific training has been completed the HelpDesk will create the new user's account in the HMIS and contact the new user to set up a time to review training that has been completed along with account credentials.

Each end user of the HMIS system must complete at least one session of training and pass the certification test with a grade of 80% above before being given THE HMIS login credentials.

7.2   Agency Administrator Training

After completing End-User training, each new Agency Administrator must complete an additional Admin training session. This session will include how to configure and manage an Agency's programs and users in the HMIS. Agency Administrators will participate in subsequent training sessions as designated by the Maine THE HMIS Lead Agency, such as running the CoC APR, AHAR, HIC, CAPER and/or other project reports.

7.3   Reports Training

Reports training for Agency Administrators and other interested users will be made available as needed. This training will include how to use existing canned reports in ServicePoint and may include opportunities for training on the Advanced Reporting Tool (ART).

Maine THE HMIS staff strongly encourages Participating Agencies to run their own data quality reports and APR report monthly so that Participating Agencies can monitor their own data quality and become more effective in serving clients across the Continuum.

7.3.1   Agency Admins & End User Requirements

Prior to being trained and granted a username and password, users must sign the HMIS User Policy Agreement. This agreement acknowledges receipt of a copy of as well as a pledge to comply with the Agency's Privacy Notice.

Agency Admins and End Users must be aware of the sensitivity of client-level data and must take appropriate measures to prevent its unauthorized disclosure. Administrators and End Users are responsible for protecting institutional information to which they have access and for reporting security violations.

Agency Admins and End Users must comply with all policies and standards described in the following documents:

- The Agency Participation Agreement;
- User Policy and Agreement;
- The Maine HMIS Governance Model;
- The Maine HMIS Data Quality Plan and Best Practices Guide;
- HUD HMIS Data Standards Manual
- and the Data Sharing Agreements;

Users are accountable for their actions and for any actions undertaken with their username and password.

Agency Admins must ensure that users have received adequate training prior to being given access to the HMIS database. If any user leaves the Agency or no longer needs access to the HMIS, the Agency Administrator is responsible for ***immediately notifying the HMIS Team*** *at* ***HMIShelp@mainehousing.org*** so that the user's access can be terminated.

Volunteers have the same user requirements as paid staff. They must have an individual user account, go through the same training, and have the same confidentiality and privacy documents signed and on file with the Participating Agency they are serving.

The Executive Director or authorized designee is responsible for ensuring that the Agency Admin and End Users understands and comply with all applicable THE HMIS policies and procedures.

7.3.2 User Licenses

User licenses are provided to Participant Agencies as determined by the Lead Agency.

8 THE HMIS Agency Implementation

8.1.1 Setting up a New HMIS Agency

If your agency would like to participate in the Maine HMIS, the Agency Participation Agreement is the first form you will need to complete. The agreement covers the areas of: terms of use, training and technical assistance, confidentiality, security, and access to data. This agreement should be signed by an official who is authorized to enter into contractual agreements on your agency's behalf.

After your agency has agreed to participate in Maine HMIS you will need to complete the Agency Information Form. This form tells us about the types of housing and services that your agency provides. This will assist the Maine HMIS administrators when configuring your agency in HMIS.

Your agency will also need to complete a Maine Annual Homeless Housing Inventory Form. It will be pre-filled with the information currently on record regarding projects who are already on the Housing Inventory.

Once your agency is set up in HMIS All users must read, acknowledge and sign the HMIS/ServicePoint User Policy, Responsibilities Statement, and Code of Ethics before they are allowed access to the HMIS system. This form was updated on 11/23/2009 to clarify the signature lines. The form was updated again on 7/15/2010 to clarify which program type(s) the user needs to be trained for data entry and reporting.

It is recommended that agencies retain a copy of this Maine HMIS Policies and Procedures Manual for reference.

Agencies that share client level data between or among multiple agencies must fill out and submit a Maine HMIS Coordinated Services Agreement.

Agencies must additionally complete a Qualified Organization Business Associate Agreement (HIPPA) to share information entered into Maine Statewide Homeless Management Information System (Maine HMIS) for the general purpose of managing the System. MaineHousing provides training, administration, coordination, and report generation to agencies, programs and Continuum of Care participating in Maine Statewide Homeless Management Information System. Acknowledges that in transmitting, receiving, storing, processing or otherwise dealing with any consumer protected information, they are fully bound by state and federal regulations governing confidentiality of patient records, including the Federal Law of Confidentiality for Alcohol and Drug Abuse Patients, (42 CFR, Part 2) and the Health Insurance Portability and Accountability Act of 1996 ('HIPAA', 45 CFR, Parts 160 & 164), and cannot use or disclose the information except as permitted or required by this agreement or by law.

The Agency Admin must verify that appropriate and sufficient training has been successfully completed

8.2   Enforcement Mechanisms

The Lead Agency will investigate all potential violations of any security protocols. Any Agency Admin or End User found to be in violation of security protocols will be sanctioned.

Sanctions may include, but are not limited to:

- A formal letter of reprimand to the MaineHousing Security Compliance Auditor, CoC Board, and the Agency Executive Director
- Suspension or Revocation of Agency Access if serious or repeated violation(s) of Maine HMIS Policies and Procedures occur by Agency Admins and/or End Users.

Prior to setting up a new Participant Agency within the Maine HMIS database, the Maine HMIS Lead Agency will:

Verify that the required documentation has been correctly executed and submitted or viewed on site, including:

- Agency Participation Agreement
- Admin Agency/Program Configuration/ HIC Worksheet
- Maine HMIS Policies and Procedures Manual
- Maine HMIS Governance Model document

Request and receive approval from the HMIS Lead Agency to set up a new Agency.

Work with the Agency Administrator to input applicable Agency and program information.

Work with the HMIS Lead to migrate legacy data, if applicable, and within the scope of normal HMIS functions. Data needing additional HMIS or third party vendor intervention will be addressed on a case-by-case basis.

Follow the HMIS naming conventions (Agency name: Project).

When completing your COC Application budget for a new project, keep in mind that funds may be needed to cover increased HMIS costs to cover HMIS-related tasks and staffing for stability of HMIS operations.

8.3   Agency Information Security Protocol Requirements

At a minimum, Participating Agencies must develop rules, protocols or procedures to address the following:

- Policies in the event of a HIPPA breach*
- Internal Agency procedures for complying with the HMIS confidentially requirements and provisions of other HMIS client and Agency agreements
- Posting a sign in the areas of client intake that explains generally the reasons
- for collecting personal information
- Appropriate assignment of user accounts
- Preventing user account sharing
- Protection of unattended workstations
- Protection of physical access to workstations where employees are accessing the HMIS

- Safe storage and protected access to hardcopy and digitally generated client records and reports with identifiable client information
- Proper cleansing of equipment prior to transfer or disposal (i.e. disk shredding)
- Procedures for regularly auditing compliance with the Participating Agency's information security protocol

NOTE: If an Agency is not in compliance with this policy, they risk losing funding.

8.4   User Access Levels

All the HMIS users must be assigned a designated user access level that controls the level and type of access the user will have within the system. Each user will only have access to client-level data that is collected by their own Agency unless they participate in Data Sharing groups.

8.5   Security Standards

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

580.35   HMIS security standards.

(a) In general. Security standards, as provided in this section, are directed to ensure the confidentiality, integrity, and availability of all HMIS information; protect against any reasonably anticipated threats or hazards to security; and ensure compliance by end users. Written policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements.

(b) System applicability. All HMIS Leads, PARTICIPATING AGENCYs, and HMIS vendors must follow the security standards established by HUD in notice.

(c) Security management.

(i) Security plan. All HMIS Leads must develop a HMIS security plan, which meets the minimum requirements for a security plan as established by HUD in notice, and which must be approved by the Continuum of Care.

(ii) Timeline for implementation. The HMIS Lead must submit the security plan to the Continuum of Care for approval within 6 months of [effective date of final rule to be inserted at final rule stage]. The HMIS Lead and PARTICIPATING AGENCYs must implement all administrative, physical, and technical safeguards within 6 months of the initial approval of the security plan. If one or more of these standards cannot be implemented, the HMIS Lead must justify the implementation delay and produce a plan of action for mitigating the shortfall, and develop milestones to eliminate the shortfall over time.

(d) Administrative safeguards. The administrative actions, policies, and procedures required to manage the selection, development, implementation, and maintenance of security measures to protect HMIS information must, at a minimum, meet the following:

(e) Security officer. Each HMIS Lead and each PARTICIPATING AGENCY must designate an HMIS security officer to be responsible for ensuring compliance with applicable security standards. The HMIS Lead must designate one staff member as the HMIS security officer.

(f)Workforce security. The HMIS Lead must ensure that each PARTICIPATING AGENCY conduct criminal background checks on the HMIS security officer and on all administrative users. Unless otherwise required by HUD, background checks may be conducted only once for administrative users.

(g)Security awareness training and follow-up. The HMIS Lead must ensure that all users receive security training prior to being given access to the HMIS, and that the training curriculum reflects the policies of the Continuum of Care and the requirements of this part. HMIS security training is required at least annually.

(h)Reporting security incidents. Each HMIS Lead must implement a policy and chain of communication for reporting and responding to security incidents, including a HUD-determined predefined threshold when reporting is mandatory, as established by HUD in notice.

(i)Disaster recovery plan. The HMIS Lead must develop a disaster recovery plan, which must include at a minimum, protocols for communication with staff, the Continuum of Care, and PARTICIPATING AGENCYs and other requirements established by HUD in notice.

(j)Annual security review. Each HMIS Lead must complete an annual security review to ensure the implementation of the security requirements for itself and PARTICIPATING AGENCYs. This security review must include completion of a security checklist ensuring that each of the security standards is implemented in accordance with the HMIS security plan.

(k)Contracts and other arrangements. The HMIS Lead must retain copies of all contracts and agreements executed as part of the administration and management of the HMIS or required to comply with the requirements of this part.

(l)Physical safeguards. The HMIS Lead must implement physical measures, policies, and procedures to protect the HMIS.

(m)Technical safeguards. The HMIS Lead must implement security standards establishing the technology that protects and controls access to protected electronic HMIS information, and outline the policy and procedures for its use.

8.6   Data Quality Standards

§ 580.37 Data quality standards and management.

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

(a)In general. The data quality standards ensure the completeness, accuracy, and consistency of the data in the HMIS. The Continuum of Care is responsible for the quality of the data produced.

(b)Definitions. For the purpose of this section, the term:

(i)HMIS participating bed means a bed on which required information is collected in an HMIS and is disclosed at least once annually to the HMIS Lead in accordance with the requirements of this part.

(ii)Lodging project means a project that provides overnight accommodations.

(iii)Nonlodging project means a project that does not provide overnight accommodations.

(c)Data quality benchmarks. HMIS Leads must set data quality benchmarks for PARTICIPATING AGENCYs. Benchmarks must include separate benchmarks for lodging and nonlodging projects. HMIS Leads must establish data quality benchmarks, including minimum bed coverage rates and service-volume coverage rates, for the Continuum(s) of Care. HMIS Leads may establish different benchmarks for different types of projects (e.g., emergency shelter projects, permanent housing projects) based on population.

> (i)For the purpose of data quality, the bed coverage rate measures the level of lodging project providers' participation in a Continuum of Care's HMIS.

> (ii)The bed coverage rate is calculated by dividing the number of HMIS participating by the total number of year-round beds in the geographic area covered by the Continuum of Care.

> (iii) Bed coverage rates must be calculated separately for emergency shelter, safe haven, transitional housing, and permanent housing.

> (iv)Bed coverage rates must be calculated for each comparable database.

(d)For the purpose of data quality, the service-volume coverage rate measures the level of nonlodging project participation in a Continuum of Care's HMIS.

> (i)Service-volume coverage is calculated for each HUD-defined category of dedicated homeless nonlodging projects, such as street outreach projects, based on population.

> (ii)The service-volume coverage rate is equal to the number of persons served annually by the projects that participate in the HMIS divided by the number of persons served annually by all Continuum of Care projects within the HUD-defined category.

> (iii)Service-volume rates must be calculated for each comparable database.

(e)Data quality management. (1) Data quality plan. All HMIS Leads must develop and implement a data quality plan, as established by HUD in notice.

(f)The HMIS must be capable of producing reports required by HUD to assist HMIS Leads in monitoring data quality.

8.7   Maintaining and Archiving

To be in compliance with the Proposed HMIS Requirements (24 CFR Part 91) the HMIS Lead shall:

580.41   Maintaining and archiving data.

(a)Maintaining data. Applicable program regulations establish the length of time that records must be maintained for inspection and monitoring to determine that the recipient has met the requirements of the program regulations.

(b)Archiving data. Archiving data means the removal of data from an active transactional database for storage in another database for historical, analytical, and reporting purposes. The HMIS Lead must follow archiving data standards established by HUD in notice, as well as any applicable Federal, state, territorial, local, or data retention laws or ordinances.

9 HMIS Client Data Policies and Procedures

9.1 Client Notification Policies and Procedures

The Maine HMIS has prepared standard documents for the HMIS release of information Maine HMIS Authorization for Disclosure of Health/ and or Personal Information. All written consent forms must be stored in a client's file for record keeping and auditing purposes. Forms are located on the HMIS website http://maineHMIS.org/

By participating in the Maine HMIS, agencies and users agree to high standards of confidentiality and to seek explicit authority and permission from clients for release of any identifiable client information.

The client has the right to have access to their own data.

A Release of Information form must be signed by a client (even to low-barrier shelters) before any protected personal information can be shared.

Written interagency data sharing agreements (if any) between particular agencies (i.e., Memoranda of Agreement) will have to be in place and on file at MaineHousing prior to sharing of information within Maine HMIS ServicePoint across agencies.

All agencies participating in HMIS will be required to follow all current data security practices detailed in this document, and adhere to ethical data use standards, regardless of the location where agency users connect to the HMIS.

The client will have access to view, or keep a printed copy of, his or her own records contained in the HMIS.

The participating agencies and MaineHousing reserve the right, granted under federal and state statutes, to charge a fee to cover reasonable costs for the retrieval and printing of such client information.

A privacy notice shall be prominently displayed in the program offices where intake occurs. The content of this privacy notice shall be in accordance with the HMIS Privacy Standards in: Federal Register / Vol. 69, No. 146 / Friday, July 30, 2004 and any other applicable standards

9.2 Accountability for the Maine HMIS Policy

Participating Agencies must establish a regular process of training users on the Maine HMIS policies and procedures outlined in this manual, regularly auditing that the policy is being followed by Agency staff (including employees, volunteers, affiliates, contractors and associates), and receiving and reviewing complaints about potential violations of the policy.

9.3 HMIS Data Quality Policies and Procedures

The Maine HMIS has prepared the following data quality document that outlines the data quality policies and procedures, Maine Data Quality Plan and Best Practices Guide this document is available at www.mainehmis.org.

10 THE HMIS Data Access Control Policies

10.1 User Accounts

Agency Administrators are responsible for managing user accounts for their Agency. They must follow the procedures documented in *Section 6,* for user account set-up including verification of eligibility, the appropriate training, and the establishment of appropriate user type. The assigned user type will determine each user's individual access level to data, and Agency Administrators must regularly review user access privileges.

The Agency Administrator is responsible for inactivating users in the system. They should inactivate the user immediately upon that user's departure from any position with access to the HMIS. Agency Administrators are required to notify the HMIS team immediately upon inactivation.

10.2 User Passwords

Each user will be assigned a unique identification code (User ID), preferably the first initial and last name of the user.

A temporary password will be automatically generated by the system when a new user is created. The Maine HMIS Lead Agency will communicate the system-generated password to the user. The user will be required to establish a new password upon their initial login. This password will need to be changed every 45 days. A password cannot be used again until another password has expired. Passwords should be between 8 and 50 characters long, contain at least two numbers, and should not be easily guessed or found in a dictionary. The password format is alphanumeric and is case-sensitive. Users are prohibited from sharing passwords, even with supervisors.

10.3 Password Reset

Except when prompted by ServicePoint to change an expired password, users cannot reset their own password. The Agency Administrator and the Maine HMIS Lead Agency have the ability to temporarily reset a password. If an Agency Administrator needs to have his/her password set, they will need to email the HMIS Lead at HMIShelp@mainehousing.org.

10.4 System Inactivity

Users must log off from the HMIS application and their workstation if they leave their workstation. Also, HUD requires password-protected screen-savers on each workstation. If the user is logged onto a workstation and the period of inactivity on that workstation exceeds 30 minutes, the user will be logged off the system automatically.

10.5 Unsuccessful Login

If a user unsuccessfully attempts to log in three times, the User ID will be "locked out", their access permission will be revoked. They will be unable to regain access until their User ID is reactivated by the Agency Administrator or Maine HMIS Lead Agency. They will need to email the HMIS Lead at HMIShelp@mainehousing.org.

11 THE HMIS Data Ownership Policies

The client has the right to view and have corrections made on their own data. In the event that the relationship between the Maine HMIS and a Participating Agency is terminated, Participating Agency access is terminated. If another program is assuming the program administration then the data migrates to the new program (fees may apply).

11.1 The HMIS Data Use and Disclosure Policies and Procedures
Each of the HMIS Participating Programs must comply with uses and disclosure standards, as outlined in the *HUD HMIS Data Standards Manual.* The most current HUD data standards document can be found on the Maine HMIS website http://mainethe HMIS.org/

11.2 The HMIS Data Release Policies and Procedures

11.2.1 Data Release Criteria
The HMIS client data will be released only in aggregate, for any purpose beyond those specified in *Section 12 (c) THE HMIS Data Use and Disclosure Policies and Procedures*, according to the criteria specified below.

11.2.2 Aggregate Data Release Criteria
All released data must be anonymous, either by removal of all identifiers and/or all information that could be used to infer an individual or household identity.

12 THE HMIS Technical Support Policies and Procedures

12.1 The HMIS Application Support
As unanticipated technical support questions on the use of the HMIS application arise, users will follow these procedures to resolve those questions:

During the normal Maine HMIS business hours: (8:00-4:00)

Review the on-line help in ServicePoint and/or training materials on the HMIS website at http://maineHMIS.org/ or the Maine HMIS Learning Academy

Direct the technical support question to the Agency Administrator.

If the question is still unresolved, the Agency Administrator/user can direct the question to the Maine HMIS team by sending an email to HMIShelp@mainehousing.org

After the normal Maine HMIS business hours:

Review the on-line help in ServicePoint and/or training materials on the HMIS website at http://maineHMIS.org/ or the Maine HMIS Learning Academy.

If the question can wait to be addressed during the following business day, wait and follow the normal business hours procedure outlined above.

If the question cannot wait, direct the technical support question to the Agency Administrator, if available.

12.2   THE HMIS System Availability Policies

The Maine HMIS ServicePoint data entry web site will be available to participating agencies 24 hours a day, 7 days a week. In the case there is a planned outage or issues impacting availability users will be notified through http://maineHMIS.org/ in advance if at all possible.

Every Wednesday from 10:00PM-11:00PM Eastern (EST) time, ServicePoint is unavailable because Mediware is performing necessary backup and maintenance of the HMIS database when as few people as possible need access to the system. However, when the Maine HMIS receives notice of a planned interruption of service for other reasons or for an abnormal amount of time, the HMIS Lead Agency will notify Agency Administrators and End-Users via email. If there is an unplanned interruption to service, the Maine THE HMIS System Administrator will communicate with Mediware, and Agency Administrators will be notified of any information regarding the interruption as it is made available.

If you have any questions about policies and procedures, contact the HMIS Lead, your CoC Data group, or the HMIS Advisory Council.

12.3   Standards for a Comparable Database

(a)Standards for a comparable database.

> (i) The comparable database must meet the standards of this part and comply with all HMIS data information, security, and processing standards, as established by HUD in notice.

> (ii) The comparable database must meet the standards for security, data quality, and privacy of the HMIS within the Continuum of Care. The comparable database may use more stringent standards than the Continuum of Care's HMIS.

(b)Victim service providers and legal service providers may suppress aggregate data on specific client characteristics if the characteristics meet the requirements of this part and any conditions as may be established by HUD in notice.

13   Appendix A: Maine HMIS Glossary

MAINE HMIS GLOSSARY

Term	Definition
Accuracy	The degree to which HMIS data correctly reflects the client situation or episode as self-reported by the client.
Advanced Reporting Tool (ART)	A comprehensive reporting option in the HMIS that allows HMIS Users to create reports using a custom report building interface.
Annual Homeless Assessment Report (AHAR)	A report to the U.S. Congress on the extent and nature of homelessness in America. The report is prepared by the Department of Housing and Urban Development (HUD) and provides nationwide estimates of homelessness, including information about the demographic characteristics of homeless persons, service use patterns, and the capacity to house homeless persons. The report is based primarily on Homeless Management Information Systems (HMIS) data about persons who experience homelessness during a 12-month period.
Annual Performance Report (APR)	A report that tracks program progress and accomplishments in HUD`s competitive homeless assistance programs. The APR provides the grantee and HUD with information necessary to assess each grantee`s performance.
ART Report	A report created with the Advanced Reporting Tool in the HMIS.
Authorization for Disclosure of Health and/or Personal Information	This Acknowledgement embodies the element of informed Acknowledgement in a written form. A client completes and signs a document acknowledging that they have an understanding of the options and risks of participating or sharing data in an HMIS system. The signed document is then kept on file at the agency.
Bed Utilization	An indicator of whether shelter beds are occupied on a particular night or over a period of time.
Central Intake Coordinated Assessment	A centralized or coordinated process designed to make program participant intake, assessment, and provision of referrals more efficient.
Completeness	The level at which an HMIS field has been answered in whole or in its entirety.
Consolidated Annual Performance and	Analysis of need within a community and identification of HUD-sponsored grants – Community Development Block Grant (CDBG),

Evaluation Report (CAPER)	The HOME Investment Partnerships Program (HOME), the Emergency Solutions Grant (ESG), and the Housing Opportunities for Persons with AIDS Grant (HOPWA) -- which will best meet those needs.
Chronically Homeless	HUD defines a chronically homeless person as

(1) A "homeless individual with a disability," as defined in the Act, who:

(i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

(ii) Has been homeless (as described above) continuously for at least 12 months or on at least 4 separate occasions in the last 3 years where the combined occasions must total at least 12 months. Occasions separated by a break of at least seven nights. Stays in institution of fewer than 90 days do not constitute a break

(2) An individual who has been residing in an institutional care facility for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraphs (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless. |
CoC Program Interim Rule (24 CFR Part 578)	Part of the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) that focuses on regulatory implementation of the Continuum of Care program, including the Continuum of Care planning process.
Comparable Database	A comparable database means a database used by a victim service provider or a legal service provider that collects client-level data over time and generates unduplicated aggregate reports based on the data, in accordance with the requirements of this part. Information entered into a comparable database must not be entered directly into or provided to an HMIS.
Continuum of Care (CoC)	A group organized to assist individuals and families experiencing homelessness by helping homeless individuals and families move into transitional and permanent housing.

	Composed of representatives from organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve veterans, and homeless and formerly homeless persons organized to carry out the responsibilities of a Continuum of Care established under 24 CFR part 578
CoC Board	The Executive Board for the local CoC
Coverage	A term commonly used by CoCs or homeless providers that refers to the number of beds represented in an HMIS divided by the total number of beds available.
Data Committee	A committee of the MCoC that reviews data analysis, systems mapping, the Point in Time Count, and other data-related issues and topics within the Continuum of Care.
Data Quality	The accuracy and completeness of all information collected and reported to the HMIS.
Data Recipient	A person who obtains personally identifying information from an HMIS Lead or from a CHO for research or other purposes not directly related to the operation of the HMIS, Continuum of Care, HMIS Lead, or CHO.
Data Standards	See the current HUD HMIS Data Standard.
Disabling Condition	A condition in reference to chronic homelessness is defined by HUD as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual`s ability to work or perform one or more activities of daily living.
Emergency Shelter	Any facility whose primary purpose is to provide temporary shelter for the homeless in general, or for specific populations of the homeless.
Emergency Solutions Grant (ESG)	Federal grants to support homelessness prevention, emergency shelter, and related services.
Family Youth Services Bureau (FYSB)	A federal program under HHS that supports organizations and communities that work to put an end to youth homelessness, adolescent pregnancy and domestic violence.

HEARTH Act: Homeless Emergency Assistance and Rapid Transition to Housing Act	The HEARTH Act consolidates and amends three of the homeless assistance programs authorized by title IV of the McKinney-Vento Act (42 U.S.C. 11371 et seq) into a single grant program. Also, the HEARTH Act revised the Emergency Shelter Grants program to broaden its existing emergency shelter and homelessness prevention activities, to add new activities to rapidly rehouse homeless families and individuals, and to change the program's name to the Emergency Solutions Grant program.
Homeless Management Information System (HMIS)	The information system designated by the Continuum of Care to comply with 24 CFR part 580 and used to record, analyze, and transmit client and activity data in regard to the provision of shelter, housing, and services to individuals and families who are homeless or at risk of homelessness. Computerized data collection tool designed to capture client-level information over time on the characteristics and service needs of men, women, and children experiencing homelessness. HMIS is a software application used to collect demographic information on people served. The purpose of HMIS is to record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services and about persons who receive assistance for persons at risk of homelessness over time, to produce an unduplicated count of homeless persons for each Continuum of Care; to understand the extent and nature of homelessness locally, regionally and nationally; and to understand patterns of service use and measure the effectiveness of programs.
HMIS Agency Administrator	The primary contact between the Participating Agency and the HMIS Lead Agency on matters outlined in the HMIS Policies and Procedures; also an HMIS User role.
HMIS Data Standards	This document describes the Project Description Data Elements, Universal Data Elements, and Project-Specific Data Elements that are used in the HMIS electronic data collection system.
HMIS Data Standards Manual	Serves as a reference document and provides basic guidance on HMIS data elements for CoCs, HMIS Lead Agencies, HMIS System Administrators, and HMIS Users.
HMIS End-Users	Users of the HMIS at the Participating Agency level.
HMIS Federal Partners	The group of federal agencies that use the HMIS in the effort to end homelessness, which include U.S. Department of Health and Human Services (HHS), U.S. Department of Housing and Urban Development (HUD), and U.S. Department of Veterans Affairs.

HMIS Fee Structure	Outlines the fees required to access the HMIS; an attachment to the HMIS Participation Agreement.
HMIS Lead Agency	The entity designated by the Continuum of Care in accordance with 24 CFR part 580 to operate the Continuum's HMIS on the Continuum's behalf. The party responsible for managing and administering the HMIS at the local level.
HMIS Participating Agency (Contributing HMIS Organization or CHO)	Agencies that agree to participate in the HMIS and have signed HMIS Agency Participation Agreements. An organization that operates a project that contributes data to an HMIS.
HMIS Security Officer	The person responsible for ensuring compliance with the security standards in the HMIS Policies and Procedures, at both the HMIS Lead Agency and the HMIS Participating Agency levels.
HMIS System Administrator	A member of the HMIS Lead Agency who manages the HMIS in accordance with HUD and other federal guidelines.
HMIS User	Any person who uses the HMIS.
HMIS User Agreement	An individual who uses or enters data in an HMIS or another administrative database from which data is periodically provided to an HMIS. Documentation to be signed by HMIS End-Users that covers Client Confidentiality, Ethics, User and Responsibilities; Appendix B of the HMIS Policies and Procedures.
HMIS Vendor	A contractor who provides materials or services for the operation of an HMIS. An HMIS vendor includes an HMIS software provider, web server host, data warehouse provider, as well as a provider of other information technology or support.
Housing Inventory Chart (HIC)	An inventory of housing conducted on a single night during the last ten days in January. It reflects the number of beds and units available on the night designated for the count that are dedicated to serve persons who are homeless. Categorized by five Program Types: Emergency Shelter; Transitional Housing; Rapid Re-housing; Safe Haven; and Permanent Supportive Housing.
Inferred Acknowledgement	Once clients receive a verbal explanation of HMIS, acknowledgement is assumed for data entry into HMIS.

Informed Acknowledgement	A client is informed of participating in an HMIS system and then specifically asked to acknowledge and sign the Authorization for Disclosure of Health and/or Personal Information form.
Maine Continuum of Care (Maine CoC)	A community-based association focused on ending homelessness in Maine and charged with overseeing millions of dollars in federal funding under the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act through the
McKinney-Vento Act	An Act to provide urgently needed assistance to protect and improve the lives and safety of the homeless, with special emphasis on elderly persons, handicapped persons, and families with children.
NERHMIS	New England Regional Homeless Management Information System (NERHMIS).
NOFA	Notice of Funding Availability (NOFA) establishes the funding criteria for the Continuum of Care (CoC) Programs.
Participating Agency	An agency that uses HMIS to collect data.
Participation Fee	A fee the HMIS Lead charges CHOs for participating in the HMIS to cover the HMIS Lead's actual expenditures, without profit to the HMIS Lead, for software licenses, software annual support, training, data entry, data analysis, reporting, hardware, connectivity, and administering the HMIS.
Point In Time (PIT)	A count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that Continuums of Care conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. Continuums of Care also must conduct a count of unsheltered homeless persons every other year (odd numbered years). Each count is planned, coordinated, and carried out locally.
Program-Specific Data Elements (PSDE)	Data elements cooperatively developed by the HMIS Federal Partners that provide information about the characteristics of clients, the services that are provided, and client outcomes.
Protected Identifying Information (PII)	Information about a program participant that can be used to distinguish or trace a program participant's identity, either alone or when combined with other personal or identifying information, using methods reasonably likely to be used, which is linkable to the program participant.

Real-Time	The actual time during which an HMIS process takes place or an event occurs.
Timeliness	An important measure to evaluate daily bed utilization rates and current client system trends.
Unduplicated Count	The number of people who are homeless within a specified location and time period. An unduplicated count ensures that individuals are counted only once regardless of the number of times they entered or exited the homeless system or the number of programs in which they participated. Congress directed HUD to develop a strategy for data collection on homelessness so that an unduplicated count of the homeless at the local level could be produced.
Universal Data Elements (UDE)	Data required to be collected from all clients serviced by homeless assistance programs using an HMIS. These data elements include date of birth, gender, race, ethnicity, veteran`s status, and Social Security Number (SSN). These elements are needed for CoCs to understand the basic dynamics of homelessness in their community and for HUD to meet the Congressional mandate.
U.S. Department of Health and Human Services (HHS)	A cabinet-level department of the U.S. federal government with the goal of protecting the health of all Americans and providing essential human services; one of the HMIS Federal Partners.
U.S. Department of Housing and Urban Development (HUD)	A Cabinet department in the Executive branch of the United States federal government that develops and executes policies on housing and metropolises; one of the HMIS Federal Partners.
Victim Service Providers	Consistent with section 401(32) of the McKinney-Vento Act, the term victim service provider Refers to a private nonprofit organization whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. This term includes rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs

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Maine Continuum of Care (MCoC)

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) GOVERNANCE CHARTER

Approved and Adopted by the MCoC Board of Directors

Date: September 7, 2017

Contents

1. Purpose

The Maine Continuum of Care (MCoC) operates a Homeless Management Information System (HMIS) to record and store client-level information about the numbers, characteristics, and needs of (1) persons who use homeless housing and supportive services and (2) persons who receive assistance for persons at risk of homelessness. Laws, regulations, and U.S. Department of Housing and Urban Development (HUD) notices governing HMIS can be accessed at https://www.onecpd.info/hmis/hmis-regulations-and-notices/.

HMIS is used to aggregate data about the extent of homelessness over time, produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless assistance projects and programs.

This MCoC Governance Charter (Governance Charter) works in conjunction with the Maine HMIS Governance Model adopted September 7, 2017 and is formally adopted by the MCoC and agreed to by the HMIS Lead Agency.

Capitalized terms that are not otherwise defined in this Governance Charter have the meanings set forth in the Maine HMIS Glossary attached hereto.

2. Maine Continuum of Care

The Maine Continuum of Care is responsible for:

- Designating a single information system as the official HMIS software for the geographic area. The MCoC designates ServicePoint© HMIS software supplied by Mediware as the official HMIS software for the MCoC.
- Designating an HMIS Lead to operate HMIS. The MCoC designates MaineHousing as the HMIS Lead Agency (Lead Agency) to operate the MCoC's HMIS System.
- Maintaining documentation evidencing compliance with this Governance Charter and federal regulations governing HMIS
- Reviewing, revising, and approving the policies and plans required by federal regulations governing HMIS and any notices issued by HUD regarding HMIS

3. Responsibilities of the Lead Agency

The Lead Agency is responsible for:

- Ensuring the operation of and consistent participation by recipients of CoC and Emergency Solutions Grant (ESG) funds, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS is compliant with federal requirements
- Adopting written HMIS policies and procedures that apply to the Lead Agency, the Participating Agencies, and the MCoC in accordance with federal regulations governing HMIS
- Executing a written HMIS Participation Agreement with each Participating Agency, which includes the obligations and authority of the Lead Agency and Participating Agency, the

sanctions for violating the HMIS Participation Agreement, and an agreement that the Lead Agency and the Participating Agency will process Protected Identifying Information (PII) consistent with the agreement

- Serving as the applicant to HUD for CoC grant funds to be used for HMIS activities for the MCoC's geographic area, as directed by the MCoC, and entering into agreements with HUD to carry out the HUD-approved HMIS activities
- Monitoring and enforcing compliance by all Participating Agencies with HUD requirements and reporting on compliance to the MCoC and HUD
- Monitoring data quality and taking necessary actions to maintain input of high quality data from Participating Agencies
- Submitting a security plan, a data quality plan, and a privacy policy to the MCoC for approval within 6 months after the effective date of the final HMIS rule, or as otherwise directed by HUD. The Lead Agency must review and update the security plan, a data quality plan, and a privacy policy at least annually. During this process, the Lead Agency must seek and incorporate feedback from the MCoC and Participating Agencies. The Lead Agency must implement the security plan, a data quality plan, and a privacy policy within 6 months of the date of approval by the MCoC.
- Submitting to the MCoC an unduplicated count of clients served at least once annually and upon request from HUD.
- Submitting the following reports to HUD or the MCoC to meet HUD requirements including the following reports:
    - Sheltered point-in-time count
    - Housing Inventory Chart
    - Annual Homeless Assessment Report (AHAR)
    - Annual Performance Reports (APRs) for HMIS projects
    - HUD System Performance Measures
- Entering into a contract with vendor of ServicePoint© HMIS software that requires the vendor to comply with federal regulations governing HMIS and other HUD requirements concerning HMIS
- Charging no more than $1,500 as the annual per user cost for participation in HMIS, which fee may be waived or reduced at the discretion of the Lead Agency
- Along each Participating Agency ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the Participating Agency

4. Responsibilities of the Data Committee

The MCoC Data Committee (Data Committee) is comprised of Participating Agencies and the Lead Agency. The Data Committee is responsible for:

- Reviewing data analysis, systems mapping, the PIT, and other data-related issues within the MCoC
- Oversees the quality of the data that is put into HMIS and developing and implementing an ongoing data quality plan

- Reviewing and revising the privacy plan, security plan, and data quality plan for HMIS as well as any other HMIS policies and procedures required by HUD, at least annually
- Coordinating the resolution of data issues
- Recommending community level data quality plans and standards
- Recommending policy and procedures for Maine HMIS relating to the data, including software application, data elements to be collected, and intervals for data gathering
- Considering the effectiveness, and what improvements can be made, to the intake process
- Working with Participating Agencies to identify training needs to improve data quality
- Reviewing Participating Agency data quality reports for compliance with the data quality benchmarks
- Providing regular reports on the quality of the MCoC's data to the MCoC board of directors

5. Responsibilities of the HMIS Advisory Council

The Maine HMIS Advisory Council (Advisory Council) is comprised of Participating Agencies from the MCoC and the Lead Agency. The Advisory Council is responsible for:

- Ensuring that activities related to HMIS growth and use are developed, reviewed regularly, and are in accordance with the MCoC's goals
- Identifying general milestones for project management including training and expanded system functionality
- Managing and maintaining mechanisms for soliciting, collecting, and analyzing feedback from end users (such as satisfaction surveys, questionnaires, or focus groups), program managers, agency executive directors, and homeless persons. Feedback includes impressions of operational milestones and progress, system functionality, and general HMIS operations.
- Ensuring that the HMIS is managed in accordance with MCoC policies, procedures, and goals
- Developing and enforcing community level data quality plan and standards
- Ensuring the collection of each data variable and corresponding response category required for each client of Participating Agencies served by HUD, other federally funded partners, the State of Maine, and non-funded participating project.
- Regularly reviewing data quality reports at community planning level for data entry completion, consistency with program model, and timeliness as compared to the community data quality standards
- Ensuring the existence and use of HMIS policies and procedures
- Ensuring at least one homeless person or formerly homeless person participates in policymaking. Participation can include but is not limited to Advisory Council leadership, advisory committees, staff positions, and sub-committee positions.

6. Responsibilities of the Participating Agency

Participating Agencies are responsible for:

- Ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission, and destruction of data and the maintenance privacy, security, and confidentiality protections are in place for their individual programs and projects. A Participating Agency will include both an HMIS Agency Administrator and HMIS End Users.
- Complying with federal regulations regarding HMIS
- Complying with Federal, state, and local laws that require additional privacy or confidentiality protections. When privacy or security standards conflict with other federal, state, and local laws to which the Participating Agency must adhere, the Participating Agency must contact the HMIS Lead and collaboratively update the applicable policies for the Participating Agency to accurately reflect the additional protections.
- Implementing procedures to ensure and monitor its compliance with applicable agreements and requirements, including enforcing sanctions for noncompliance
- Along with the Lead Agency, ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the Participating Agency

IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

All parties will demonstrate a commitment to work together and support each other to achieve stated project goals.

The MCoC agrees to provide representation to the HMIS Advisory Group, for the purpose of ensuring HMIS policy and practice that is both consistent with federal and state requirements, and with the local needs of the MCoC.

The Lead Agency and Participating Agencies agree to respond to recommendations by the MCoC as provided by them through the HMIS Advisory Group.

The Governance Charter will be renewed on an annual basis to confirm that the Governance Charter continues to be relevant and in compliance with HUD requirements.

This Governance Charter shall be effective upon ratification by the MCoC as evidenced by a vote of acceptance by the MCoC in accordance with its ratification and voting policies, formal acknowledgement of the ratification in the MCoC minutes, and by signature below of representatives duly authorized by the MCoC and the HMIS Lead Agency respectively.

This HMIS Governance Charter was ratified by the Maine Continuum of Care membership on September 7, 2017.
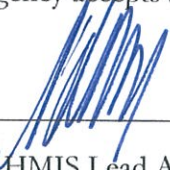
_____   9/21/2017

Signature of MCoC Representative   Date

The HMIS Lead Agency accepts and agrees to this HMIS Governance Charter.

_____   9/25/17

Signature of Maine HMIS Lead Agency Representative   Date

2017 HDX Competition Report
PIT Count Data for ME-500 - Maine Balance of State CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count	**1482**	**2280**
Emergency Shelter Total	628	993
Safe Haven Total	0	15
Transitional Housing Total	787	1,092
Total Sheltered Count	**1415**	**2100**
Total Unsheltered Count	**67**	**180**

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	**87**	**201**
Sheltered Count of Chronically Homeless Persons	67	201
Unsheltered Count of Chronically Homeless Persons	20	0

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**228**	**307**
Sheltered Count of Homeless Households with Children	223	286
Unsheltered Count of Homeless Households with Children	5	21

Homeless Veteran PIT Counts

	2011	2016	2017
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**69**	**104**	**131**
Sheltered Count of Homeless Veterans	63	90	120
Unsheltered Count of Homeless Veterans	6	14	11

2017 HDX Competition Report
HIC Data for ME-500 - Maine Balance of State CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2017 HIC	Total Beds in 2017 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	1217	186	881	85.45%
Safe Haven (SH) Beds	15	0	15	100.00%
Transitional Housing (TH) Beds	1225	166	1011	95.47%
Rapid Re-Housing (RRH) Beds	369	0	369	100.00%
Permanent Supportive Housing (PSH) Beds	2500	26	2441	98.67%
Other Permanent Housing (OPH) Beds	24	24	0	NA
Total Beds	5,350	402	4717	95.33%

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	298	328

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

Households with Children	2016 HIC	2017 HIC
RRH units available to serve families on the HIC	33	102

2017 HDX Competition Report

HIC Data for ME-500 - Maine Balance of State CoC

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC
RRH beds available to serve all populations on the HIC	79	369

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for ME-500 - Maine Balance of State CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.
ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	3265	6373	5579	57	61	68	7	32	33	38	5
1.2 Persons in ES, SH, and TH	4257	7605	6746	174	150	178	28	65	57	62	5

b.

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	5649	-	241		-	69	
1.2 Persons in ES, SH, and TH	-	6863	-	335		-	122	

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	128	201	12	19	9%	7	11	5%	11	12	6%	42	21%
Exit was from ES	2291	2311	353	347	15%	143	131	6%	127	125	5%	603	26%
Exit was from TH	623	513	48	61	12%	20	21	4%	29	21	4%	103	20%
Exit was from SH	0	1	0	1	100%	0	0	0%	0	0	0%	1	100%
Exit was from PH	295	277	24	15	5%	9	7	3%	15	6	2%	28	10%
TOTAL Returns to Homelessness	3337	3303	437	443	13%	179	170	5%	182	164	5%	777	24%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2017 HDX Competition Report
FY2016 - 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).

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1632	1482	-150
Emergency Shelter Total	613	628	15
Safe Haven Total	0	0	0
Transitional Housing Total	960	787	-173
Total Sheltered Count	1573	1415	-158
Unsheltered Count	59	67	8

Metric 3.2 – Change in Annual Counts

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	4445	7901	6984	-917
Emergency Shelter Total	3353	6533	5662	-871
Safe Haven Total	0	18	16	-2
Transitional Housing Total	1474	1874	1673	-201

2017 HDX Competition Report
FY2016 - 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 FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	902	1231	1164	-67
Number of adults with increased earned income	70	84	80	-4
Percentage of adults who increased earned income	8%	7%	7%	0%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	902	1231	1164	-67
Number of adults with increased non-employment cash income	427	539	267	-272
Percentage of adults who increased non-employment cash income	47%	44%	23%	-21%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	902	1231	1164	-67
Number of adults with increased total income	472	592	335	-257
Percentage of adults who increased total income	52%	48%	29%	-19%

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	371	463	424	-39
Number of adults who exited with increased earned income	31	34	58	24
Percentage of adults who increased earned income	8%	7%	14%	7%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	371	463	424	-39
Number of adults who exited with increased non-employment cash income	126	145	145	0
Percentage of adults who increased non-employment cash income	34%	31%	34%	3%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	371	463	424	-39
Number of adults who exited with increased total income	151	173	185	12
Percentage of adults who increased total income	41%	37%	44%	7%

2017 HDX Competition Report
FY2016 - 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 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	3454	6517	5516	-1001
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.	871	2248	1953	-295
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)	2583	4269	3563	-706

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4020	7276	6165	-1111
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.	1054	2517	2150	-367
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.)	2966	4759	4015	-744

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in the FY2016 Resubmission 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 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	382	1006	834	-172
Of persons above, those who exited to temporary & some institutional destinations	101	193	227	34
Of the persons above, those who exited to permanent housing destinations	168	287	289	2
% Successful exits	70%	48%	62%	14%

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

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	3150	6017	5512	-505
Of the persons above, those who exited to permanent housing destinations	1516	2343	2431	88
% Successful exits	48%	39%	44%	5%

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	2350	2913	2846	-67
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	2196	2716	2655	-61
% Successful exits/retention	93%	93%	93%	0%

2017 HDX Competition Report
FY2016 - SysPM Data Quality

ME-500 - Maine Balance of State 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.

2017 HDX Competition Report
FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	1036	1026	1046	1098	1829	1329	1167	1011	2174	2432	2729	2676		60	173	79				
2. Number of HMIS Beds	910	911	931	931	1772	1283	1105	949	2130	2314	2657	2589		60	173	79				
3. HMIS Participation Rate from HIC (%)	87.84	88.79	89.01	84.79	96.88	96.54	94.69	93.87	97.98	95.15	97.36	96.75		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	6957	6943	6529	5675	2429	1945	1799	1627	2600	2881	3030	2898	437	279	530	663	131	169	182	154
5. Total Leavers (HMIS)	6016	6032	5659	4881	1298	964	715	822	520	532	573	594	360	123	299	387	57	82	113	91
6. Destination of Don't Know, Refused, or Missing (HMIS)	564	374	401	639	171	111	70	55	48	73	20	10	97	39	52	90	12	14	22	9
7. Destination Error Rate (%)	9.38	6.20	7.09	13.09	13.17	11.51	9.79	6.69	9.23	13.72	3.49	1.68	26.94	31.71	17.39	23.26	21.05	17.07	19.47	9.89

2017 HDX Competition Report
Submission and Count Dates for ME-500 - Maine Balance of State CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2017 PIT Count	1/24/2017	

Report Submission Date in HDX

	Submitted On	Met Deadline
2017 PIT Count Submittal Date	5/1/2017	Yes
2017 HIC Count Submittal Date	4/28/2017	Yes
2016 System PM Submittal Date	6/2/2017	Yes