

## Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

- Reviewing the FY 2015 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions for assistance with completing the application in e-snaps.
- Answering all questions in the CoC Application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing so, please keep in mind that:
  - This year, CoCs will see that a few responses have been imported from the FY 2013/FY 2014 CoC Application. Due to significant changes to the CoC Application questions, most of the responses from the FY 2013/FY 2014 CoC Application could not be imported.
    - For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses.
    - For other questions, the Collaborative Applicant must be aware of responses provided by project applicants in their Project Applications.
  - Some questions require that the Collaborative Applicant attach a document to receive credit. This will be identified in the question.
  - All questions marked with an asterisk (\*) are mandatory and must be completed in order to submit the CoC Application.

For Detailed Instructions click [here](#).

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**1A-1. CoC Name and Number:** NJ-509 - Morris County CoC

**1A-2. Collaborative Applicant Name:** County of Morris

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

**1A-4. HMIS Lead:** NJHMFA

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

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

**1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness in the geographic area or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question. (limit 1000 characters)**

The Executive committee approves all subcommittees and helps to set the areas of focus for subcommittees. The Executive Committee draws on the expertise of community organizations in this process.

The Mental Health Association oversees the PATH outreach for the community and the case management for the safe haven. In this role the agency identified a critical need to connect people to benefits and the impact a SOAR process would have. The agency raised the issue at CoC meetings and the Executive committee created a SOAR committee to design a process of implementing a SOAR project in the CoC.

Family Promise, a rotating shelter, is the chair for the coordinated assessment committee. They facilitate the committee meetings and have worked with community providers to design the coordinated entry process of the community.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on the CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Roots and Wings	No	Yes	No
Somerset Home for Temporarily Displaced Children	Yes	Yes	No

**1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.**

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Jersey Battered Womens Services	Yes	Yes

**1B-2. Does the CoC intend to meet the timelines for ending homelessness as defined in Opening Doors?**

Opening Doors Goal	CoC has established timeline?
End Veteran Homelessness by 2015	No
End Chronic Homelessness by 2017	No
End Family and Youth Homelessness by 2020	Yes
Set a Path to End All Homelessness by 2020	Yes

**1B-3. How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?  
 (limit 1000 characters)**

The Executive Committee of the Morris CoC approves all sub-committees and assigns tasks to each subcommittee. The full membership committee also provides input on the development of committees and committee tasks.

The Veteran's Advisory committee is working to end veterans homelessness. This group was created in partnership with the local VA in order to address the issues of homeless veterans.

The Coordinated Assessment committee is working to develop the coordinated entry process of the CoC that will set a path to end all homelessness.

The local ten year plan identifies additional committees designed to advance strategies that will assist the CoC in ending homelessness. These committees include: Permanent Housing, Coordinated Systems, Access to Services, and Discharge Planning

**1B-4. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015. (limit 1000 characters)**

The CoC announced the local selection process via emails to community listservs, announcements at community & CoC meetings, and posting on the Morris County website. The announcement of the local selection process was sent to currently funded agencies as well as agencies that have not previously received HUD funding. A technical assistance session was held for all interested agencies as a way to explain the local selection process and eligible project activities. The funding announcement and technical assistance session included information about the local application process, the scoring criteria, the local funding priorities and general information about the CoC program.

The scoring criteria used to select projects included points for agency experience in providing the identified service and program impact. These factors created an opportunity for new projects to be competitive for funding. One new agency was approved in the FY2015 process using this criteria

**1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation?**

Monthly

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
HeadStart Program	No
Other housing and service programs funded through Federal, State and local government resources.	Yes

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

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

	Number	Percentage
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	1	50.00%
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	1	50.00%
How many of the Con Plan jurisdictions are also ESG recipients?	2	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	1	50.00%
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1	50.00%

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

The Morris County con plan jurisdiction is managed by the Morris County Department of Human Services, Division of Behavioral and Community Health Services, Office of Community Development. The Division of Behavioral and Community Health Services also oversees the CoC planning process. The Morris County DHS planning staff responsible for overseeing the con plan also participate in and oversee the monthly CoC meetings and bi-monthly executive committee meetings. The Morris con plan jurisdiction does joint planning with the CoC and shares the con plan with the CoC full membership and executive board prior to finalizing the document. On average, the con plan jurisdiction and CoC coordinate through planning meetings for about 4 hours per month.

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

Morris County is the ESG recipient for the CoC region. The CoC Executive Committee approved program performance standards that were shared with the ESG recipient. The CoC monitors all CoC and ESG funded programs through HMIS data to determine their performance outcomes.

On an annual basis the CoC Executive Committee develops funding priorities. These funding priorities are shared with the ESG recipient for use in the ESG funding process. The ESG review committee uses the CoC developed funding priorities to evaluate and determine which projects will receive ESG funding. The ESG recipient shares the final funding determinations with the CoC Executive Board after the funding decisions have been made.

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

Jersey Battered Women's Services is the DV agency in the region. JBWS sits on the CoC Board and participates in CoC & subcommittee meetings.

When DV victims present to non-DV agencies with safety or DV issues, they are immediately referred to JBWS. Victims are provided with the contact information for JBWS or connected directly to the agency through the DV hotline. If there is an immediate safety issue JBWS will shelter the victim in their safe house or refer to another DV agency in neighboring communities.

When households present to JBWS and it is clear they do not have a safety issue, they are referred to other local shelters and the local welfare agency to determine which benefits they may qualify for. Household may participate in JBWS services without an immediate safety need but will not be sheltered in the Safe House.

JBWS maintains an internal database comparable to HMIS to track clients served. Client information is protected and not shared with outside agencies.

**1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between October 1, 2014 and March 31, 2015, and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program. (Full credit consideration may be given for the relevant excerpt from the PHA's administrative planning document(s) clearly showing the PHA's homeless preference, e.g. Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate).**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 10/1/14 to 3/31/15 who were homeless at entry	PHA has General or Limited Homeless Preference
Morris County Housing Authority	0.00%	No
Morristown Housing Authority	0.00%	No
Dover Housing Authority	0.00%	No
Boonton Housing Authority		No
Madison Housing Authority	0.00%	No

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

In New Jersey Low Income Housing Tax Credit projects are incentivized to set aside at least 5 units for homeless and/or special needs populations. Since this incentive was created in the program scoring criteria, 3 new tax credit projects have been funded creating 15 new units set aside for the homeless and special needs populations.

Homeless Solutions operates emergency shelter, transitional housing and permanent supportive housing programs in the CoC region. Homeless Solutions operates a permanent supportive housing building with 15 units containing 45 beds that are set aside for the chronically homeless.

The Morris County Division of Community Development has used HOME funding to create a Tenant Based Rental Assistance Program. This program provides 7 vouchers of rental assistance to homeless families in the community and are administered by the homeless service providers.

The Mental Health Association has several state contracts to provide housing and services to individuals with severe mental illness. The agency provides state funded rental assistance and services to 32 homeless households.

The Market Street Mission operates a permanent supportive housing program for 10 homeless individuals in the community.

NJAS and Hope House manage PSH for homeless persons with HIV/AIDS through HOPWA.

**1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply. For "Other," you must provide a description (2000 character limit)**

Engaged/educated local policymakers:	<input type="checkbox"/>
Engaged/educated law enforcement:	<input type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

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

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

**1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) and explain how the CoC plans to coordinate with the institution(s) to ensure persons discharged are not discharged into homelessness.  
(limit 1000 characters)**

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**CoCs are required by the CoC Program interim rule to establish a Centralized or Coordinated Assessment system – also referred to as Coordinated Entry. Based on the recent Coordinated Entry Policy Brief, HUD’s primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible regardless of where or how people present for assistance. Most communities lack the resources needed to meet all of the needs of people experiencing homelessness. This combined with the lack of a well-developed coordinated entry processes can result in severe hardships for persons experiencing homelessness who often face long wait times to receive assistance or are screened out of needed assistance. Coordinated entry processes help communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. Coordinated entry processes also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.**

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

The Coordinated Systems committee has developed the coordinated entry process.

The coordinated entry features a standardized intake/assessment form and referral form. All persons seeking shelter must connect with the community shelters or the Morris County Office of Temporary Assistance (the agency administering mainstream benefits programs). Once households connect with the shelter or OTA, they complete the intake/assessment form which collects basic household information and screens for basic program eligibility. Participating agencies obtain household signatures on a release of information form and fax the release with the intake form to the agency which the household is referred to. When the household follows up with the agency to which they are referred, the agency has the basic information and can focus on the second part of the screening process. Household information is entered into HMIS by the agency receiving the referral once admitted.

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

Organization/Person Categories	Participates in Ongoing Planning and Evaluation	Makes Referrals to the Coordinated Entry Process	Receives Referrals from the Coordinated Entry Process	Operates Access Point for Coordinated Entry Process	Participates in Case Conferencing	Not Applicable
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hospital(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EMT/Crisis Response Team(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Affordable Housing Developer(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Public Housing Authorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
School Administrators/Homeless Liaisons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Local Shelters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

### 1F-1. For all renewal project applications submitted in the FY 2015 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2015 CoC Program Competition?	11
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	3
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2015 CoC Program Competition?	8
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2015 CoC Competition?	100.00%

### 1F-2. In the sections below, check the appropriate box(s) for each section to indicate how project applications were reviewed and ranked for the FY 2015 CoC Program Competition. (Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.)

Type of Project or Program (PH, TH, HMIS, SSO, RRH, etc.)	<input checked="" type="checkbox"/>
Performance outcomes from APR reports/HMIS	
Length of stay	<input type="checkbox"/>
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

<b>Monitoring criteria</b>	
Participant Eligibility	<input checked="" type="checkbox"/>
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
<b>Need for specialized population services</b>	
Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None	<input type="checkbox"/>

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

The CoC Board established funding priorities for the 2015 process that included priority for projects serving the chronically homeless, providing rapid rehousing for families, and projects serving priority populations of veterans, youth, and DV victims. The scoring tool included weighted scores for projects serving these special populations.

Projects providing housing to the chronically homeless or rapid re-housing to families could receive 8 points. Projects serving veterans, youth or victims of domestic violence could receive 6 points. The local application included targeted questions about the type of service provided and the population served in order to determine which projects received these points. In addition, all projects completed a presentation before the review committee where they have an opportunity to describe additional variables in their program and discuss performance outcomes in relation to the population served.

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

The CoC announced the FY2015 local selection process via email, announcement at community meetings and through posting on the Morris County Department of Human Services website. The announcement included the FY2015 funding priorities, the application, and the scoring criteria.

**1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2015 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached.)**

**1F-5. Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)** Yes

**1F-5a. If the CoC rejected project application(s) on what date did the CoC and Collaborative Applicant notify those project applicants their project application was rejected in the local CoC competition process? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)** 10/19/2015

**1F-6. Is the Annual Renewal Demand (ARD) in the CoC's FY 2015 CoC Priority Listing equal to or less than the ARD on the final HUD-approved FY 2015 GIW?** Yes

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

## Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

The CoC Board has adopted a monitoring procedure that includes a desk monitoring and on-site monitoring in alternating years. The CoC Lead Agency is responsible for completing the monitoring through evaluation of HMIS data and program data.

Agencies are responsible for providing evidence of timely APR submission, eLOCCS drawdowns, and copies of close-out certifications.

In the desk monitoring process HMIS data is reviewed to determine program outcomes in relation to housing placement, housing stability, income and benefits access, client eligibility and utilization rates.

The on-site monitoring process includes a review of client files and program administration documentation to verify client eligibility, appropriate financial management and oversight and appropriate provision of services. The on-site monitoring reviews compliance with all areas of program regulations while the desk monitoring reviews compliance with a select number of areas of program regulations.

**1G-2. Did the Collaborative Applicant review and confirm that all project applicants attached accurately completed and current dated form HUD 50070 and form HUD-2880 to the Project Applicant Profile in e-snaps?** Yes

**1G-3. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing?** Yes

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

**Intructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

**2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or the attached MOU.** ALT, 3-6

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

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

**2A-4. What is the name of the HMIS software used by the CoC (e.g., ABC Software)?** AWARDS  
**Applicant will enter the HMIS software name (e.g., ABC Software).**

**2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)?** Foothold Technology, Inc.  
**Applicant will enter the name of the vendor (e.g., ABC Systems).**

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

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

Funding Source	Funding
CoC	\$0
ESG	\$0
CDBG	\$0
HOME	\$0
HOPWA	\$0
<b>Federal - HUD - Total Amount</b>	<b>\$0</b>

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

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
<b>Other Federal - Total Amount</b>	<b>\$0</b>

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

<b>Funding Source</b>	<b>Funding</b>
City	\$0
County	\$13,000
State	\$0
<b>State and Local - Total Amount</b>	<b>\$13,000</b>

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

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

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

<b>Funding Source</b>	<b>Funding</b>
Participation Fees	\$9,000
<b>Other - Total Amount</b>	<b>\$9,000</b>

<b>2B-2.6 Total Budget for Operating Year</b>	<b>\$22,000</b>
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## 2C. Homeless Management Information System (HMIS) Bed Coverage

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2C-1. Enter the date the CoC submitted the 2015 HIC data in HDX, (mm/dd/yyyy):** 05/15/2015

**2C-2. Per the 2015 Housing Inventory Count (HIC) indicate the number of beds in the 2015 HIC and in HMIS for each project type within the CoC. If a particular housing type does not exist in the CoC then enter "0" for all cells in that housing type.**

Project Type	Total Beds in 2015 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter beds	132	33	99	100.00%
Safe Haven (SH) beds	20	0	20	100.00%
Transitional Housing (TH) beds	141	39	102	100.00%
Rapid Re-Housing (RRH) beds	20	0	20	100.00%
Permanent Supportive Housing (PSH) beds	130	0	75	57.69%
Other Permanent Housing (OPH) beds	119	0	119	100.00%

**2C-2a. If the bed coverage rate for any housing type is 85% or below, describe how the CoC plans to increase this percentage over the next 12 months. (limit 1000 characters)**

In the Permanent Supportive Housing Category there were three new projects that did not yet have clients enrolled at the time of the HIC submission. Since that time, these programs have leased up units and are recording information in HMIS. These projects include:  
 Family Promise - Morris County Leasing 2011 - 5 beds  
 Mental Health Association - DCA-MHA S+C Phase 2 - 6 beds  
 New Jersey AIDS Services -Eric Johnson House Leasing 2011 - 6 beds

With the inclusion of the above identified beds the HMIS coverage rate increases to 70%. The remaining coverage issues are related to the HUD VASH beds operated by the State Department of Community Affairs and the local VA. At this point the VASH beds are not in HMIS.

**2C-3. HUD understands that certain projects are either not required to or discouraged from participating in HMIS, and CoCs cannot require this if they are not funded through the CoC or ESG programs. This does NOT include domestic violence providers that are prohibited from entering client data in HMIS. If any of the project types listed in question 2C-2 above has a coverage rate of 85% or below, and some or all of these rates can be attributed to beds covered by one of the following programs types, please indicate that here by selecting all that apply from the list below.  
 (limit 1000 characters)**

VA Domiciliary (VA DOM):	<input type="checkbox"/>
VA Grant per diem (VA GPD):	<input type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input checked="" type="checkbox"/>

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

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" during the time period of October 1, 2013 through September 30, 2014.**

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	39%	4%
3.3 Date of birth	37%	1%
3.4 Race	25%	2%
3.5 Ethnicity	38%	1%
3.6 Gender	0%	0%
3.7 Veteran status	4%	0%
3.8 Disabling condition	9%	14%
3.9 Residence prior to project entry	44%	1%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	9%	5%
3.15 Relationship to Head of Household	0%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	95%	0%

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

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>

	<input type="checkbox"/>
None	<input type="checkbox"/>

**2D-3. If you submitted the 2015 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?** 12

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

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

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

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

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

There are currently no GPD funded programs in the CoC geographic region

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**The data collected during the PIT count is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level so they can best plan for services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. This information helps inform Congress' funding decisions, and it is vital that the data reported is accurate and of high quality.**

- 2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2015 sheltered PIT count? Yes
- 2E-2. Indicate the date of the most recent sheltered PIT count (mm/dd/yyyy): 01/27/2015
- 2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD? Not Applicable
- 2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy): 05/15/2015

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2015 PIT count:**

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

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

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

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

The sheltered PIT count was completed through a complete census count. Information was pulled directly from HMIS for those programs entering information in the system. For sheltering programs that do not use HMIS, information was gathered through client-level interviews using a standard survey format. All sheltering programs also completed a program level survey submitted the day after the count. The program level survey was used to verify the number of HMIS & client level survey records submitted.

Unique identifiers based on initials, age, gender race and other factors were used to de-duplicate HMIS and client level survey records.

This method was selected because of the high quality of HMIS data and the accuracy of population characteristics that can be pulled from HMIS and client level surveys. In addition client level surveys were used because of the relatively small number of surveys to be completed.

**2F-4. Describe any change in methodology from your sheltered PIT count in 2014 to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the PIT count). (limit 1000 characters)**

Not Applicable

**2F-5. Did your CoC change its provider coverage in the 2015 sheltered count?** No

**2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2015 sheltered count. (limit 750 characters)**

Not Applicable

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

**2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2014 to 2015 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)**

There were no significant changes in the implementation of the sheltered PIT count.

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

### Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

**The unsheltered PIT count assists communities and HUD to understand the characteristics and number of people with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground. CoCs are required to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, CoCs are strongly encouraged to conduct the unsheltered PIT count annually, at the same time that it does the annual sheltered PIT count. The last official PIT count required by HUD was in January 2015.**

- 2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count?** Yes
- 2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy):** 01/27/2015
- 2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?** Not Applicable
- 2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy):** 05/15/2015

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2I-1. Indicate the methods used to count unsheltered homeless persons during the 2015 PIT count:**

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

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

The unsheltered count was completed at known locations by the outreach organizations and volunteers. Volunteers also counted the unsheltered population via a service based count. Client level surveys were completed with each person encountered in known locations and at service locations such as day centers and soup kitchens.

Morris County chose this methodology as the CoC region is largely suburban. As such a known locations approach coupled with a service based count is the most effective way to reach the unsheltered population.

Client level surveys were competed in order to get an accurate accounting of the unsheltered population characteristics. The survey included questions with identifying information that was used to create unique IDs and aid in de-duplication. The survey also included screening questions to identify those who already completed the survey.

**2I-3. Describe any change in methodology from your unsheltered PIT count in 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the count). (limit 1000 characters)**

Not Applicable

**2I-4. Does your CoC plan on conducting an unsheltered PIT count in 2016?** Yes

(If "Yes" is selected, HUD expects the CoC to conduct an unsheltered PIT count in 2016. See the FY 2015 CoC Program NOFA, Section VII.A.4.d. for full information.)

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

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2015 unsheltered population PIT count:**

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

**2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)**

There were no significant changes to the implementation of the unsheltered PIT Count between 2014 and 2015

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

### Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

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

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2014 and 2015 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2014 PIT (for unsheltered count, most recent year conducted)	2015 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	389	384	-5
Emergency Shelter Total	203	195	-8
Safe Haven Total	18	19	1
Transitional Housing Total	138	136	-2
Total Sheltered Count	359	350	-9
Total Unsheltered Count	30	34	4

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

Using HMIS data, CoCs must use the table below to indicate the number of homeless persons who were served in a sheltered environment between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Unduplicated Total sheltered homeless persons	657
Emergency Shelter Total	1,027
Safe Haven Total	62
Transitional Housing Total	229

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

**Describe the CoC’s efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.  
(limit 1000 characters)**

Households seeking assistance from homeless service providers in Morris County are first referred to the Office of Temporary Assistance which administers the mainstream benefits programs as well as state funded prevention programs. Households at risk for homelessness, such as those with eviction notices, may receive rental assistance to help them stay in their housing.

The CoC coordinated assessment process includes a common assessment tool that is used for those seeking shelter as well as those at risk of homelessness. This tool along with the standard referral form are used to connect eligible households to prevention services wherever possible.

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

**Describe the CoC’s efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.  
(limit 1000 characters)**

The CoC monitors length of program stay on a quarterly basis. The shelter and transitional housing agencies provided input about the length of program stay and the Executive Committee approved a performance standard addressing the length of program stay. The Executive Committee reviews length of stay at program and system level.

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

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

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

In the chart below, CoCs must indicate the number of persons in CoC funded supportive services only (SSO), transitional housing (TH), and rapid re-housing (RRH) project types who exited into permanent housing destinations between October 1, 2013 and September 30, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in SSO, TH and PH-RRH who exited	71
Of the persons in the Universe above, how many of those exited to permanent destinations?	35
<b>% Successful Exits</b>	<b>49.30%</b>

**3A-4b. Exit To or Retention Of Permanent Housing:**

In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2013 and September 31, 2014.

	Between October 1, 2013 and September 30, 2014
Universe: Persons in all PH projects except PH-RRH	62
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	61
<b>% Successful Retentions/Exits</b>	<b>98.39%</b>

**3A-5. Performance Measure: Returns to Homelessness:**

**Describe the CoC’s efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)**

The CoC reviews destination at exit for all programs in conjunction with residence prior to program entry and number of previous homeless episodes from HMIS records. This information helps to provide a rough estimate of the rate of returns to homelessness. The CoC is working with the HMIS Lead agency to identify a more accurate way of measuring returns to homelessness.

The emergency shelter and transitional housing programs in the CoC region work to connect households with services and employment income to help stabilize them once they exit to permanent housing.

**3A-6. Performance Measure: Job and Income Growth.**

**Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non-employment related income, and name the organization responsible for carrying out each strategy). (limit 1000 characters)**

The CoC is working to standardize the way homeless service providers connect program participants to employment and training programs. During the CoC meetings homeless service agencies are connected with community providers that offer services in education and employment.

The CoC reviews program progress in connecting participants to employment income and mainstream benefits.

The CoC has a process in place where all households served in shelter, safe haven and transitional housing are connected to the Office of Temporary Assistance which administers the mainstream programs in the region.

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

The Workforce Investment Board oversees the One-Stop Career Centers in Morris County. These Centers provide the following trainings:

- Workplace Dependability
- Getting along with co-workers
- Business etiquette
- Adult Basic Education
- GED Preparation
- English-as-a-Second Language Instruction
- Job Opening Information & Referral
- Training Information
- Occupational Training & e-Learning
- Resume Preparation
- Comprehensive Assessment of Skill Levels and Needs
- Development of Employment Plans
- Group and Individual Counseling
- Career Planning
- Pre-Vocational Services
- Case Management
- Labor Market Information

The Centers work with community agencies to ensure all households have access to services. Households receiving mainstream benefits are connected to the One Stop Centers through the Office of Temporary Assistance. The CoC funded program case managers work with their clients to ensure compliance with One Stop Center participation.

**3A-7. Performance Measure: Thoroughness of Outreach.**

**How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?  
(limit 1000 characters)**

The Mental Health Association of Morris County operates the primary outreach program for the CoC region through the PATH program. The MHA outreach teams cover the full geographic region through targeting known locations for street outreach efforts. The outreach teams work closely with local police and hospitals to respond to unsheltered homeless persons identified by those agencies. MHA of Morris County tracks outreach interactions in the HMIS. In addition to the outreach team, there are two day centers in the region that connect unsheltered households to mainstream benefits, services shelter.

The MHA of Morris County works closely with the community shelters and helps connect people to the safe havens and emergency shelter programs. MHA also connects people to GA, TANF & SSI through which they may receive shelter and housing

**3A-7a. Did the CoC exclude geographic areas from the 2015 unsheltered PIT count where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g., deserts)?** No

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

Not Applicable

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

### Objective 1: Ending Chronic Homelessness

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

**Opening Doors, Federal Strategic Plan to Prevent and End Homelessness (as amended in 2015) establishes the national goal of ending chronic homelessness. Although the original goal was to end chronic homelessness by the end of 2015, that goal timeline has been extended to 2017. HUD is hopeful that communities that are participating in the Zero: 2016 technical assistance initiative will continue to be able to reach the goal by the end of 2016. The questions in this section focus on the strategies and resources available within a community to help meet this goal.**

**3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	57	49	-8
Sheltered Count of chronically homeless persons	39	40	1
Unsheltered Count of chronically homeless persons	18	9	-9

**3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, decrease, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2015 compared to 2014. To possibly receive full credit, both the overall total and unsheltered changes must be addressed. (limit 1000 characters)**

Morris County experienced an overall decrease in the chronically homeless population. This decrease is directly related to the lease up of CoC funded rental assistance vouchers dedicated to the chronically homeless.

The unsheltered count decreased between 2014 and 2015 while the sheltered count increased. This is due to the fact that the Mental Health Association identified chronically homeless individuals to place in the permanent housing program from those currently in community shelters and safe haven. As those shelter and safe haven beds opened up, Mental Health Association worked with the unsheltered population to move them into the vacant shelter and safe haven beds.

**3B-1.2. From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015. (read only)**

Over the next 2 years the CoC will take the following actions to increase permanent housing for the chronically homeless:

1. The Mental Health Association partnered with the NJ Department of Human Services to create 19 new rental assistance vouchers with 13 of those vouchers dedicated to the chronically homeless.
2. New CoC funds will be prioritized for the Chronically Homeless. In FY2014 the CoC anticipates creating new units of housing through the CoC funding
3. The CoC is working with all permanent housing providers to secure a commitment to prioritize chronically homeless individuals and families at turnover.

**3B-1.2a. Of the strategies listed in the FY 2013/FY 2014 CoC Application represented in 3B-1.2, which of these strategies and actions were accomplished? (limit 1000 characters)**

The Mental Health Association, in partnership with the NJ Department of Community Affairs, connected 9 households to permanent housing through the rental assistance grant that was funded.

In the FY2014 competition the CoC funded a new project through reallocation that created 4 units for chronically homeless individuals and 2 units for chronically homeless families.

The CoC met with the permanent supportive housing providers to identify which beds were for the chronically homeless.

**3B-1.3. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count, as compared to those identified on the 2014 Housing Inventory Count.**

	2014	2015	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC.	10	54	44

**3B-1.3a. Explain the reason(s) for any increase, decrease or no change in the total number of PSH beds (CoC Program and non CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count compared to those identified on the 2014 Housing Inventory Count. (limit 1000 characters)**

In 2015 several programs that were under development became active and added new permanent housing opportunities for chronically homeless households. In addition, existing programs identified beds that would be dedicated to the chronically homeless.

**3B-1.4. Did the CoC adopt the orders of priority in all CoC Program-funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ?**

No

**3B-1.4a. If “Yes”, attach the CoC’s written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC’s update.**

**3B-1.5. CoC Program funded Permanent Supportive Housing Project Beds prioritized for serving people experiencing chronic homelessness in FY2015 operating year.**

Percentage of CoC Program funded PSH beds prioritized for chronic homelessness		FY2015 Project Application
--	--	----------------------------

Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness.	6
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness that will be made available through turnover in the FY 2015 operating year.	0
Based on all of the renewal project applications for PSH, enter the estimated number of PSH beds made available through turnover that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	0
This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	0.00%

**3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?** No

This question will not be scored.

**3B-1.6a. If “Yes,” what are the strategies implemented by the CoC to maximize current resources to meet this goal? If “No,” what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017? (limit 1000 characters)**

If awarded funding for all new and renewal projects submitted through the FY2015 application, the CoC will be in a position to add 25 new units for chronically homeless households which will cut the chronically homeless population in half by the end of 2016.

In order to move forward with continued reductions in 2016 the CoC will work with non-CoC funded permanent supportive housing programs to encourage a dedication or prioritization of beds to the chronically homeless population.

The CoC will work to expand the landlord/tenant program operated by Family Promise to encourage more landlords to serve the homeless and chronically homeless population.

The CoC will connect with the public housing authorities and work to secure housing choice voucher resources for homeless and chronically homeless households in the community.

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

### Objective 2: Ending Homelessness Among Households with Children and Ending Youth Homelessness

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending family (Households with Children) and youth homelessness by 2020. The following questions focus on the various strategies that will aid communities in meeting this goal.**

**3B-2.1. What factors will the CoC use to prioritize households with children during the FY2015 Operating year? (Check all that apply).**

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

**3B-2.2. Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter. (limit 1000 characters)**

The CoC is working to quickly re-house homeless families. Several initiatives have been implemented to decrease the length of homelessness for families.

1. The CoC has expanded rapid re-housing opportunities through creation of a CoC funded rapid re-housing program that works in conjunction with the ESG funded rapid re-housing program.

2. Family Promise has implemented initiatives that have impacted length of homelessness and stability in housing. The Community Support Program provides in-home case management services to stabilize participants in housing. The Landlord/Tenant Program provides incentives to landlords to serve those experiencing homelessness. A Housing Locator with property management and realtor experience identifies landlords and negotiates rents for households. A team of volunteers offer incentives to participating landlords such as free repairs, painting and unit upgrades.

**3B-2.3. Compare the number of RRH units available to serve families from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve families in the HIC:	1	1	0

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

CoC policies and procedures prohibit involuntary family separation:	<input type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input type="checkbox"/>
The CoC periodically discusses program criteria and works with community programs to ensure minimally restrictive guidelines	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

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

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	44	48	4
Sheltered Count of homeless households with children:	44	48	4
Unsheltered Count of homeless households with children:	0	0	0

**3B-2.5a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless households with children in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)**

The CoC experienced an overall increase in the homeless family population. The increase in the sheltered family population is related to an increased number of families accessing emergency shelter. While the increase was minimal, there are more families struggling to afford the cost of living in Morris County. With the high cost of living and low employment wages, many households are unable to maintain stable housing and end up in the local homeless shelters.

**3B-2.6. Does the CoC have strategies to address the unique needs of unaccompanied homeless youth (under age 18, and ages 18-24), including the following:**

Human trafficking and other forms of exploitation?	No
LGBTQ youth homelessness?	No
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes
Unaccompanied minors/youth below the age of 18?	Yes

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

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

**3B-2.7. What factors will the CoC use to prioritize unaccompanied youth (under age 18, and ages 18-24) for housing and services during the FY2015 operating year? (Check all that apply)**

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

**3B-2.8. Using HMIS, compare all unaccompanied youth (under age 18, and ages 18-24) served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2013 (October 1, 2012 - September 30, 2013) and FY 2014 (October 1, 2013 - September 30, 2014).**

	FY 2013 (October 1, 2012 - September 30, 2013)	FY 2014 (October 1, 2013 - September 30, 2014)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	21	19	-2

**3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 is lower than FY 2013, explain why. (limit 1000 characters)**

Morris County has 2 homeless youth service providers in the community. The Somerset Home Street Outreach team (a RHY funded program) began operating in the community in 2014. With the increased outreach services for homeless youth, providers have increased their success with connecting with youth before they are homeless on the streets. Outreach providers are identifying homeless youth earlier in the process and connecting them with services to prevent them from becoming homeless on the street.

**3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2015 to projected funding for CY 2016.**

	Calendar Year 2015	Calendar Year 2016	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$35,000.00	\$35,000.00	\$0.00
CoC Program funding for youth homelessness dedicated projects:			\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$35,000.00	\$35,000.00	\$0.00

**3B-2.10. To what extent have youth housing and service providers and/or State or Local educational representatives, and CoC representatives participated in each other's meetings over the past 12 months?**

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	0
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	0
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	6

**3B-2.10a. Given the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local education liaisons and State educational coordinators.  
(limit 1000 characters)**

**3B-2.11. How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenilee justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs.  
(limit 2000 characters)**

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

### Objective 3: Ending Veterans Homelessness

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**Opening Doors outlines the goal of ending Veteran homelessness by the end of 2015. The following questions focus on the various strategies that will aid communities in meeting this goal.**

**3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).**

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	14	12	-2
Sheltered count of homeless veterans:	12	10	-2
Unsheltered count of homeless veterans:	2	2	0

**3B-3.1a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless veterans in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)**

The CoC experienced an overall decrease in the homeless veterans population. Community Hope, as the primary veterans service community based organization in the CoC region, has been working to connect identified veterans to SSVF and HUD VASH resources.

There was a decrease in the sheltered homeless population as a result of efforts to connect eligible veterans to housing and services.

There was no difference in the unsheltered veterans population. This is related to the fact that the unsheltered veterans are typically not eligible for VA funded services and have significant mental health or addiction issues that make engagement difficult. The street outreach program continues to work with this population to engage them in services and connect them to shelter and housing.

**3B-3.2. How is the CoC ensuring that Veterans that are eligible for VA services are identified, assessed and referred to appropriate resources, i.e. HUD-VASH and SSVF?  
(limit 1000 characters)**

All homeless households seeking assistance that are identified as veterans are connected with Community Hope, the community-based veterans service provider in the region. Community Hope operates the SSVF program as well as VA transitional and permanent housing programs in a neighboring continuum.

As a result of Community Hope's strong ties with the local VA, once a homeless veteran has been referred to them, they are able to connect them to VA screening to determine which programs they are eligible for. If the veteran is eligible for VASH, Community Hope will make the referral through the established system. If the veteran is eligible for SSVF Community Hope will enroll them in the program and provide services.

**3B-3.3. For Veterans who are not eligible for homeless assistance through the U.S Department of Veterans Affairs Programs, how is the CoC prioritizing CoC Program-funded resources to serve this population?  
(limit 1000 characters)**

All veterans identified through street outreach or in homeless shelters and transitional housing programs are connected with Community Hope. Community Hope coordinates the veteran eligibility screening. Where appropriate, Community Hope provides additional services to veterans that may be currently ineligible but have the ability to correct their discharge record in order to become eligible for services. Once those veterans are assisted in correcting their service record to create eligibility they are connected with the VA programs that best meet their needs.

For those veterans that are not able to gain eligibility to VA funded programs, they are connected to the general service providers in the region. If veterans meet program population requirements of the CoC funded programs (mental health issues, HIV/AIDs, chronically homeless) then they are eligible to be served in the CoC funded programs.

**3B-3.4. Compare the total number of homeless Veterans in the CoC AND the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2015 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).**

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2015	% Difference
Total PIT count of sheltered and unsheltered homeless veterans:	10	12	20.00%
Unsheltered count of homeless veterans:	0	2	0.00%

**3B-3.5. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2015.** Yes

This question will not be scored.

**3B-3.5a. If “Yes,” what are the strategies being used to maximize your current resources to meet this goal? If “No,” what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2015? (limit 1000 characters)**

The SSVF providers in Morris County are working to connect with every homeless veteran in the community. Where appropriate, eligible veterans are referred to the HUD VASH program. If veterans are unable to access that program providers are working to connect them with the services and financial assistance available through the SSVF program.

A veteran's advisory committee has been established with local veterans service, childcare, and homeless prevention and service providers in the community. This committee conducts monthly case conferencing to identify strategies of quickly housing the homeless veterans in the community.

## 4A. Accessing Mainstream Benefits

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

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

**4A-2. Based on the CoC's FY 2015 new and renewal project applications, what percentage of projects have demonstrated that the project is assisting project participants to obtain mainstream benefits, which includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?**

### FY 2015 Assistance with Mainstream Benefits

Total number of project applications in the FY 2015 competition (new and renewal):	13
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 3a, 3b, 3c, 4, and 4a on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	1
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	8%

**4A-3. List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants. (limit 1000 characters)**

The State of New Jersey is a Medicaid Expansion State. As a result, homeless households served in the CoC region are eligible for health insurance through Medicaid. The CoC works closely with Zufall Health Center, the Federally Qualified Health Center, in the region to connect uninsured households to Medicaid. Zufall's visits the homeless shelters in the community and provides on-site medical and dental services, Medicaid enrollment and transportation to follow up appointments.

In addition to the services provided by Zufall, Morristown Medical Center and St. Clare's Health System have patient navigators within their facilities. The patient navigators enroll all uninsured persons in Medicaid at the time of service provision.

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

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

## 4B. Additional Policies

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

**4B-1. Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state-mandated restrictions, and d) history of domestic violence.**

### FY 2015 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2015 competition (new and renewal):	12
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2015 competition:	7
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2015 competition that will be designated as "low barrier":	58%

**4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?**

### FY 2015 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2015 competition (new and renewal):	12
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2015 competition:	7
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2015 competition that will be designated as Housing First:	58%

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

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

**4B-4. Compare the number of RRH units available to serve any population from the 2014 and 2015 HIC.**

	2014	2015	Difference
RRH units available to serve any population in the HIC:	5	20	15

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

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

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

**4B-7a. If "Yes" in Question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)**

**4B-8. Has the project been affected by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2015 CoC Program Competition?** No

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

**4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application.** No

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

This response does not affect the scoring of this application.

CoC Governance:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

**4B-9b. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.**

This response does not affect the scoring of this application.

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

## 4C. Attachments

**Instructions:**

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDEXchange Ask A Question.

For required attachments related to rejected projects, if the CoC did not reject any projects then attach a document that says "Does Not Apply".

Document Type	Required?	Document Description	Date Attached
01. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects	Yes	2015 CoC Consolid...	11/16/2015
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure	Yes	CoC Rating and Re...	11/16/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	CoC Rating and Re...	11/16/2015
05. CoCs Process for Reallocating	Yes	CoC Process for R...	11/16/2015
06. CoC's Governance Charter	Yes	CoC Governance Ch...	11/16/2015
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	11/16/2015
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	PHA Administratio...	11/16/2015
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	CoC-HMIS MOU	11/16/2015
11. CoC Written Standards for Order of Priority	No		
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes	No		
13. Other	No		
14. Other	No		
15. Other	No		

## **Attachment Details**

**Document Description:** 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** CoC Rating and Review Procedure

## **Attachment Details**

**Document Description:** CoC Rating and Review Procedure: Public Posting Evidence

## **Attachment Details**

**Document Description:** CoC Process for Reallocating

## **Attachment Details**

**Document Description:** CoC Governance Charter

## **Attachment Details**

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

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** PHA Administration Plan

## **Attachment Details**

**Document Description:** CoC-HMIS MOU

## **Attachment Details**

**Document Description:**

## Submission Summary

Page	Last Updated
<b>1A. Identification</b>	11/12/2015
<b>1B. CoC Engagement</b>	Please Complete
<b>1C. Coordination</b>	11/16/2015
<b>1D. CoC Discharge Planning</b>	11/12/2015
<b>1E. Coordinated Assessment</b>	11/16/2015
<b>1F. Project Review</b>	Please Complete
<b>1G. Addressing Project Capacity</b>	11/12/2015
<b>2A. HMIS Implementation</b>	11/12/2015
<b>2B. HMIS Funding Sources</b>	11/12/2015
<b>2C. HMIS Beds</b>	11/12/2015
<b>2D. HMIS Data Quality</b>	11/12/2015
<b>2E. Sheltered PIT</b>	11/12/2015
<b>2F. Sheltered Data - Methods</b>	11/12/2015
<b>2G. Sheltered Data - Quality</b>	11/12/2015
<b>2H. Unsheltered PIT</b>	11/12/2015
<b>2I. Unsheltered Data - Methods</b>	11/12/2015
<b>2J. Unsheltered Data - Quality</b>	11/12/2015
<b>3A. System Performance</b>	11/12/2015
<b>3B. Objective 1</b>	11/16/2015
<b>3B. Objective 2</b>	Please Complete
<b>3B. Objective 3</b>	11/12/2015
<b>4A. Benefits</b>	11/12/2015
<b>4B. Additional Policies</b>	11/12/2015
<b>4C. Attachments</b>	Please Complete
<b>Submission Summary</b>	No Input Required

**Notes:**

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

**Subject:** FY2015 HUD CoC Application

**Date:** Monday, October 19, 2015 at 12:11:19 PM Eastern Daylight Time

**From:** Kelly, Taiisa

**To:** Moody, Frances

**CC:** Becker, Laurie, Shelia Carter

**Priority:** High

The Morris County Continuum of Care Executive Committee issued a request for proposals from agencies interested in funding through the HUD Continuum of Care program on May 4, 2015. The Executive Committee received the following applications from the New Jersey Department of Community Affairs:

Project Name	Total Request	Status
Shelter Plus Care – Morris (3AN, 3AP, 3AK)	\$475,078	Approved with reduced funding
3AB S+C Renewal	\$122,810	Approved at requested amount
Mental Health of Morris County Morris Phase 4	\$122,810	Rejected
Mental Health of Morris County 3AV Phase 4	\$136,489	Approved at higher amount

In making determinations about project funding for the FY2015 CoC process, the Executive Committee took into consideration your project application, program performance and information provided during your project presentation. Please see below for highlights regarding your project applications.

- Shelter Plus Care – Morris (3AN, 3AP, 3AK): The program is performing well however the project returns a significant amount of funding to HUD every year. As a result, the total project budget will be reduced to more closely reflect the actual amount of funding needed for rental assistance. The project should continue to serve 36 one bedroom units with a reduced rental assistance budget.
- 3AB S+C Renewal – The program is currently full but also indicated a significant return of funds to HUD. As this is the first renewal after an adjustment to the project in the FY2014 cycle, no adjustments will be made to the project budget. Renewal has been approved.
- Mental Health of Morris County Morris Phase 4: The new project application was incomplete. The project presentation did not match information submitted in the application. In addition, the application did not include a budget. The project application was rejected due to insufficient information to review the project.
- Mental Health of Morris County 3AV Phase 4 – The new project request was complete. This project will be funded through reallocation. As a result, the amount of funding awarded was increased to cover the full reallocation budget.

Please see below for detailed information regarding your approved budget.

Project Name	Unit mix	Rental Assistance	Supportive Services	Admin. Costs	Total
Shelter Plus	36 1bdm	\$359,216	\$0	\$15,862	<b>\$375,078</b>

Care – Morris (3AN, 3AP, 3AK)	units @ \$831.50 per unit				
3AB S+C Renewal	9 1bdm units @ \$1,063 per unit	\$114,804	\$0	\$8,006	<b>\$122,810</b>
Mental Health of Morris County 3AV Phase 4	11 1bdm units @ \$1,063 per unit	\$140,316	\$8,881	\$9,822	<b>\$159,019</b>

You may begin the process of completing the project’s application in e-snaps.

Please be aware that the following requirements and deadlines will be in effect for the FY2015 application cycle:

- Projects may not request more funding than is approved and shown in the above identified budget
- Applications must be completed in their entirety in the e-snaps system
- Once applications have been completed, **DO NOT** hit the submit button in the system
- Applicants must email a pdf copy of the completed application to Taiisa Kelly at [tkelly@monarchhousing.org](mailto:tkelly@monarchhousing.org) for review
- Applicants may only hit the submit button once the application has been reviewed and approved by Monarch

You may access the E-snaps website at the following location:

<https://esnaps.hud.gov/grantium/frontOffice.jsf>

All applicants must submit PDF copies of their application to Taiisa Kelly by **Wednesday, November 4, 2015**.

Applicants are strongly encouraged to access the resources below in completing their application:

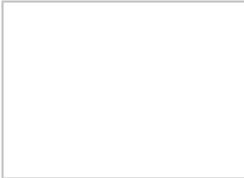
HUD FY2015 CoC NOFA:

<https://www.hudexchange.info/resources/documents/Revised-FY-2015-CoC-Program-NOFA.pdf>

E-snaps project applicant instructions:

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

Very Truly Yours,



**Taiisa Kelly** | Associate  
Monarch Housing Associates  
29 Alden Street, Suite 1B | Cranford, NJ 07016  
tel (908) 272-5363 x 223 | mobile (973) 768-2595 | fax (908) 382-6323  
[website](#) | [bio](#) | [vCard](#) | [map](#) | [email](#)



### **Building Homes, Transforming Lives**

**Confidentiality Note:** This e-mail and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this e-mail or any attachment is prohibited. If you have received this e-mail in error, please notify us immediately by returning it to the sender and delete this copy from your system. Thank you for your cooperation.

# Morris County Continuum of Care

Executive  
Committee

Rebekka Zydel  
*Chair*

Jodi Miciak  
*Vice Chair*

Michael Armstrong  
Jeff Bashe  
Joan Bruseo  
Bill Byrnes  
Jennifer Carpinteri  
Joseph Gallow  
Betsey Hall  
Patrice Picard  
Lou Schwarcz  
David Scott  
Patty Sly

To: All Morris County Community Agencies

From: Rebekka Zydel, Chair

Re: Morris County Continuum of Care 2015 Notice of Intent

Date: **Monday, May 4, 2015**

The Morris County Continuum of Care, a local planning committee charged with the responsibility of reducing the incidence of homelessness in Morris County, has begun the process for the U.S. Department of Housing and Urban Development (HUD) 2015 Continuum of Care Application.

In preparation for submission of the CoC application for HUD funding, the Morris County Continuum of Care Executive Committee is now accepting Notices of Intent from all agencies interested in applying for funding through the Morris County Continuum of Care process.

The HUD Continuum of Care program provides funding to programs serving homeless individuals and families in the community. Funding may be used for a variety of project types including permanent housing, transitional housing, safe havens and supportive services for those experiencing homelessness.

The Morris County Continuum of Care Executive Committee has established the following funding priorities for the 2015 Continuum of Care funding process:

1. Permanent Housing for the Chronically Homeless
2. Rapid Rehousing for homeless families
3. Projects working to remove barriers to program entry
4. Projects maximizing mainstream resources
5. Projects serving homeless veterans and homeless youth

For more details on the local funding priorities please see the attached document. The Morris County Continuum of Care Executive Committee is accepting applications from all agencies interested in obtaining CoC funds for both new and renewal projects. Additional information about the HUD CoC program please visit [www.hudexchange.info](http://www.hudexchange.info). Interested applicants are strongly encouraged to learn more about the HUD CoC program and understand the program requirements as well as the HUD funding priorities through reading the 2014 CoC NOFA and other program information available at [www.hudexchange.info](http://www.hudexchange.info).

Agencies interested in applying for funding must submit a **completed Notice of Intent by 4:30 pm, Friday, May 29, 2015**. The Notice of Intent Application Form may be found at the Morris County Department of Human Service's website <http://morrihumanservices.org/behavioral/continuum.asp> and submitted by mail or in person to the Morris County Department of Human Services, 30 Schuyler Place, 3<sup>rd</sup> Floor, P.O. Box 900, Morristown, New Jersey 07963-0900 Monday – Friday (excluding holidays).

Agencies submitting a Notice of Intent form will be required to participate in program presentations before the CoC review committee. The project presentation schedule will be announced within two weeks of the release of the 2015 CoC Notice of Funding Availability (NOFA) by HUD.

All potential applicants are strongly encouraged to attend a technical assistance session regarding the 2015 Notice of Intent process and Executive Committee funding priorities. The technical assistance session is mandatory for all agencies applying for new projects. The technical assistance session will be held:

**Friday, May 8, 2015**  
10:00am to 11:30am  
30 Schuyler Place, 3<sup>rd</sup> Floor Red Room  
Morristown, NJ

Call Shelia Carter at 973-285-6851 with any questions regarding the 2015 Morris County Notice of Intent process.

# Morris County Continuum of Care

## 2015 Funding Priorities

Executive  
Committee

Rebekka Zydel  
*Chair*

Jodi Miciak  
*Vice Chair*

The Morris County Continuum of Care Executive Committee has established the following funding priorities for the 2015 HUD Continuum of Care application.

Michael Armstrong  
Jeff Bashe  
Joan Bruseo  
Bill Byrnes  
Jennifer Carpinteri  
Joseph Gallow  
Betsey Hall Patrice  
Picard  
Lou Schwarcz  
David Scott  
Patty Sly

1. Permanent housing for the chronically homeless
  - a. Projects adding new permanent housing beds dedicated to the chronically homeless
  - b. Projects targeting existing permanent housing beds for the Chronically homeless
  - c. Projects targeting existing permanent housing beds for the chronically homeless at bed turnover
  - d. Projects dedicating existing permanent housing beds to the chronically homeless at bed turnover
  - e. Projects implementing a Housing First model in serving the chronically homeless population (Housing First model is defined as permanent housing programs with low barriers to program entry, primary goals related to housing placement and stabilization, services wrapped around participants according to their needs)
2. Permanent housing for homeless families using a rapid re-housing model
3. Programs working to remove barriers to CoC resources
  - a. Programs prioritizing those most in need of services (i.e. long histories of homelessness, unsheltered families, those who are medically vulnerable)
  - b. Programs that will actively participate in the coordinated assessment process including model development and implementation
  - c. Programs that work to reduce the number of people exiting prior to program completion or movement into permanent housing. Programs working to reduce exits for unknown reasons or negative reasons

4. Maximize use of mainstream resources
  - a. Projects that coordinate with existing mainstream resources to enroll participants in eligible programs and connect them to community based services
  - b. Projects that secure funding for services through mainstream resource programs and other partnerships
  - c. Programs that work to actively enroll participants in healthcare and assist participants in understanding and accessing expanded services available through the Affordable Care Act changes.
  
5. Programs serving other priority populations
  - a. Homeless Veterans
  - b. Homeless Youth

Morris County Continuum of Care  
CoC Application Notice of Intent  
Rank and Review Tool Guide

Executive  
Committee

Rebekka Zydel  
*Chair*

A rank and review tool allows the review committee to structure, then award allocations by: specifying and prioritizing needs with a list of criteria; then evaluating, rating, and comparing the different applications; and selecting the best matching application. The rank and review tool aids the review committee in determining the winning application amid all those sent in response to the release of the Notice of Intent.

Jodi Miciak  
*Vice Chair*

Michael Armstrong

Jeff Bashe

Joan Bruseo

Bill Byrnes

Jennifer Carpinteri

Joseph Gallow

Betsey Hall

Patrice Picard

Lou Schwarcz

David Scott

Patty Sly

The purpose of this guide is to define the determining factors and specify CoC Application Notice of Intent alignment.

**Determining Factor:** Program Performance (Data quality, Income growth/Connection to benefits, Housing stability.)

**Definition:** Applicant demonstrates ability to meet the Morris County CoC Performance Standards.

<b>Performance Standards</b>			
<b>Length of</b>			
	<b>HUD Standard</b>	<b>Morris County current Performance</b>	<b>Recommended Standard</b>
Short Term Emergency Shelter	High performing communities average	7 days	7 days
Long Term Emergency Shelter	length of stay across all programs 20	78.9 days Individuals; 143 days Families	90 days Individuals; 180 days Families
Transitional Housing	days or less <u>OR</u> 5% decrease in	8.5 months Individuals; 11.5 months	12 months Individuals; 18 months Families
Safe Haven	current baseline	6.8 months	15 months
Rapid Re-Housing	N/A	71 days	N/A
Permanent Housing	6 months or longer	43.4 months (3.5 years)	12 months
Services Only Programs	N/A	N/A	N/A

<b>Income/Benefit</b>			
	<b>HUD Standard</b>	<b>Morris County Current Performance</b>	<b>Recommended Standard</b>
Adults with earned income	20%	12%	17%
Adults with increase in monthly earnings	20%	0%	recommendation not to use this measure at this time
Adults with non-earned cash benefits	54%	29%	34%
Adults with increase in monthly earning	54%	3%	recommendation not to use this measure at this time
Adults with non-cash benefits	56%	37%	42%

<b>Successful Placement in Permanent</b>			
	<b>HUD Standard</b>	<b>Morris County Current Performance</b>	<b>Recommended Standard</b>
Emergency Shelter		12%	17%
Transitional Housing	65%	53%	65%
Safe Haven		38%	35%
Rapid Re-Housing		100%	95%
Permanent Housing	80%	70%	increase by 5% from current baseline
Services Only Programs		55%	N/A

**CoC Application Notice of Intent Alignment:**

Question #3 What are your program’s goals?

Question #6 How do you anticipate obtaining referrals for this program? What additional steps will be taken should you encounter difficulty in identifying eligible program participants that meet your target population?

Question #8 Please briefly describe relevant experience of the Grantee and any primary project partners in providing the proposed services.

Question #10 Please describe how proposed services and identified collaborations will help you achieve your program goals.

**Determining Factor:** Permanent housing for the chronically homeless

**Definition:**

- a) Projects adding new permanent housing beds dedicated to the chronically homeless
- b) Projects targeting existing permanent housing beds for the Chronically homeless
- c) Projects targeting existing permanent housing beds to the chronically homeless at bed turnover
- d) Projects dedicating existing permanent housing beds to the chronically homeless at bed turnover
- e) Projects implementing a Housing First model in serving the chronically homeless population (Housing First model is defined as permanent housing programs with low barriers to program entry, primary goals related to housing placement and stabilization, services wrapped around participants according to their needs)

**CoC Application Notice of Intent Alignment:**

Question #1 Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?

Question #7 Please describe the services to be offered to program participants.

**Determining Factor:** Permanent housing for homeless families using a rapid re-housing model

**Definition:** The Rapid Re-Housing model is defined as housing designed to assist the homeless, with or without disabilities, move as quickly as possible into permanent housing and achieve stability in that housing. Rapid re-housing assistance is time limited, individualized, flexible and designed to complement and enhance homeless system performance and the performance of other homeless projects. While it can be used for any homeless person, preliminary evidence indicates it can be particularly effective for households with children.

Rapid re-housing projects must serve households with children living on the streets or in emergency shelter.

**CoC Application Notice of Intent Alignment:**

Question #1 Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?

Question #7 Please describe the services to be offered to program participants.

**Determining Factor:** Programs working to remove barriers to CoC resources

**Definition:**

- a) Programs prioritizing those most in need of services (i.e. long histories of homelessness, unsheltered families, those who are medically vulnerable)
- b) Programs that will actively participate in the coordinated assessment process including model development and implementation
- c) Programs that work to reduce the number of people exiting prior to program completion or movement into permanent housing
- d) Programs working to reduce exits for unknown reasons or negative reasons
- e) Transitional Housing

**CoC Application Notice of Intent Alignment:**

Question #1 Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?

Question #7 Please describe the services to be offered to program participants.

**Determining Factor:** Maximize use of mainstream resources

**Definition:**

- a) Projects that coordinate with existing mainstream resources to enroll participants in eligible programs and connect them to community based services
- b) Projects that secure funding for services through mainstream resource programs and other partnerships
- c) Programs that work to actively enroll participants in healthcare and assist participants in understanding and accessing expanded services available through the Affordable Care Act changes

**CoC Application Notice of Intent Alignment:**

Question #1 Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?

Question #6 How do you anticipate obtaining referrals for this program? What additional steps will be taken should you encounter difficulty in identifying eligible program participants that meet your target population?

Question #7 Please describe the services to be offered to program participants.

Question #8 Please briefly describe relevant experience of the Grantee and any primary project partners in providing the proposed services.

Question #9 Please complete the following chart providing information about community partners assisting in the provision of services for this program

Partner Agency Name	Value of commitment (estimated cost per year)	Describe nature of services and collaboration with partner agency
i.e. Mental Health Service of Morris County	\$100,000	Formal Memorandum of Understanding in place for the provision of psychiatric services to program participants

**Determining Factor:** Program Impact

**Definition:** Programs critical to the homelessness infrastructure without which a gap in services would be created.

**CoC Application Notice of Intent Alignment:**

Project Description

Question #4 Please identify the gaps this program fills.

Question #10 Please describe how proposed services and identified collaborations will help you achieve your program goals.

**Determining Factor:** Serves Priority Populations

**Definition:**

- a) Homeless Veterans
- b) Homeless Youth
- c) Domestic Violence

**CoC Application Notice of Intent Alignment:**

Question #1 Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?

Question #5 Please identify the target population and how it compares to the larger community population in need of this service.

Question #7 Please describe the services to be offered to program participants.

**Determining Factor:** Participates in development of a coordinated assessment process

**Definition:** CoCs are expected to adopt a common assessment or intake form for people who need homeless services. Coordinated Assessment is a system in which all programs within a CoC work together to assure services are accessible and well-targeted to the immediate needs of the client. Applicant demonstrates participation in the development and implementation of the coordinated assessment system.

**CoC Application Notice of Intent Alignment:**

Question #14 Please describe your agency's level of participation in local planning processes (i.e. CoC (formerly known as CEAS), sub-committees, Community Development Consolidated Plan, etc.)

**Determining Factor:** Agency Track Record

**Definition:** Applicant can demonstrate ability to successfully deliver services, program compliance, and impact.

**CoC Application Notice of Intent Alignment:**

Question #2 What is your agency's mission and how does this program fit into your agency's mission?

Question #6 How do you anticipate obtaining referrals for this program? What additional steps will be taken should you encounter difficulty in identifying eligible program participants that meet your target population?

Question #8 Please briefly describe relevant experience of the Grantee and any primary project partners in providing the proposed services.

Question #12 Please describe your long-term plans to sustain the program should there be decreases in HUD funding.

Question #15 Have you ever been denied funds (HUD or otherwise) and why?

### Scoring Matrix

Along the left hand side are listed all of the applicants. The determining factors are along the top (factors that have been identified as priorities). The weight for each factor is along the bottom (the weight reflects the importance of the priority).

The chart shows Permanent Housing for the Chronically Homeless as the highest priority, with the weight of 4, while Agency Track Record is weighted as a 2. This means that Addressing Chronic Homelessness is twice as important a factor as Agency Track Record.

Programs are rated on a scale of 0-2 in each category. (0 does not meet, 1 partially meets, 2 fully meets) Totals are the sum of the category rating multiplied by the category weight. Recommendations for funding will be based on the program receiving the highest total scores.

Rating Calculation Example:  $1 \times 4 = 4$ ,  $2 \times 4 = 8$ ,  $2 \times 3 = 6$ ,  $2 \times 3 = 6$ ,  $0 \times 3 = 0$ ,  $1 \times 2 = 2$ ,  $2 \times 2 = 4$

$$4 + 8 + 6 + 6 + 0 + 2 + 4 = 30$$

	Program Performance (Data quality, income growth/connection to benefits, housing stability)	Permanent housing for the chronically homeless (permanent housing programs, new beds dedicated to chronically homeless, etc.)	Permanent housing for homeless families using a rapid re-housing model	Programs working to remove barriers to CoC resources	Maximizes Mainstream Resources and Supportive Services	Program Impact	Serves Priority Populations (veterans, youth, domestic violence)	Participates in development of a coordinated assessment process	Agency Track Record (i.e. demonstrated ability to successfully deliver services, program compliance and, Impact)	totals
Perfect Score	2	2			2	2	2	2	2	48
Example	1	2	0	0	2	2	0	1	2	30
weight	4	4	4	3	3	3	3	2	2	

Morris County  
2015 CoC  
Notice of Intent

**Applicant:** \_\_\_\_\_  
**Project Name:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

**Type of Funding** (double click the appropriate box and select "checked"):

- Permanent Supportive Housing     Rapid Re-Housing     Transitional Housing     Safe Haven  
 Supportive Services Only

**Project Term:** (note: renewal projects 1yr only)

- 1 year     2 years     3 years     5 years

**Total Project Cost:** \_\_\_\_\_ \$

**Total Amount Requested in this Application:** \_\_\_\_\_ \$

**Percent of project cost being requested:** \_\_\_\_\_ %

**Number of unduplicated people to be served by project:** \_\_\_\_\_

**Population to be served:** \_\_\_\_\_

**Project location address:** \_\_\_\_\_

**Project Description:** Briefly describe the activity for which you are requesting funds. (please limit your answers to 150 words or less)

**Certification:** *The undersigned certifies that to the best of his or her knowledge and belief, data in this application and its attachments are true and correct, the document has been duly authorized by the governing body of the organization, and the organization will comply with all regulations and guidelines applicable to Morris County's Continuum of Care program. The applicant agrees that this application is a public document and is subject to the Freedom of Information Act.*

**Printed Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please answer the following questions about the program you are applying for in 10 pages or less (using 12 point font). The budget pages as well as the front summary page are not included in the 10 page total. Program applications that exceed the 10 page limit will not be considered for funding.

- 1) Which funding priority is your project addressing? What specific activities/services does your project offer to meet the identified need?
  
- 2) What is your agency’s mission and how does this program fit into your agency’s mission?
  
- 3) What are your program’s goals?
  
- 4) Please identify the gaps this program fills.
  
- 5) Please identify the target population and how it compares to the larger community population in need of this service.
  
- 6) How do you anticipate obtaining referrals for this program? What additional steps will be taken should you encounter difficulty in identifying eligible program participants that meet your target population?
  
- 7) Please describe the services to be offered to program participants.
  
- 8) Please briefly describe relevant experience of the Grantee and any primary project partners in providing the proposed services.
  
- 9) Please complete the following chart providing information about community partners assisting in the provision of services for this program.

Partner Agency Name	Value of commitment (estimated cost per year)	Describe nature of services and collaboration with partner agency
<i>i.e. Mental Health Service Agency of Morris County</i>	\$100,000	<i>Formal Memorandum of Understanding in place for the provision of psychiatric services to program participants</i>

- 10) Please describe how proposed services and identified collaborations will help you achieve your program goals.

11) Please identify/describe any changes made to your program model and/or budget within the last 3 years? Do you anticipate and major changes to your program over the next year?

12) Please describe your long-term plans to sustain the program should there be decreases in HUD funding.

13) Please provide a list of anticipated funding and services you will be able to leverage for this project (leveraging includes internal agency services/programs as well as services from community agencies both cash and in-kind)

Type of Contribution	Source	Level of Commitment (signed agreement, agreement pending, anticipated agreement, proposed agreement)	Total Value
			\$
			\$
			\$
			\$
			\$
			\$
			\$
		<b>TOTAL:</b>	\$

14) Please describe your agency’s level of participation in local planning processes (i.e. CoC (formerly known as CEAS), sub-committees, Community Development Consolidated Plan, etc).

15) Have you ever been denied funds (HUD or otherwise) and why?

16) What is your capacity to use the Homeless Management Information System (HMIS)?

**For Renewal Projects:**

Year awarded: \_\_\_\_\_ Grant Number: \_\_\_\_\_ Operating Year: \_\_\_\_\_

Please briefly describe your project goals and your progress in reaching them.

Please provide:

Unduplicated number of participants served: \_ \_\_\_\_\_

Unduplicated number of participants exiting the program within the prior 12 months: \_ \_\_\_\_\_

Unduplicated number of participants moving successfully into permanent housing at program exit:  
\_\_\_\_\_

Number of participants returning to program for homeless assistance within a 2 year time frame:

\_\_\_\_\_

Please briefly describe barriers to addressing participant needs. How did you solve/address those barriers?

Were there any unused funds at the end of your operating year?

\_\_\_\_\_

Do you regularly enter data into the HMIS database?

\_\_\_\_\_



## Summary Budget

<b>Component Type</b> (please double click appropriate box and select checked) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>TH PSH RRH SSO HMIS Safe Haven</b>		<b>Grant Term</b> (please double click appropriate box and select checked) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>1 yr 2 yrs 3 yrs 5 yrs 15 yrs</b>		
Proposed CoC Activities	CoC Dollars Requested	HUD Cash Match	Other Cash/in-Kind Match or Leveraging	Total Project Budget
<b>1. Acquisition</b>				
<b>2. Rehabilitation</b>				
<b>3. New Construction</b>				
<b>4. Subtotal (Lines 1 through 3)</b>				
<b>5. Real Property Leasing</b>				
<b>6. Rental Assistance</b>				
<b>7. Supportive Services</b> From Supportive Services Budget Chart				
<b>8. Operations</b> From Operating Budget Chart				
<b>9. HMIS</b>				
<b>10. Subtotal (lines 4 through 9)</b>				
<b>11. Administrative Costs (Up to 7% of line 10)</b>				
<b>12. Total CoC Request (Total lines 10 and 11)</b>				

Definitions:

HMIS Homeless Management Information System  
 TH Transitional Housing  
 PSH Permanent Supportive Housing  
 RRH Rapid Re-housing  
 SSO Supportive Services Only  
 Safe Haven Low barrier shelter for people with mental illness, substance abuse challenges, serving no more than 25 people in one location.

Please note there is a 25% cash match requirement for all line items except leasing.

## Supportive Services Budget

<i>Supportive Services Costs</i>	CoC Dollars Requested			
	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>	<b>Total</b>
<b>1. Assessment of Service Needs</b> Quantity:				
<b>2. Assistance with Moving Costs</b> Quantity:				
<b>3. Case Management</b> Quantity:				
<b>4. Child Care</b> Quantity:				
<b>5. Education Services</b> Quantity:				
<b>6. Employment Assistance</b> Quantity:				
<b>7. Food</b> Quantity:				
<b>8. Housing/Counseling Services</b> Quantity:				
<b>9. Legal Services</b> Quantity:				
<b>10. Life Skills</b> Quantity:				
<b>11. Mental Health Services</b> Quantity:				
<b>12. Outpatient Health Services</b> Quantity:				
<b>13. Outreach Services</b> Quantity:				
<b>14. Substance Abuse Treatment Services</b> Quantity:				
<b>15. Transportation</b> Quantity:				
<b>16. Utility Deposits</b> Quantity:				
<b>17. Operating Costs</b> Quantity:				
<b>18. Total CoC dollars requested:** (lines 1 to 17)</b>				
<i>*If not specified, the costs will be removed from the budget.  **Total of Line 18 must match line 7, CoC Dollars Requested on the Summary Budget Page.</i>				

## Operating Budget

<i>Operating Costs</i>	CoC Dollars Requested			
	Year 1	Year 2	Year 3	Total
<b>1. Maintenance/Repair</b> Quantity:				
<b>2. Property Taxes and Insurance</b> Quantity:				
<b>3. Replacement Reserve</b> Quantity:				
<b>4. Building Security</b> Quantity:				
<b>5. Electricity, Gas, and Water</b> Quantity:				
<b>6. Furniture</b> Quantity:				
<b>7. Equipment (lease, buy)</b> Quantity:				
<b>8. Total CoC Operating Dollars Requested (lines 1 to 7): **</b>				
<i>*If not specified, the costs will be removed from the budget.</i> <b>**Total of Line 8 must match line 8 CoC Dollars Requested on the Summary Budget Page.</b>				

## Rental Assistance/Leasing Budget

<b>b. Component Types (Check only one box)</b> <input type="checkbox"/> TRA <input type="checkbox"/> SRA <input type="checkbox"/> PRA <input type="checkbox"/> Leasing <input type="checkbox"/> Short-Term Rental Assistance <input type="checkbox"/> Medium-term Rental Assistance	<b>c. Grant Term (Renewals are 1 year only)</b> <b>(Check only one box)</b> <input type="checkbox"/> 1 yr <input type="checkbox"/> 2 yrs <input type="checkbox"/> 3 yrs <input type="checkbox"/> 5 yrs <input type="checkbox"/> 15 yrs
--	--

<b>a. Check the box to indicate the type of program:</b> <input type="checkbox"/> Leasing <input type="checkbox"/> Rental Assistance				
<b>b. Name of metropolitan or non-metropolitan Fair Market Rent (FMR) area:</b>				
<b>d. Size of Units</b>	<b>e. Number Of Units</b>	<b>f. FMR or Actual Rent**</b>	<b>g. Number of Months</b>	<b>h. Total</b>
SRO	x	x	=	\$
0 Bedroom	x	x	=	\$
1 Bedroom	x	x	=	\$
2 Bedrooms	x	x	=	\$
3 Bedrooms	x	x	=	\$
4 Bedrooms	x	x	=	\$
5 Bedrooms	x	x	=	\$
6 Bedrooms	x	x	=	\$
Other: _____	x	x	=	\$
<b>i. Totals:</b>	x	x	=	\$

The current FMR is listed below:

SRO	\$ 768
0 Bedroom	\$ 1,025
1 Bedroom	\$ 1,063
2 Bedrooms	\$ 1,269
3 Bedrooms	\$ 1,637
4 Bedrooms	\$ 1,871

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# Community & Behavioral Health Services

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## Morris County Continuum of Care

### 2015-2016 HUD Notice of Intent to Submit an Application

The HUD Continuum of Care program provides funding to programs serving homeless individuals and families in the community. The Morris County Continuum of Care Executive Committee is now accepting Notices of Intent from all agencies interested in applying for funding through the Morris County Continuum of Care process. **Notices are due Friday, May 29, 2015, by 4:30pm.**

All potential applicants are strongly encouraged to attend a technical assistance session regarding the 2015 Notice of Intent process and Executive Committee funding priorities to be held on **Friday, May 8, 2015**, 10:00am to 11:30am at 30 Schuyler Place, 3rd Floor Red Room, Morristown.

- [Notice of Intent Letter \(/behavioral/pdfs/15NOILetter.pdf\)](#)
- [Funding Priorities \(pdfs/15NOIFunding.pdf\)](#)
- [Notice of Intent \(pdfs/15NOIApp.docx\)](#)
  - Right click on the link and select "Save as" to download the form. Please fill this out in Microsoft Word, print and mail to  
Morris County Department of Human Services  
Attn: Shelia Carter  
PO Box 900  
Morristown, NJ 07963-0900
  - Or return in person to 30 Schuyler Place, 3rd Floor, Morristown
- [CoC Selection Process \(pdfs/15CoCSelection.pdf\)](#)
- [Rank and Review Tool Guide \(/behavioral/pdfs/15NOIGuide.pdf\)](#)
- [Performance Standards \(/behavioral/pdfs/15NOIStandards.pdf\)](#)

### [2014-2015 HUD Notice of Intent to Submit an Application \(#\)](#)

The HUD Continuum of Care program provides funding to programs serving homeless individuals and families in the community. The Morris County Continuum of Care Executive Committee is now accepting Notices of Intent from all agencies interested in applying for funding through the Morris County Continuum of Care process. **Application due Monday, August 4, by 4:30pm.**

All potential applicants are strongly encouraged to attend a technical assistance session regarding the 2014 Notice of Intent process and Executive Committee funding priorities to be held on **Thursday, July 24, 2014**, 10:00am to 11:30am at 30 Schuyler Place, 3rd Floor Red Room, Morristown.

- [Notice of Intent \(/behavioral/pdfs/14NOILetter.pdf\)](/behavioral/pdfs/14NOILetter.pdf)
- [Funding Priorities \(/behavioral/pdfs/14Funding.pdf\)](/behavioral/pdfs/14Funding.pdf)
- [Application \(/behavioral/pdfs/14NOIApp.pdf\)](/behavioral/pdfs/14NOIApp.pdf)
  - Right click on the link and select "Save as" to download the application. Please fill out the form on your computer using Adobe Reader, then print and mail it in.
- [Rank and Review Tool Guide \(/behavioral/pdfs/14NOIGuide.pdf\)](/behavioral/pdfs/14NOIGuide.pdf)
- [Performance Standards \(/behavioral/pdfs/14NOIStandards.pdf\)](/behavioral/pdfs/14NOIStandards.pdf)

## [2013-2014 HUD Submission \(#\)](#)

View Morris County's [2013-2014 Continuum of Care Exhibit 1 \(/behavioral/pdfs/2013 to 2014 CoC Application.pdf\)](/behavioral/pdfs/2013 to 2014 CoC Application.pdf) for homeless services to the U.S. Department of Housing and Urban Development.

- [2013 - 2014 Priority listing and ranking information \(/behavioral/pdfs/FY2013ProjectPriorityRanking.pdf\)](/behavioral/pdfs/FY2013ProjectPriorityRanking.pdf)
- [Ten-Year Plan to End Homelessness \(/behavioral/pdfs/Morris County 10 Year Plan.pdf\)](/behavioral/pdfs/Morris County 10 Year Plan.pdf)

## [About \(#\)](#)

The Morris County Continuum of Care is both a strategic planning body and a vehicle to carry out the responsibilities of a Continuum of Care as defined by the Department of Housing and Urban Development, which includes but are limited to the following duties:

1. To operate the Continuum of Care as prescribed by HUD in the Continuum of Care program regulations
2. To designate and operate HMIS (Homeless Management Information System)
3. To coordinate and implement a system to meet the needs of the homeless population within the CoC area
4. To prepare and oversee an annual application for federal funds targeted to individuals who are homeless
5. To oversee and implement the local 10-year plan and other local activities associated with preventing and ending homelessness locally.
6. To ensure that the CoC has strong oversight and guidance through the community-led CoC

Executive Committee and its CoC Committee.

## **CoC Executive Committee (#)**

1. The Executive Committee is made up of not more than 13 members. Members represent agencies of up to nine voting members that do not receive HUD CoC funding and four nonvoting “exofficio” members that receive HUD CoC funds.
2. The committee shall serve as the primary decision making body of the Morris County CoC and shall provide leadership and direction in all aspects related to the governance and management of the Morris County CoC.
3. The Executive Committee is charged with oversight and management of CoC activities. The Executive Committee shall utilize input from the Morris County CoC and ad-hoc subcommittees in making decisions.

### **2015 Meeting Schedule**

- [January 29 \(pdfs/AgendaCoC2015-01-29.pdf\)](#) \*
- [March 26 \(pdfs/AgendaCoC2015-03-26.pdf\)](#)
- [May 28 \(pdfs/AgendaCoC2015-05-28-new.pdf\)](#)
- [July 23 \(pdfs/AgendaCoC2015-07-23.pdf\)](#)
- [September 24 \(pdfs/AgendaCoC2015-09-24.pdf\)](#)
- November 19
  - (The fourth Thursday in November is Thanksgiving. We will need to meet the 3rd Thursday this month.)

The CoC Executive Committee meets on the third Thursday of every other month from 10:00 a.m. – 11:30 a.m. in the Red Conference Room, 3rd floor, 30 Schuyler Place, Morristown.

\*Fourth Thursday due to a conflict.

### **2015 Minutes**

- [January 29 \(pdfs/MinutesCoC2015-01-29.pdf\)](#)
- [March 26 \(pdfs/MinutesCoC2015-03-26.pdf\)](#)
- [May 28 \(pdfs/MinutesCoC2015-05-28.pdf\)](#)
- [July 23 \(pdfs/MinutesCoC2015-07-23.pdf\)](#)

### **2014 Minutes**

- [January 28 \(pdfs/MinutesCoC2014-01-28.pdf\)](#)
- [February 27 \(pdfs/MinutesCoC2014-02-27.pdf\)](#)
- [March 27 \(pdfs/MinutesCoC2014-03-27.pdf\)](#)
- [May 22 \(pdfs/MinutesCoC2014-05-22.pdf\)](#)
- [July 24 \(pdfs/MinutesCoC2014-07-24.pdf\)](#)

- [October 2 \(pdfs/MinutesCoC2014-10-02.pdf\)](#)
- [November 20 \(pdfs/MinutesCoC2014-11-20.pdf\)](#)

## Officers

**Voting Members:** Jeffrey Bashe, Morris County Human Services Advisory Council; Joan Bruseo, Morris County Office of Temporary Assistance; Joseph Gallow, Consumer Advocate; Jodi Miciak, Vice Chair, United Way of Northern New Jersey; Patrice Picard, Cornerstone Family Programs; Jennifer Carpinteri, Morris County Department of Human Services; Dave Scott, Market Street Mission; Rebekka Zydel, Chair, Child & Family Resources

**Ex-Officio Non-Voting Members:** Mike Armstrong, Community Hope; Betsey Hall, Homeless Solutions; Lou Schwarcz, Mental Health Association of Morris County; Patty Sly, Jersey Battered Women's Services

## [CoC Committee \(#\)](#)

1. Membership is open to all interested community members and organizations. The CoC encourages participation from anyone serving those at-risk homelessness, currently or formally homeless.
2. Agencies and individuals wishing to become formal members must submit a Morris County CoC application to the CoC Lead Agency which includes contact information, role in the community and designated voting representative.
3. The CoC is responsible for voting on the Executive Committee membership and may occasionally vote on other items as prescribed by the Executive Committee.

If you are interested in becoming a member of the Morris County Continuum of Care Committee, please fill in the form below to register. You may designate an alternate who can serve as a voting member if you are unable to attend a meeting.

Read the [Committee Bylaws \(pdfs/CoCbylaws.pdf\)](#).

# Morris County Continuum of Care Membership Form

---

**Name**

First Last

**Organization**

**Address**

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

**Email**

**Phone Number**

 -  - 

### ### ####

**Alternate Member's Name**

First Last

**Alternate Member's Email**

# Morris County Continuum of Care

## Morris County Local Selection Process

The CoC Executive committee shall be responsible for identifying the projects eligible to apply for funding through the annual continuum of care application. The Executive Committee shall determine which projects are supported for funding and the level of funding applied to supported projects through the HUD CoC process. In order to complete the local review and selection process the Executive Committee shall take the following steps:

Executive  
Committee

Hebeka Zydel  
Chair

Edi Miciak  
Executive Chair

Michael Armstrong  
Jeff Bashe  
Jan Bruseo  
Jennifer Carpinteri  
Joseph Gallow  
Telsey Hall  
Atrice Picard  
Dou Schwarcz  
David Scott  
Cathy Sly

- Establish local priorities – may reflect specific populations, specific project types or other priorities as determined by the executive committee based on community need and input
- Appoint a Review committee – the review committee shall be made up of non-conflicted members which may include members of the executive committee, members of the general Morris County CoC membership or other members within the community
- Establish timeframes for release of application, submission deadlines, project presentations and approving final determinations
- Review and approve recommendations of the review committee
- Notify applicants of final recommendations – may be done through the CoC Lead Agency or Executive Committee Chair

### Review Committee

#### Membership

- The Executive Committee Chair and the CoC Lead Agency shall identify a slate of review committee members.
- Members may be selected from the Executive Committee, the full Morris County Continuum of Care membership, other Morris County human service committees or general community members willing to participate in the process and with a basic understanding of review committee processes and homelessness in Morris County
- The voting members of the Executive Committee shall approve the slate of review committee membership through a majority vote of those present.
- All review committee members will be required to sign a conflict of interest statement and must disclose any real or perceived conflicts of interest

#### Responsibilities

- Sign Conflict of Interest Statement and disclose any real or perceived conflict of interest to the Executive Committee prior to beginning the work of the review committee
- Review the notice of intent form and update according to locally established priorities
- Review and update the scoring tool to correspond with the updated notice of intent form and local priorities
- Submit the updated notice of intent form and scoring tool to the executive committee for review & approval
- Schedule project presentations
- Review all applications submitted as distributed by the CoC Lead Agency

# Morris County Continuum of Care

- Listen to project presentations & prepare questions as necessary in making funding decisions
- Score each project based on the established scoring criteria
- Identify approved projects funding levels based on project scores, local priorities and HUD guidance provided through the annual CoC NOFA

Executive  
Committee

Hebeka Zydel  
Chair

Edi Miciak  
Vice Chair

Michael Armstrong  
Jeff Bashe  
Jan Bruseo  
Jennifer Carpinteri  
Joseph Gallow  
Teresa Hall  
Alicia Picard  
Douglas Schwarcz  
David Scott  
Cathy Sly

## Local Selection Process

All agencies and programs interested in applying for new or renewal funding through the Continuum of Care program must submit a notice of intent within the deadlines established by the Executive Committee. Agencies submitting requests for funding may also be required to present their project before the review committee prior to final determinations of funding.

### Notice of Intent Form and Content

The Notice of Intent Form is designed to collect project information necessary to assist the review committee in making determinations about the which projects to support for funding and at what level. The Notice of intent form shall be reviewed annually by the appointed review committee and updated to reflect the local priorities and identified scoring criteria. The updated notice of intent form shall be submitted to the Executive Committee for review and approval prior to release to the public.

The Notice of Intent form shall contain the following items at a minimum:

- Project name, type and target population
- Detailed budget
- Identification of how the project fits in with the local priorities

### Scoring Criteria

All projects submitting a Notice of Intent will be evaluated against scoring criteria recommended by the review committee and approved by the Executive Committee. Each project will be scored and ranked based on information provided through the Notice of Intent form, Project Presentation and CoC monitoring results. The Scoring Criteria will be updated annually by the review committee based on the established priorities and any other relevant information identified by the review committee.

Scoring Criteria will include the following items at a minimum:

- Project fit with established priorities
- Project monitoring results (renewal projects)
- Project performances based on locally established standards (renewal projects)

### Publication of information regarding Notice of Intent process

The Executive Committee shall authorize the release of the request for Notices of Intent after approval of any updates to the Notice of Intent application, scoring criteria and timeline. The Notice of Intent announcement shall be widely marketed. Information regarding the Notice of Intent shall be disseminated through:

- Publication on CoC Lead Agency Website

# Morris County Continuum of Care

- Emails to CoC listserv and other human services and housing listservs
- Announcements at CoC and other community meetings

Executive  
Committee

Hebeka Zydel  
Chair

Edi Miciak  
Vice Chair

Michael Armstrong  
Jeff Bashe  
Jan Bruseo  
Jennifer Carpinteri  
Joseph Galloway  
Kelsey Hall  
Astrice Picard  
Dou Schwarcz  
David Scott  
Cathy Sly

The Notice of Intent Announcement shall include the following information:

- CoC Funding Priorities
- Notice of Intent Application
- Notice of Intent Scoring Criteria
- Submission Deadline
- Appeals Process information

## Submission Process

All agencies interested in receiving funding through the HUD Continuum of Care must submit a Notice of Intent by the identified deadline in order to be considered for funding. A separate Notice of Intent must be completed for each project requesting funding including both new projects and renewal projects. Programs (both new and renewal) that fail to submit a notice of intent by the approved deadline will not be considered for funding.

All agencies submitting a Notice of Intent must participate in a mandatory Morris County Notice of Intent Technical Assistance session. The Notice of Intent technical assistance session shall cover:

- The eligible activities and costs allowable through HUD CoC funding
- Local CoC Funding Priorities
- How to complete the Notice of Intent Form
- Notice of Intent scoring criteria
- Anticipated selection timeline

Notices of Intent must be complete and submitted in the format identified in the Notice of Intent Announcement. Incomplete applications may have points deducted or be removed from consideration if the review committee feels there is inadequate information to properly score the project.

Notice of Intent applications submitted after the submission deadline will not be considered. Agencies that have extreme extenuating circumstances that will prevent them from submitting by the identified deadline may request a waiver. The waiver must be submitted in writing to the CoC Lead Agency at least 3 business days prior to the submission deadline. The waiver must include the reason for the agency's inability to submit by the identified deadline and the anticipated date when the completed application can be submitted. The CoC Lead Agency will share the request with the Executive Board Chair and Vice Chair and make a determination about whether to grant an extension. Waivers will be reviewed on a case-by-case basis.

## Project Presentation

Agencies submitting a Notice of Intent application for proposed new and renewal projects must present the project before the local review committee. The project presentations will be scheduled after the release of the HUD Continuum of Care NOFA.

# Morris County Continuum of Care

The project presentations will provide an opportunity for the review committee to gain a better understanding of the programs and clarification of program information. The review committee will have an opportunity to ask questions of applicants based on information in the HUD CoC NOFA that may not have been included in the original Notice of Intent Application. Agencies submitting Notice of Intent Applications are strongly encouraged to read the HUD CoC NOFA prior to the project presentation. Agencies completing project presentations before the review committee should be prepared for the following:

- 5 minute overview of the program
- Address questions related to information included in Notice of Intent Application
- Address questions related to project monitoring and performance
- Address questions related to information from the HUD CoC NOFA

## Project selection and announcements

The review committee shall score each project application using the approved scoring criteria based on information provided in the application as well as through the project presentations. Each project will be scored and ranked by the review committee.

Using information from the HUD CoC NOFA, the review committee will determine the maximum amount of funding that will be allocated to projects that are supported for funding. The maximum funding allowable for renewal projects will be based on the approved funding levels identified on the HUD approved Grant Inventory Worksheet. Renewal projects seeking to make budget changes must do so directly with HUD prior to the finalization of the Grant Inventory Worksheet.

The review committee will submit project scoring, rank and funding level recommendations to the Executive Committee for approval prior to notification of applicants. The Executive Committee review and approval of CoC funding recommendations may be done through a special meeting, via email, or conference call if timing is an issue in relation to the HUD CoC application deadline.

Upon approval from the Executive Committee, the CoC Lead Agency shall send notification letters to all agencies submitting Notice of Intent applications for new and renewal projects. The Notice of Intent application shall identify the maximum amount of funding approved for the project as well as any additional requirements identified by the Executive Committee. Projects supported for funding may not submit HUD CoC Exhibit 2 applications with a funding request greater than that approved by the Executive Committee.

Notification letters sent to projects that have been denied funding or awarded reduced funding shall indicate the Executive Committee decision to deny or reduce funding. The letter shall include information regarding the appeals process. Projects that have been denied funding may not submit a HUD CoC Exhibit 2 application.

## Appeals process

Executive  
Committee

Bekka Zydel  
Chair

Edi Miciak  
Vice Chair

Michael Armstrong  
Staff

Jan Bruseo

Jennifer Carpinteri

Joseph Galloway

Christy Hall

Tracy Picard

Don Schwarcz

David Scott

Atty Sly

# Morris County Continuum of Care

Agencies that have been denied funding or received reduced funding through the local selection process may appeal the decision of the review committee. An appeal letter must be submitted to the CoC Lead Agency within 3 business days from the receipt of the notification letter. The appeals letter must include the following information:

- Project name and requested amount
- Explanation of error in review committee determination; or
- Explanation of error in project selection process/procedures

The CoC Lead Agency will have 3 business days to notify the appeals committee of the submission of an appeal letter. The Appeals committee shall be comprised of 1 member selected by the CoC full membership, 1 member selected by the CoC Executive Committee and 1 member selected by the Human Service Advisory Council.

The Appeal Committee shall have up to 5 business days to review the letter submitted by the agency requesting an appeal. The Appeal Committee shall be empowered to request additional information from the agency submitting the appeal and/or from the CoC review committee. The Appeal Committee shall set a date for a hearing which shall be held within 14 business days of the receipt of the appeal letter. The Appeal hearing shall include Appeal Committee members, one representative from the CoC Review Committee, and one representative from the agency submitting an appeal. Upon hearing from both the review committee and the agency, the Appeal Committee shall make a final determination regarding funding decisions. Final notification shall be sent to the appealing Agency and the CoC Executive Committee in writing no more than 5 business days after the Appeals hearing. Determinations by the Appeals Committee shall be final.

Executive  
Committee

Bekka Zydel  
Chair

Edi Miciak  
Vice Chair

Michael Armstrong  
Staff Bashe

Jan Bruseo  
Jennifer Carpinteri

Joseph Galloway  
Betsey Hall

Tracie Picard  
Dou Schwarcz

David Scott  
Cathy Sly

# **The Morris County Continuum of Care By-Laws**

## **Article I: Organization**

### **Section 1: Name**

The name of this body shall be the Morris County Continuum of Care (CoC), hereafter referred to as the Morris County CoC.

### **Section 2: Geographic Area**

The Morris County CoC will enable homeless provider agencies to serve the homeless and those at-risk of homelessness in the Morris County geographic area.

### **Section 3: Address**

The principal address of the Morris County CoC shall be the County of Morris Department of Human Services at P.O. Box 900, Morristown, New Jersey 07963-0900.

## **Article II: Establishment**

The Morris County CoC is an independent body overseeing the local homeless planning process and is established through a consortium of community providers, advocates and stakeholders.

## **Article III: Mission & Purpose**

### **Section 1: Mission**

The mission of the Morris County CoC is to develop and implement comprehensive strategies to address and prevent homelessness in Morris County.

### **Section 2: Purpose**

The Morris County CoC is both a strategic planning body and a vehicle to carry out the responsibilities of a Continuum of Care as defined by the US Department of Housing and Urban Development (HUD), which include but are not limited to the following duties:

1. To operate the Continuum of Care as prescribed by HUD in the continuum of care program regulations
2. To designate and operate HMIS;
3. To coordinate and implement a system to meet the needs of the homeless population within the CoC area;
4. To prepare and oversee an annual application for federal funds targeted to homelessness;
5. To oversee and implement the local ten year plan and other local activities associated with preventing and ending homelessness locally

## **Article IV: Structure**

The Morris County CoC is an independent body tasked with overseeing the homeless planning efforts of Morris County. The Morris County CoC shall report to an elected Executive Committee.

## **Article V – Morris County CoC Membership**

### **Section 1: Eligibility**

Membership is open to all interested community members and organizations. The Morris County CoC encourages participation by anyone serving the homeless, currently homeless, has been homeless or at-risk of homelessness.

### **Section 2: Membership Application Process**

- a. Application Content - Agencies and individuals wishing to become formal members of the Morris County CoC must complete the Morris County CoC application which shall include contact information, role in the community and identify designated voting representative.
- b. Application submission - Membership applications must be submitted to the Morris County CoC Lead Agency. Applications will be accepted on a rolling basis.

### **Section 3: Voting**

- a. Voting areas - The Morris County CoC will be responsible for voting on the Executive Committee membership and may occasionally vote on other items as prescribed by the Executive Committee.
- b. Voting Eligibility - Each organization and individual member shall have one vote. Voting is restricted to those formal Morris County CoC members that have submitted a membership application. Only individuals identified as the voting representative may participate in any voting process.
- c. Quorum - The presence of 51% of the Morris County CoC membership will constitute a quorum.

### **Section 4: Meetings**

- a. Meeting accessibility - Morris County CoC membership meetings shall be open to all individuals, agencies, advocates and stakeholders interested in participating in homeless planning activities.
- b. Schedule - Morris County CoC members are expected to participate in regularly scheduled meetings. Full membership meetings will be held at least 6 times per year, but may meet more often as determined by the Executive Committee. The CoC Lead Agency shall determine the time and place of each meeting.
- c. Notices - Meeting notices will be sent out by the CoC Lead Agency at least one week prior to the meeting date and shall include the tentative agenda, and minutes from the previous meeting.
- d. Minutes – Minutes shall be kept for every meeting. Minutes from the most recent previous meeting must be approved by the membership. Minutes will be kept by the CoC Lead and made available for public review on the Morris County Human Services website and by request.

## **Article VI: Morris County CoC Executive Committee**

### **Section 1: Structure**

The Morris County CoC shall be governed by an Executive Committee made up of not more than 13 members. Membership includes up to 9 voting members that do not receive HUD CoC funds and 4 nonvoting “ex-officio” members that receive HUD CoC funds. The Executive Committee shall serve as the primary decision making body for the Morris County CoC and shall provide leadership and direction in all aspects related to the governance and management of the Morris County CoC.

### **Section 2: Executive Committee Duties**

The Executive committee shall be charged with oversight and management of CoC activities. The Executive Committee shall utilize input from the Morris County CoC and any ad-hoc/sub-committees in making decisions. The responsibilities of the Executive Committee shall include but not be limited to:

- Set priorities for homelessness services and housing based on analysis of community data and need, in accordance with HUD and the State of New Jersey.
- Set system performance standards and written standards for homeless programs operating in Morris County
- Approve funding recommendations for the HUD Homeless Assistance Program
- Participate in the funding recommendation process for any local funds directed towards homeless housing and services
- Provide oversight for the development and implementation of the system and program monitoring process.
- Oversee the development and implementation of a ten year plan to end homelessness
- Oversight of the local project selection process
- Oversight of all local Homeless Management Information System (HMIS) requirements.
- Development of community-wide coordinated assessment process
- Management of the Morris County CoC meetings and any special meetings
- Attendance is required to a minimum of 51% of CoC meetings during the calendar year.

### **Section 3: CoC Lead Agency**

The Executive Committee shall appoint an organization to serve as the Lead Agency for the Morris County CoC. The organization selected to serve as the CoC Lead Agency shall serve in that role for a period of 3 years.

### **Section 4: HMIS**

- a. HMIS Lead & Software - The Executive Committee shall approve the organization that will serve as the HMIS Lead Agency and identify the HMIS software that will be used in the Morris County geographic region. The Executive Committee Chair shall sign all agreements with the HMIS Lead Agency governing the implementation of HMIS in Morris County.
- b. Participation fees – The HMIS Lead Agency shall determine the HMIS participation fees for Morris County programs. The Executive Committee as well as all Morris County

organizations participating in HMIS must be notified in writing about anticipated changes in fees at least 30 days prior to the fee change

- c. Policies/Procedures/Program Standards – The Executive Committee will appoint a workgroup to work with the HMIS Lead Agency to develop and review the HMIS policies, procedures and program standards annually. The Executive Committee must approve the initial and subsequent updates to HMIS policies, procedures and program standards

### **Section 5: Executive Committee Membership**

- a. Composition - The Executive Committee shall be composed of a variety of organizations and individuals representing the larger Morris County Community. At a minimum the Executive Committee must include the following types of organizations:
  - Government agencies/funders
  - Homeless Service providers
  - Homeless or formerly homeless individual
  - Public Agencies
- b. Selection - The Executive Committee members shall be selected through a nomination committee and approved through a vote of the Morris County CoC membership.
  - The first year of operation the nominating committee shall be made up of one representative from the Morris County Department of Human Services, one representative from the United Way of Northern New Jersey, one member of the Morris County Human Service Advisory Council, and the current Chair of the CEAS/CoC committee.
  - After the approval of the initial slate of Executive Committee members, future nominating committee membership shall include at least 4 representatives one of which must include a representative from the CoC Lead Agency. The remaining members must be selected from the Morris County CoC membership and the Morris County Human Service Advisory Council.
- c. Terms – The Executive Committee members shall serve a maximum of six consecutive one year terms.
  - After 1 year of absence, the member may be re-elected.

### **Section 6: Officers**

The Executive Committee shall select a chair and vice chair from amongst the Executive Committee members. The designated chair and vice chair will serve in this role for both the Executive Committee meetings as well as the Morris County CoC meetings.

### **Section 7: Executive Committee Meetings**

The Executive Committee shall meet as often as is necessary but no fewer than 4 times in a year. *Executive* Committee meetings shall be closed unless otherwise identified. The CoC Lead Agency shall be responsible for sending meeting notifications along with the tentative agenda and previous meeting minutes at least 1 week prior to the Executive Committee meeting. Executive Committee meeting minutes shall be available for public review upon request.

### **Section 8: Executive Committee Voting**

At least 51% of the Executive Committee members shall constitute a quorum. While the Executive Committee will strive to achieve consensus, the affirmative vote of a simple majority of members shall be required for the approval of any matter. Members must be present to vote. Presence includes by telephone or video conference provided the member has heard the full discussion of any matter to be eligible to vote on that matter.

### **Article VII: Conflict of Interest**

All individuals and representatives of organizations who have a financial interest in the Morris County HUD Homeless Assistance Programs funding may not participate in the Proposal Review Committee or the Executive Committee approval of recommendations. Board members, employees and individuals former employees of organizations (defined as employed within the past 364 days) seeking funding through the HUD Homeless Assistance Program may not participate in the project selection or approval process.

### **Article VIII: Annual Rating and Ranking of HUD Applications**

#### **Section 1: Community funding Priorities**

Annually, the Executive Committee will establish the priority(s) for the Morris County CoC. The annual priorities will be established based on the gaps/needs analysis and input from the Morris County CoC. The priorities established will guide funding recommendations.

#### **Section 2: Application Content**

The Executive Committee shall determine the content and form of the local project selection application. In addition the Executive Committee will determine the scoring scale used to evaluate and rank proposals received.

#### **Section 3: Application Process**

The Executive Committee shall issue a Request for Letters of Intent through the CoC Lead Agency and determine the schedule for project review and selection to correspond with the HUD application process. The Executive Committee reserves the right to delay final approval of projects until confirmation from HUD about funding levels and restrictions

#### **Section 4: Recommendations and Approvals**

The Executive Committee will appoint a Selection Committee to score and rank all project applications. Selection Committee recommendations will be presented to the Executive Committee for final approval.

#### **Section 5: Appeals**

Organizations submitting applications for funding may appeal the decision of the Executive Committee through the following process:

- A formal letter indicating the desire to appeal funding decisions must be submitted to the CoC Lead Agency within 5 business days of the funding announcements.

The appeal letter must indicate the reason for the appeal and may include any pertinent back-up documentation

- The Executive Committee must provide a written explanation indicating the reasoning behind the funding decision within 10 business days of receiving the appeal letter.
- A 3 member independent review committee will be convened within 15 days of the receipt of the appeal letter. One member shall be selected by the Executive Committee, one member shall be selected by the Morris County CoC and one member shall be selected by HSAC
- The Review committee will examine all pertinent information and may hold hearings to discuss the appeal issues raised. The committee may request additional information as necessary to make an informed decision. The review committee must issue a decision within 45 days of the receipt of the appeal letter
- All decisions made by the independent review committee are final.

## **Article IX: Committees**

### **Section 1: Standing Committees**

The Morris County CoC shall establish committees to address specific aspects of the homeless planning process. The following Committees shall be part of the Morris County CoC:

- a. Nominations Committee – The nominations committee shall be a sub-committee of the Morris County CoC. The committee will have a minimum of 4 members one of which must include the CoC Lead Agency. The nominating committee will be responsible for identifying and recommending a slate of candidates to serve as members of the Executive Committee.
- b. Selection Committee – The Selection Committee shall be a sub-committee of the Executive Committee. The Selection Committee members shall be appointed by the Executive Committee and may include Executive Committee members as well as Morris County CoC members or other non-affiliated community stakeholders. The Selection Committee is responsible for reviewing and scoring applications for funding and making funding recommendations to the Executive Committee.

### **Section 2: Ad Hoc/Workgroup and Advisory Committee**

Additional ad hoc committees, workgroups and advisory committees may be established as needed. These temporary committees may be established through a majority vote of the Morris County CoC or the Executive Committee. Participation in ad hoc, workgroup or advisory committees is open to all interested individuals, agencies and community stakeholders. Committee recommendations must be presented in writing to the full Morris County CoC as well as the Executive Committee. Committee recommendations must be approved by the Executive Committee before any action can be taken.

## **Article X: Amendments**

### **Section 1**

In the first year of the Morris CoC's and its Executive Committee's establishment, the By-Laws can be amended by a majority vote of the members present at a meeting. Thereafter, any proposed amendment to the By-Laws shall be presented in writing to the CoC at a meeting. At the next meeting the amendments can be adopted by a two-thirds vote of the members present at which the amendments were reviewed.

### **Section 2**

The Executive Committee will review the By-Laws annually for necessary additions and/or adjustments. During the By-Law review period, the Executive Committee will consider recommendations from Morris County CoC members as well as Executive Committee members.

### **Section 3**

A majority vote of the Executive Committee is required to formalize By-Laws.

Accepted by Executive Committee 02/27/2014

# Morris County Continuum of Care

## CONFLICT OF INTEREST POLICY

### Article 1 – Purpose

1. The purpose of this policy is to protect the Morris County Continuum of Care (CoC) interests when it is contemplating entering into a transaction or arrangement that might benefit the private interests of any CoC Executive Committee member or might result in a possible excess benefit.
2. This policy is intended to supplement, not replace, any applicable state and federal laws covering conflicts of interest applicable to nonprofit and charitable organizations.
3. This policy is also intended to further identify “independent” parties for the purposes of decision making on matters related to compensation authorized by the CoC.
4. This conflict of interest policy applies to all members of the CoC Executive Board both voting members and non-voting members.

### Article 2 – Definitions

1. Interested person(s) – Any member who has a direct or indirect financial interest, as defined below, is an interested person.
2. Financial interest – A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:
  - a. An ownership or investment interest in any entity with which the Morris County Continuum of Care has a transaction or arrangement, or
  - b. A compensation arrangement with the Morris County Continuum of Care or with any entity or individual with which the Morris County Continuum of Care has a transaction arrangement, or
  - c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Morris County Continuum of Care is negotiating a transaction or arrangement.
3. Independent Party – a committee member shall be considered an “independent” party for the purposes of this policy if he or she –
  - a. is not, and has not been for a period of at least one year, an employee of any entity in which the CoC has a financial interest or is considering for a potential financial interest;
  - b. is not, and has not been for a period of at least one year, a board member of any entity in which the CoC has a financial interest or is considering for a potential financial interest; and
  - c. is not employed as an executive of another corporation where any of the corporation’s executive officers or employees serve on the compensation committee for an organization seeking compensation through the CoC.
4. Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial. A financial interest is not necessarily a conflict of

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Vice Chair

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Betsey Hall  
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interest. A person who has a financial interest may have a conflict of interest only if the Executive Committee decides that a conflict of interest exists, in accordance with this policy.

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## Article 3 – Procedures

1. Statement of Acknowledgement – all members of the CoC Executive Committee must sign the conflict of interest statement of acknowledgement at the beginning of each year
2. Duty to Disclose – in connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the Executive Board. Potential conflicts of interest may be disclosed at the beginning of each calendar year or as they arise in relation to specific discussions or votes.
3. Recusal of Self – any member may recuse himself or herself at any time from involvement in any decision or discussion in which the member believes that he or she has or may have a conflict of interest, without going through the process of determining whether a conflict of interest exists.
4. Determining whether a Conflict of Interest exists – after disclosure of the financial interest and all material facts, and after any discussion with the interested person(s), he/she shall leave the Board meeting while the determination of a conflict of interest is discussed and voted upon. The Board will then decide if a conflict of interest exists.
5. Procedures for addressing Conflicts of Interest
  - a. Once an interested person has identified a possible conflict of interest, the Chair of the Morris County Continuum of Care may, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
  - b. After exercising due diligence, the Board shall determine whether the Morris County Continuum of Care can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not present a conflict.
  - c. If such an alternative is not a feasible option, the Board shall determine by a majority vote of the disinterested member(s) whether the transaction or arrangement is in the Morris County Continuum of Care’s best interest, for its own benefit, and whether it is fair and reasonable. Based on the Board’s determination, it shall make its decision as to whether to enter into the transaction or arrangement.
6. Violation of the Conflicts of Interest Policy
  - a. If any member of the Morris County Continuum of Care has reasonable cause to believe that another member has failed to disclose actual or possible conflicts of

# Morris County Continuum of Care

interest, he/she shall inform a member of the Board of the basis of such belief and the Board will discuss with the member in question.

- b. The member in question will be given an opportunity to explain the alleged failure to disclose to the Board.
- c. If, after further investigation, the Board determines that the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.
- d. Records of the Board proceedings shall include the name(s) of the parties involved, the determination of the Board, and the action(s) taken, if any. A full roster of members involved in the proceedings must be maintained.

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Teresa Hall  
Patricia Picard  
Dou Schwarcz  
David Scott  
Cathy Sly

## Article 4 – Compensation

1. A voting member of the Board who receives compensation, directly or indirectly, from the Morris County Continuum of Care for services is precluded from voting on matters pertaining to that member's compensation.
2. A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Morris County Continuum of Care for services is precluded from voting on matters pertaining to that member's compensation.
3. Any voting member of the Board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Morris County Continuum of Care, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

# Morris County Continuum of Care

## Morris County Continuum of Care Conflict of Interest Statement of Acknowledgement

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Vice Chair

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Jeff Bashe

Jan Bruseo

Annifer Carpinteri

Joseph Gallow

Estey Hall

Patrice Picard

Don Schwarcz

David Scott

Patricia Sly

I \_\_\_\_\_, as a member of the Morris County Continuum of Care Executive Committee, have received and reviewed the Morris County Continuum of Care Conflict of Interest Policy dated May 28, 2015. I understand the conflict of interest policy and agree to notify the Morris County Continuum of Care Executive Committee should any conflict of interest related to discussions or voting matters arise.

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Print Name

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Signature

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Date

# Morris County Continuum of Care

## Morris County Local Selection Process

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Chair

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Executive Chair

Michael Armstrong  
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Telsey Hall  
Atrice Picard  
Dou Schwarcz  
David Scott  
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The CoC Executive committee shall be responsible for identifying the projects eligible to apply for funding through the annual continuum of care application. The Executive Committee shall determine which projects are supported for funding and the level of funding applied to supported projects through the HUD CoC process. In order to complete the local review and selection process the Executive Committee shall take the following steps:

- Establish local priorities – may reflect specific populations, specific project types or other priorities as determined by the executive committee based on community need and input
- Appoint a Review committee – the review committee shall be made up of non-conflicted members which may include members of the executive committee, members of the general Morris County CoC membership or other members within the community
- Establish timeframes for release of application, submission deadlines, project presentations and approving final determinations
- Review and approve recommendations of the review committee
- Notify applicants of final recommendations – may be done through the CoC Lead Agency or Executive Committee Chair

### Review Committee

#### Membership

- The Executive Committee Chair and the CoC Lead Agency shall identify a slate of review committee members.
- Members may be selected from the Executive Committee, the full Morris County Continuum of Care membership, other Morris County human service committees or general community members willing to participate in the process and with a basic understanding of review committee processes and homelessness in Morris County
- The voting members of the Executive Committee shall approve the slate of review committee membership through a majority vote of those present.
- All review committee members will be required to sign a conflict of interest statement and must disclose any real or perceived conflicts of interest

#### Responsibilities

- Sign Conflict of Interest Statement and disclose any real or perceived conflict of interest to the Executive Committee prior to beginning the work of the review committee
- Review the notice of intent form and update according to locally established priorities
- Review and update the scoring tool to correspond with the updated notice of intent form and local priorities
- Submit the updated notice of intent form and scoring tool to the executive committee for review & approval
- Schedule project presentations
- Review all applications submitted as distributed by the CoC Lead Agency

# Morris County Continuum of Care

- Listen to project presentations & prepare questions as necessary in making funding decisions
- Score each project based on the established scoring criteria
- Identify approved projects funding levels based on project scores, local priorities and HUD guidance provided through the annual CoC NOFA

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Vice Chair

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Teresa Hall  
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Douglas Schwarcz  
David Scott  
Cathy Sly

## Local Selection Process

All agencies and programs interested in applying for new or renewal funding through the Continuum of Care program must submit a notice of intent within the deadlines established by the Executive Committee. Agencies submitting requests for funding may also be required to present their project before the review committee prior to final determinations of funding.

### Notice of Intent Form and Content

The Notice of Intent Form is designed to collect project information necessary to assist the review committee in making determinations about the which projects to support for funding and at what level. The Notice of intent form shall be reviewed annually by the appointed review committee and updated to reflect the local priorities and identified scoring criteria. The updated notice of intent form shall be submitted to the Executive Committee for review and approval prior to release to the public.

The Notice of Intent form shall contain the following items at a minimum:

- Project name, type and target population
- Detailed budget
- Identification of how the project fits in with the local priorities

### Scoring Criteria

All projects submitting a Notice of Intent will be evaluated against scoring criteria recommended by the review committee and approved by the Executive Committee. Each project will be scored and ranked based on information provided through the Notice of Intent form, Project Presentation and CoC monitoring results. The Scoring Criteria will be updated annually by the review committee based on the established priorities and any other relevant information identified by the review committee.

Scoring Criteria will include the following items at a minimum:

- Project fit with established priorities
- Project monitoring results (renewal projects)
- Project performances based on locally established standards (renewal projects)

### Publication of information regarding Notice of Intent process

The Executive Committee shall authorize the release of the request for Notices of Intent after approval of any updates to the Notice of Intent application, scoring criteria and timeline. The Notice of Intent announcement shall be widely marketed. Information regarding the Notice of Intent shall be disseminated through:

- Publication on CoC Lead Agency Website

# Morris County Continuum of Care

- Emails to CoC listserv and other human services and housing listservs
- Announcements at CoC and other community meetings

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Patricia Picard  
Douglas Schwarcz  
David Scott  
Cathy Sly

The Notice of Intent Announcement shall include the following information:

- CoC Funding Priorities
- Notice of Intent Application
- Notice of Intent Scoring Criteria
- Submission Deadline
- Appeals Process information

## Submission Process

All agencies interested in receiving funding through the HUD Continuum of Care must submit a Notice of Intent by the identified deadline in order to be considered for funding. A separate Notice of Intent must be completed for each project requesting funding including both new projects and renewal projects. Programs (both new and renewal) that fail to submit a notice of intent by the approved deadline will not be considered for funding.

All agencies submitting a Notice of Intent must participate in a mandatory Morris County Notice of Intent Technical Assistance session. The Notice of Intent technical assistance session shall cover:

- The eligible activities and costs allowable through HUD CoC funding
- Local CoC Funding Priorities
- How to complete the Notice of Intent Form
- Notice of Intent scoring criteria
- Anticipated selection timeline

Notices of Intent must be complete and submitted in the format identified in the Notice of Intent Announcement. Incomplete applications may have points deducted or be removed from consideration if the review committee feels there is inadequate information to properly score the project.

Notice of Intent applications submitted after the submission deadline will not be considered. Agencies that have extreme extenuating circumstances that will prevent them from submitting by the identified deadline may request a waiver. The waiver must be submitted in writing to the CoC Lead Agency at least 3 business days prior to the submission deadline. The waiver must include the reason for the agency's inability to submit by the identified deadline and the anticipated date when the completed application can be submitted. The CoC Lead Agency will share the request with the Executive Board Chair and Vice Chair and make a determination about whether to grant an extension. Waivers will be reviewed on a case-by-case basis.

## Project Presentation

Agencies submitting a Notice of Intent application for proposed new and renewal projects must present the project before the local review committee. The project presentations will be scheduled after the release of the HUD Continuum of Care NOFA.

# Morris County Continuum of Care

The project presentations will provide an opportunity for the review committee to gain a better understanding of the programs and clarification of program information. The review committee will have an opportunity to ask questions of applicants based on information in the HUD CoC NOFA that may not have been included in the original Notice of Intent Application. Agencies submitting Notice of Intent Applications are strongly encouraged to read the HUD CoC NOFA prior to the project presentation. Agencies completing project presentations before the review committee should be prepared for the following:

- 5 minute overview of the program
- Address questions related to information included in Notice of Intent Application
- Address questions related to project monitoring and performance
- Address questions related to information from the HUD CoC NOFA

## Project selection and announcements

The review committee shall score each project application using the approved scoring criteria based on information provided in the application as well as through the project presentations. Each project will be scored and ranked by the review committee.

Using information from the HUD CoC NOFA, the review committee will determine the maximum amount of funding that will be allocated to projects that are supported for funding. The maximum funding allowable for renewal projects will be based on the approved funding levels identified on the HUD approved Grant Inventory Worksheet. Renewal projects seeking to make budget changes must do so directly with HUD prior to the finalization of the Grant Inventory Worksheet.

The review committee will submit project scoring, rank and funding level recommendations to the Executive Committee for approval prior to notification of applicants. The Executive Committee review and approval of CoC funding recommendations may be done through a special meeting, via email, or conference call if timing is an issue in relation to the HUD CoC application deadline.

Upon approval from the Executive Committee, the CoC Lead Agency shall send notification letters to all agencies submitting Notice of Intent applications for new and renewal projects. The Notice of Intent application shall identify the maximum amount of funding approved for the project as well as any additional requirements identified by the Executive Committee. Projects supported for funding may not submit HUD CoC Exhibit 2 applications with a funding request greater than that approved by the Executive Committee.

Notification letters sent to projects that have been denied funding or awarded reduced funding shall indicate the Executive Committee decision to deny or reduce funding. The letter shall include information regarding the appeals process. Projects that have been denied funding may not submit a HUD CoC Exhibit 2 application.

## Appeals process

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Tracy Picard

Don Schwarcz

David Scott

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# Morris County Continuum of Care

Agencies that have been denied funding or received reduced funding through the local selection process may appeal the decision of the review committee. An appeal letter must be submitted to the CoC Lead Agency within 3 business days from the receipt of the notification letter. The appeals letter must include the following information:

- Project name and requested amount
- Explanation of error in review committee determination; or
- Explanation of error in project selection process/procedures

The CoC Lead Agency will have 3 business days to notify the appeals committee of the submission of an appeal letter. The Appeals committee shall be comprised of 1 member selected by the CoC full membership, 1 member selected by the CoC Executive Committee and 1 member selected by the Human Service Advisory Council.

The Appeal Committee shall have up to 5 business days to review the letter submitted by the agency requesting an appeal. The Appeal Committee shall be empowered to request additional information from the agency submitting the appeal and/or from the CoC review committee. The Appeal Committee shall set a date for a hearing which shall be held within 14 business days of the receipt of the appeal letter. The Appeal hearing shall include Appeal Committee members, one representative from the CoC Review Committee, and one representative from the agency submitting an appeal. Upon hearing from both the review committee and the agency, the Appeal Committee shall make a final determination regarding funding decisions. Final notification shall be sent to the appealing Agency and the CoC Executive Committee in writing no more than 5 business days after the Appeals hearing. Determinations by the Appeals Committee shall be final.

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Betsey Hall

Tracie Picard  
Dou Schwarcz

David Scott  
Cathy Sly

# Morris County Continuum of Care

## Morris County Continuum of Care Monitoring Procedures

Executive  
Committee

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Vice Chair

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Dou Schwarcz  
David Scott  
Cathy Sly

The Morris County Continuum of Care Executive Committee shall oversee the monitoring of homeless service programs in Morris County. The purpose of the monitoring efforts shall be to:

1. Strengthen services provided in the community to most effectively end homelessness
2. Understand the quality of services so as to identify and correct issues that prevent programs from achieving full compliance with federal, state, and local regulations and standards
3. Learn about agency strengths and weaknesses as a means of understanding agency and community gaps and to use this knowledge to inform future funding priorities and recommendations

### General Monitoring Policies

The Morris County Continuum of Care Executive Committee shall appoint a monitoring committee that shall be responsible for conducting an on-site monitoring of homeless service programs in Morris County on an annual basis. The Executive Committee will determine annually the projects to be included in the annual monitoring but at a minimum the monitoring must include all programs receiving funding through the Continuum of Care.

### Monitoring Team

The Executive Committee shall appoint a monitoring team to conduct on-site visits with agencies and programs selected for monitoring. The Monitoring team shall consist of at least one executive committee member and may include non-conflicted members from the larger Continuum of Care full membership committee or other parties in the community. Monitoring team members must have some knowledge of homeless services in Morris County, or familiarity with monitoring processes in general. The Continuum of Care Nominating Committee shall identify potential candidates to serve on the monitoring committee. The Executive committee may request additional information from identified candidates as necessary to make a final determination. The Executive committee shall appoint at least 3 members for the monitoring team. Once appointed, the monitoring team shall complete one training prior to beginning the monitoring process for the year, to ensure familiarity with the CoC monitoring procedures and a basic understanding of the programs to be monitored.

### Monitoring Timeline

The CoC Nominating Committee shall develop the slate of candidates for the Monitoring Team in preparation for the February Executive Committee meeting. The Executive Committee shall review and appoint the Monitoring Team at the February meeting. The monitoring team shall complete orientation and begin the process of monitoring the programs identified by the Executive Committee between March and April of each year.

# Morris County Continuum of Care

## Monitoring Tools and Format

The Executive Committee shall create an ad hoc committee to develop/review/update the monitoring tool on an annual basis. The monitoring tool shall include at a minimum a review of items related to HUD compliance. The Executive Committee shall approve the monitoring tool annually prior to the official appointment of the monitoring team.

Executive  
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Deborah Zydel  
Chair

The annual monitoring process shall include a program performance review, program file review, and on-site visit.

Edi Miciak  
Vice Chair

- The program performance review will be conducted through a review of information in HMIS or a similar database. The performance review will evaluate program performance in relation to the locally determined standards approved by the Executive Committee.
- The program file review shall include a review of client files as well as program related files as identified on the Executive Committee approved monitoring tool.
- The on-site visit shall include a simple review of program facilities, location of program materials and other items as identified in the Executive Committee approved monitoring tool.

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Annifer Carpinteri  
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Kelsey Hall  
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Douglas Schwarcz  
David Scott  
Cathy Sly

## Scheduling of Monitoring Reviews

The CoC Lead Agency will notify projects identified by the Executive Committee for monitoring, by mail and/or email of the date and time for their scheduled monitoring visit. Notifications shall be sent at least 30 days prior to the scheduled monitoring visit. Monitoring notifications shall include information about the program areas to be evaluated, a list of documentation to be made available and the key staff of the organization that need to be present during the monitoring visit.

## On-Site Monitoring Procedures

When conducting an on-site visit, the monitoring team will:

1. Conduct an entrance interview with key staff involved in conducting the program activity.
2. Review all pertinent program files, including any third party contractor files, for necessary documentation.
3. Interview appropriate officials and employees of the agency, program clientele, and interested citizens to discuss the program performance.
4. Visit the primary location of program activities.
5. Discuss with the agency and discrepancies resulting from the review of files, interview, and site visits.
6. Conduct an exit interview with the appropriate officials and/or staff of the agency to discuss the findings of the monitoring visit.

## Monitoring Results

The monitoring team will submit a summary of the monitoring results to the Lead Agency within 10 days of completing the on-site monitoring visit. The Lead Agency will share the monitoring results with the Executive Committee. The Executive Committee, or an appointed ad hoc committee, shall review the monitoring results and determine the

# Morris County Continuum of Care

recommendations for corrective actions for any findings by the monitoring team. The Lead Agency will send an official letter to the Director of the monitored agencies within 30 days of the monitoring visit. The letter will generally contain the following information:

1. Name of program
2. Date of Monitoring Visit
3. Names of monitoring team members who conducted the site visit
4. Scope of monitoring visit
5. Names of agency officials and staff involved in the monitoring visit
6. Findings and results of the monitoring visit
7. Specific recommendations or corrective actions to be taken by the agency
8. Timeframe for agency response or completion of necessary actions
9. If appropriate, an offer of technical assistance

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Christine Picard

David Schwarcz

David Scott

Attorney Sly

## Follow-up action

If concerns or findings are identified in the official monitoring results letter, the monitored agency has 30 days to respond to the monitoring letter. The response may include additional information to address concerns or findings and/or the anticipated timeframe in which the agency will correct/address issues identified in the monitoring letter.

In the event that the agency fails to respond to the monitoring letter within 30 days, a written request for response will be sent to the authorized agency official and board chairperson.

If the agency does not sufficiently address the monitoring findings identified in the monitoring letter or provide an appropriate corrective action plan, future program funding may be impacted.

## Resolving Monitoring Findings

The Executive Committee, or appointed ad hoc committee, shall review all documentation submitted by agencies in response to any monitoring findings. The Executive Committee, or ad hoc review committee, shall work with the agency to find an appropriate resolution to issues identified in the monitoring, which may include connecting the monitored agency with technical assistance. The committee and the Agency shall work together to create an appropriate timeframe for the resolution of identified issues and the committee shall be responsible for subsequent reviews to verify the completion of the corrective actions.

When all corrective actions have been completed to the satisfaction of the committee, the Lead Agency will mail a letter to the Director of the Agency stating that the findings are resolved.

If corrective actions are not completed to the satisfaction of the committee or the agency is unresponsive to committee requests, the Lead Agency shall mail a letter to the Director of the Agency indicating that the findings have not been resolved in a satisfactory manner and future funding may be impacted.

## **Morris County Homeless Management Information System (HMIS) Standards for Participation**

The New Jersey Homeless Management Information System (HMIS) is a client information system that records the use of housing services which can be used to determine the utilization of services of participating agencies, identify gaps in the local service continuum and develop outcome measurements.

Participation in the Morris County Homeless Management Information System (HMIS) is mandatory for agencies receiving funding from the U. S. Department of Housing and Urban Development (HUD) and the State of New Jersey. This includes Continuum of Care Grants and funds administered through the Morris County Department of Human Services and the Morris County Division of Community Development.

This standard establishes the minimum requirements that agencies must meet to be certified as participants in the Morris County HMIS. The CEAS/COC under the auspices of the Morris County Human Services Advisory Council and in conjunction with the Morris County Department of Human Services will measure each agency's data performance against this standard and report the results to the Morris County Human Services Advisory Council, CEAS/COC as required. As a minimum, participation will be evaluated prior to submission of the Continuum of Care grant request and prior to the award of Emergency Shelter Grants (ESG) and Community CDBG funding. The Morris County Human Services Advisory Council, CEAS/COC will receive quarterly performance data from Morris County Department of Human Services and yearly reports from New Jersey Housing and Mortgage Finance Agency (NJHMFA) HMIS for all participating agencies.

The Morris County Human Services Advisory Council CEAS/COC and Morris County Department of Human Services have overall responsibility for the operation of the HMIS. As such, they will be the final authority for certifying the participation status for all agencies. Any agency appealing the determination will submit a written request for review within 5 days of notification of Non-participation.

### **Standards:**

**Participation Agreements:** Agencies must maintain an active Homeless Management Information Collaborative Participation Agreement with the New Jersey Housing and Mortgage Finance Agency (NJHMFA).

**Financial:** Each participating agency will be charged an annual participation fee to be involved in the NJHMIS Collaborative. The annual fee will be invoiced and payable to NJHMFA. The annual fee of seven hundred dollars (\$700.00) is due prior to the participating agency's activation into the NJHMIS system. The annual fee is subject to change and is the sole discretion of the NJHMFA.

**Morris County**  
**Homeless Management Information System (HMIS)**  
**Standards for Participation**

**Page 2**

Attendance at Human Services Advisory Council, CEAS/COC HMIS Committee Meetings: The Human Services Advisory Council, CEAS/COC HMIS Committee meetings are vital to maintaining effective communication between the agencies and to maintain acceptable performance data. Each agency must have a representative attend at least 75% of Committee meetings held within the previous 12 months. It is the responsibility of each agency to appoint at least one representative to the committee, to monitor their attendance, and to be sure that this standard is met.

Data Timeliness: All agencies shall consistently enter information into the HMIS database striving for real time, or close to real time data entry.

Data Completeness: Forms and HMIS information should be completed to conform to required APR data.

Data Accuracy: All data entered into the HMIS must be reviewed by the agency for accuracy. HMIS data must be will be reconciled to other agency information. Executive Directors will be responsible for their agency meeting these standards for data timeliness, completeness and accuracy.

**Exceptions rules and grace periods:**

HUD is concerned about HMIS implementation in agencies that primarily provide assistance to victims of domestic violence (DV). The information for these unique agencies will be provided in accordance with HUD guidelines relative to them.

New Agencies: New agencies will be allowed three full calendar months to meet participation standards. Prior to the end of the three month deadline, agencies will be considered participating if they have executed all necessary participation agreements, met the finance requirements, have at least two employees that are qualified and trained for data entry and have had representation at local Morris County Human Services Advisory Council, CEAS/COC HMIS meetings held during the period.



**NEW JERSEY HOMELESS MANAGEMENT  
INFORMATION SYSTEM  
Policies & Procedures Manual**

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## Introduction

New Jersey's HMIS is a collaborative effort between the New Jersey Housing Mortgage Finance Agency (HMFA), the dedicated lead agency, and seventeen of New Jersey's Continuums of Care. The Continuums of Care, individually or as a group, have an ongoing role in giving input into HMIS policy decisions within the parameters established by the U.S. Department of Housing and Urban Development (HUD). The Continuums of Care retain the right to withhold support for HMIS.

New Jersey's HMIS project is governed by a HMIS Steering Committee, which will include representatives from NJ HMFA, New Jersey's Department of Community Affairs, and New Jersey's Department of Human Services.

A New Jersey HMIS Advisory Council will meet quarterly to review recommendations for system-wide changes in functionality and system-flow. The Advisory Council consists of a maximum of two representatives from each participating Continuum of Care, as well as representatives from NJ HMFA. All Continuum of Care representatives will participate in the Advisory Council on a voluntary basis, and representatives will be selected by their home CoC. The CoC's are responsible for communicating the identities of their Advisory Council representatives to NJ HMFA.

All organizations participate in the HMIS Advisory Council on a voluntary basis and select their own representatives. Organizations are responsible for communicating with NJ HMFA about the identity of their respective representatives.

The methods of communication between the System Administrator and the participating agencies will be via electronic mail or telephone.

This manual contains all of the most current operational policies and procedures related to New Jersey's Homeless Management Information System (NJHMIS). It is expected that Policies and Procedures will be removed, added, and modified as circumstances dictate. That is why this manual is designed to be modular. Because the *HMIS Policies and Procedures Manual* is contained in a loose-leaf notebook, outdated policies and procedures can easily be removed, and updated policies and procedures can easily be inserted.

For more information regarding NJHMIS Policies and Procedures, please contact Abram Hillson, New Jersey Housing Mortgage Finance Agency, at 609-278-7567 or [ahillson@njhmf.state.nj.us](mailto:ahillson@njhmf.state.nj.us).

# Confidentiality, Privacy, and Security

## HMIS Privacy & Security Standards

Federal Register – July 30, 2004

### Section 4

- Based on principles of fair information practices & security standards recognized by the information privacy & technology communities
- Developed after careful review of the HIPAA standards
- Baseline standards required by any organization that records, uses or processes PPI on homeless clients for a HMIS.
- Additional protocols or policies to enhance further privacy & security for individual agencies, as deem appropriate
- Organizations must comply with federal, state and local laws re: confidentiality protections
- Two-tiered approach: minimum must meet the baseline privacy & security requirements/Some agencies may adopt higher levels of security due to nature of homeless population

#### Section 4.1.1 Definition of Terms

- Definitions:  
**Protected Personal Information (PPI)** – any information maintained about a living homeless client or individual that identifies/manipulated/linked to a specific individual  
**Covered Homeless Organization (CHO)**-any organization that records, uses or processes PPI on homeless clients for a HMIS  
**Processing**-any operation or set of operations performed on PPI for collection, maintenance, use, disclosure, transmission & destruction of information  
**HMIS Uses and disclosures** – uses and disclosures allowed by these standards

#### Section 4.1.2 Applying HMIS Privacy & Security Standards

- Any CHO covered under HIPAA, is not required to comply with privacy/security standards, if, a substantial portion of its PPI is protected health information as defined in HIPAA. (See Exemptions) HMIS standards give precedence to the HIPAA rules: 1) HIPAA rules more finely attuned to requirements of health care system; 2) important privacy & security protections; 3) unreasonable burden to follow two sets of rules
- IF PPI does not fall under standards in this section; must be described in privacy notice with explanation of reason not covered. Disclosure requirement necessary if other standards are being used other than the HMIS standards

### **Section 4.1.3 Allowable HMIS uses & disclosures of PPI**

- Allowable uses: 1) provide or coordinate services; 2) services related to payment or reimbursement; 3) carry out administrative functions; 4) creating de-identified PPI
- Uses/disclosures required by law-must comply & be limited to the requirements of the law
- Uses and disclosures to avert a serious threat to health or safety
- Uses and disclosures about victims of abuse, neglect or domestic violence
  - Required by law and complies with and limited to requirements of law
  - If client agrees to disclosure
  - Authorized by statute or regulation; necessary to prevent serious harm or if individual is incapacitated and not intended to be used against individual
  - Must inform individual that a report has been made; See Exception
- Uses and disclosures for academic research; must be formal relationship-See section for further discussion
- Disclosures for law enforcement purposes; court order, warrant, subpoena or summons. **See section for further discussion**

### **Section 4.2 Privacy Requirements**

- Must comply with baseline privacy requirements
  - Data collection limitations
  - Data quality
  - Purpose use limitations
  - Openness
  - Access & correction
  - Accountability
- May adopt additional substantive & procedural privacy protections that exceed baseline standards
- Comply with federal, state and local laws
- Must be described in privacy notice
- Maintain a common data storage medium with another organization for sharing of PPI; responsibility for privacy & security by both organizations; must comply with HMIS standards and allow for un-duplication of homeless clients at CoC level

#### **Section 4.2.1 Collection Limitation**

- Collection of PPI only when appropriate to the purposes for which information is obtained or required by law
- Collect by lawful and fair means with knowledge and consent of individual
- Post a sign at each intake desk, which explains reasons for collection
- Additional Privacy Protections – In Privacy Notice commit to additional privacy protections consistent with HMIS requirements; 1) restricting collection of PPI; 2) collection PPI only with express knowledge; 3) oral/written consent from individual/third party

#### **Section 4.2.2 Data Quality**

- PPI collected must be relevant to the purpose for which it is to be used
  - Accurate, complete and timely
- Develop & implement plan to dispose of or, remove identifiers seven (7) years after creation or last changed See **Section 4.3 for further discussion**

#### **Section 4.2.3 Purpose Specification/Use Limitation**

- Specify in Privacy notice purposes for collecting PPI and describe all uses and disclosures
- If not disclosed in Privacy notice must have consent of individual
- Additional Privacy Protections
  - Must be consistent with HMIS requirements
  - Seek oral/written consent for some or all processing
  - Agree to additional restrictions at request of individual
  - Limiting uses/disclosures as stated in privacy notice
  - No disclosure of PPI unless required by statute
  - Maintain audit trail containing date, purpose & recipient
  - Make audit trails available to homeless individual
  - Limit disclosure of PPI to minimum necessary for purpose

#### **Section 4.2.4 Openness**

- Publish Privacy Notice, describe policies & practices, provide copy upon request
- Current version on web page
- Must post sign stating availability of privacy notice
- Privacy notice must state may be amended at any time; amendments may affect information obtained prior to change, unless otherwise stated
- Amendments must adhere to HMIS privacy standards
- Must maintain permanent documentation of all amendments
- Provide accommodations for persons with disabilities throughout data collection process See **Section for further discussion**
- Provide required information in other languages other than English, common to community
- Additional Privacy protections-See **section for further discussion**

#### **Section 4.2.5 Access and Correction**

- Must allow client to inspect and obtain copy of any PPI about client
- Must offer explanation of any questions
- Must consider any request by client for correction of inaccurate or incomplete PPI pertaining to client
- A CHO is not required to remove PPI information, may mark information as inaccurate or incomplete and may make additions
- Privacy Notice may reserve the ability to deny client to inspect and obtain copy

- Litigation or comparable proceedings
- Information about another individual
- Promise of confidentiality, if disclosure would reveal source of information
- Information that would endanger the life or physical safety of individual
- Upon denial to inspect or obtain copy, CHO must explain reason for the denial, include request documentation as part of PPI
- Additional Privacy Protections-CHO may in its privacy notice, commit to additional privacy protections consistent with HMIS requirements
  - Adopt own appeal procedure and describe within privacy notice
  - Limit grounds for denial, by not stating specific basis for denial
  - Allow client to add disagreement to PPI and allow to share disputed information to another person
  - Provide written explanation of reason for denial

#### **Section 4.2.6 Accountability**

- Establish procedure for accepting/considering questions/complaints about privacy and security policies and practices
- A CHO must require all staff members to sign a confidentiality agreement acknowledging receipt of a copy of privacy notice and pledges to comply with privacy notice
- Additional Privacy Protections- 1) may request staff to undergo formal training in privacy requirements; 2) Establish method for regularly reviewing compliance with privacy notice; 3) Establish internal/external appeal process for appeal of privacy complaint; 4) Designate a chief privacy officer for implementation of privacy standards

#### **Section 4.3 Security Standards**

- All CHOs must comply with baseline security requirements

##### **Section 4.3.1 System Security**

- Must apply system security provisions to all systems where PPI is stored
  - System Networks
  - Desktops
  - Laptops
  - Mini-computers
  - Mainframes
  - Servers
- Additional Security Protections-1) apply system security provisions to electronic and hard copy information that is not collected for HMIS; 2) May seek outside collaboration for performing internal security audit and certify system security
- HMIS systems must have a user authentication system consisting of a username and a password; passwords must be at least eight characters long and meet reasonable industry standard requirements

- At least one number and one letter
  - Not using the username, the HMIS name or the HMIS vendors name
  - Not consisting entirely of any word found in the common dictionary or any of the above spelled backwards
  - Default passwords on initial entry, must be changed upon first use
  - Written user access may not be stored or displayed in public access area
  - Individual users must not have access to more than one workstation or long on to the network at more than one location at a time
  - Additional Security Protections- 1) upper and lower case letters; 2) numbers; 3) symbols
  - Complex passwords-Use phrases, not individual words; capitalize each new word; substitute numbers and symbols for letters; eliminate spaces between words
- CHOs must protect HMIS systems by using commercial virus protection software
  - Must include automated scanning of files, as accessed by users
  - Must regularly update virus definitions from software vendor
  - May commit to automatically scanning all files for viruses when system turned on, shut down or not actively being used
  - Must have secure firewall between workstation and any systems
  - Modem access must have own firewall
  - Central server access, server must have firewall
  - Older operating systems may need to be equipped with secure firewalls
  - Additional security protections-Apply firewall to all workstations
  - Public Access-Public forums for data collection or reporting must be secured to allow connections from pre-approved computers and systems through Public Key Infrastructure (PKI) certificates; or extranets that limit access **See Section for further discussion**
  - Physical Access to Systems with HMIS Data-Computers must be staffed at all times when located in public areas
  - Steps to ensure that the computers and data is secured at all times
  - Workstations should automatically turn on a password protected screensaver when workstation temporarily not in use; time for password protection can be regulated by CHO
  - Staff should log off and shut down data entry system when gone for an extended period of time
  - **See section on additional security protections**
  - All HMIS data must be copied to another medium on a regular basis and store in a secure of-site location
  - Central server must be stored in a secure room with appropriate temperature control and fire suppression systems
  - Surge protectors must be used
  - CHOs must reformat storage medium when deleting all HMIS data; reformat storage medium more than once before reusing or disposing the medium

- Appropriate methods in place to monitor security systems
- HMIS data must maintain a user access log; logs must be checked routinely

#### **Section 4.3.2 Application Security**

- Apply application security provisions to software during data entry, storage and review or any other processing function
- All HMIS data must be encrypted when electronically transmitted
- Current standard is 128-bit encryption
- **See section regarding unencrypted data**
- All HMIS data must be stored in a binary, not text, format
- All paper or other hard copy containing PPI for HMIS must be secured
  - Reports
  - Data entry forms
  - Signed consent forms
- All paper or other hard copy containing PPI must be supervised at all times when in public area

### **a. Protected Personal Information**

Any information that can be used to identify a particular individual is protected personal information. HMIS users and developers must consider the following as protected personal information of an individual and his or her relatives, employers, or household members:

- Names
- All geographic subdivisions smaller than a state, including street address, city, county, precinct, zip code, and their equivalent geo codes.
- All elements of dates (except year) directly related to an individual, including birth date, admission date, discharge date, and date of death.
- Telephone numbers
- Social Security numbers
- Medical record numbers
- Vehicle identifiers and serial numbers, including license plate numbers
- Device identifiers and serial numbers
- Any other unique identifying number, characteristic, or code

## **b. Unidentifiable Data**

Agency data will always be extracted and published at the non-identifiable level. The AWARDS ID will be used to link clients across agencies and, by linking clients at the non-identifiable level, will preserve client anonymity. In addition, the Common Index provides a method of developing unduplicated client counts across agencies.

- All client data retrieved for custom reports will be individual, yet non-identifiable data. (For example, a client name “Mary Smith” will never show up in a report as “Mary Smith,” but as “SD123FGH”.)
- All HMIS data that are electronically transmitted over publicly accessible networks or phone lines will have at least 128-bit encryption, which is the industry standard. Unencrypted data may be transmitted over secure direct connections. A secure direct connection is one that can only be accessed by users who have been authenticated on at least one of the systems involved and does not utilize any tertiary systems to transmit data.
- All HMIS protected data must be stored in a binary, not text, format. Protected personal information shall be stored in an encrypted format using at least a 128-bit key.

### **c. Release of Information**

Explicit authority and permission from clients is required before basic identifiable client information can be released. Client information may also be released as permitted under Medicaid, state, and federal statutes. In addition, the clients have the right to have access to their own data.

- A Client Consent-Release of Information for Data Sharing form must be signed by a client upon intake (even to low-barrier shelters) before any information can be shared.
- If a client receives financial assistance that information will become visible to all of the partner agencies, except public (county, state or federal) that does cash disbursements on behalf of clients.
- All HMIS Participating Agencies will be required to follow all current data security practices detailed in the Policies and Procedures manual, and adhere to the ethical data use standards, regardless of the location where agency users connect to HMIS.
- The client will have access on demand to view, or keep a printed copy of, his or her own records contained in the HMIS.
- 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 *HMIS Data and Technical Standards Notice* of July 30, 2004.
- An individual has the right to receive an accounting of disclosures of protected personal information made by a HMIS user or developer in the six years prior to the date in which the accounting is requested, except for disclosures for national security or intelligence purposes or to correctional institutions or law enforcement officials.
- Each Continuum of Care is required to have a written policy governing its use and disclosure of information collected by HMIS.

#### **d. Client Consent to Share Data**

Clients must be informed about the intended use of personal client information at the time the information is collected. Agencies are responsible for having the proper procedures in place to ensure the consent to use the information in the intended manner is understood by the client.

- A verbal explanation should include a description of NJ HMIS, how the information will be used, how it will be protected, and the advantages of providing accurate information.
- The consent procedure should document the information being shared and with whom it is being shared. After the consent procedure has been explained, the provider should request client to sign the Consent form.
- It is critical that every agency post at the intake area the NJ HMIS Collaborative's "Reason for collecting Protected Personal Information" Poster.
- The user is then responsible for checking the appropriate box on the intake form within the AWARDS system indicating which option of sharing the client has chosen.

## **e. HMIS Security**

System Administrators and Site Administrators are responsible for validating, establishing, and granting security permissions and making sure security procedures are followed.

- Each agency is responsible for administering its own users (e.g., setting up user IDs, passwords, etc.).
- The System Administrator will provide a user ID and temporary password for each Site Administrator.
- The Site Administrators will provide a user ID and temporary password for each agency user.
- User names will be unique for each user.
- The System Administrator will have access to the complete list of users.
- The Site Administrator is responsible for terminating former employees.
- Any paper or other hard copy generated by or for HMIS that contains identifiable information must be under constant supervision by an HMIS user or developer when in a public area. When staff members are not present, the information shall be secured in areas that are not publicly accessible.
- Written information, specifically pertaining to user access (user name and password) shall not be stored or displayed in any publicly accessible location.

### **User IDs and Passwords**

Password protection has been used for many years to control access to computer information. Your computer password is your personal key to a computer system. Passwords help to ensure that only authorized individuals access computer systems. Passwords also help to determine accountability for all transactions and other changes made to system resources, including data. If you share your password with a colleague or friend, you will be giving an unauthorized individual access to the system.

The relevant authorized user(s) will be held responsible if an unauthorized individual uses their access privileges to damage the information on the system or to make unauthorized changes to the data.

## Simple rules for passwords

- Passwords should be kept confidential and should never be shared.
- Passwords should not be written down.
- Never use the same password twice. When you are selecting a new password, choose one that is quite different from your previous password.
- AWARD\$ passwords must be a minimum of eight characters.
- Passwords should not be trivial, predictable, or obvious.
- *Obvious* passwords include names of persons, pets, relatives, cities, streets, your user ID, your birth date, car license plate, and so on.
- *Predictable* passwords include days of the week, months, or a new password that has only one or two characters different from the previous one.
- *Trivial* passwords include common words like 'secret', 'password', 'computer', etc.
- Your password should not be the same as your user ID.

## Rules for User IDs and Passwords

- DO NOT share your password with anyone else.
- DO NOT use someone else's ID or password. If you need more access than you presently have or if you are having problems with your access, contact your Site Administrator for help.
- DO NOT use obvious, trivial, or predictable passwords. Obvious, predictable and trivial passwords include: names of relatives or pets; street names; days and months; repetitive characters; dictionary words; and common words such as PASSWORD, SECURITY, SECRET, etc.
- BEWARE of "shoulder surfers". These are people who stand behind you and look over your shoulder while you are keying in your password or PIN, or while you are working with confidential information.
- DO NOT use your access level to enable other individuals to access information that they are not authorized to access, or to submit transactions that they are not authorized to submit.
- NEVER write down your passwords or post them on your terminal or other obvious places.
- ALWAYS change the initial password assigned to you by your administrator as soon as you receive it.
- LOG OFF when you are finished using your terminal or workstation, or if you are stepping away from your desk, even momentarily.
- If you are going to be away from the office for an extended period

- (e.g., maternity leave or vacation), ask your Site Administrator to get your ID temporarily suspended. Your ID will be reactivated when you return.

**f. Data Access Location**

Users should use precautions when accessing NJHMIS via the Web from public locations where the potential exists for viewing of client information by unauthorized persons.

### **g. Ethical Data Use**

Every user bears primary responsibility for the material he or she chooses to access, store, print, send, display, or make available to others.

Appropriate use of the NJ HMIS modules includes, for example:

- Respect for the rights of others
- Respect for the property of others
- Consideration of other persons using shared systems
- Confidentiality in use of passwords and personal identification numbers
- A presumption of the right to privacy
- Use of tools for the purpose for which they are intended
- Adherence to the etiquette and culture as defined in systems that you use

Inappropriate use of the HMIS modules includes, for example:

- Unauthorized access, alteration, destruction, removal, and/or disclosure of data and/or information
- Disclosure of confidential passwords or personal identification numbers
- Malicious or unethical use, and use that violates federal laws

#### **h. Security Audits**

The NJHMIS Technical Assistants will perform regular security audits to ensure the security of HMIS data.

## **Access to HMIS**

On your Web browser type:

<https://njhmis.footholdtechnology.com>

**a. HMIS Customization**

- Agencies may request more user licenses, custom reports, and interagency data integration products.
- Agencies will not be able to customize HMIS itself. However, agencies will be able to request additional reports, provide changes to the reports, and request software changes.
- If an agency chooses a system(s) other than the AWARDS system to collect HMIS data, that agency is responsible for customizing and maintaining that system(s).

**b. Agency Participation Fee**

- Each Participant will be charged an annual participation fee to be involved in the NJHMIS Collaborative. The annual fee will be invoiced and payable to the NJHMFA. The initial annual fee in the amount of five hundred (\$750.00) dollars is due prior to the Participant's activation in the NJHMIS system. The annual fee is subject to change, and is the sole discretion of the NJHMFA.

**c. User Activation**

- Each user will be provided with a user ID and temporary password by the System Administrator or Site Administrator.
- The Site Administrator will take full responsibility for ensuring that their respective agency users are trained on the use of the HMIS modules, and that the user has knowledge of all HMIS policies and procedures.

**d. Breach of System or Client Confidentiality Penalty**

- Any Agency that is found to have had breaches of system security and/or client confidentiality shall enter a period of probation, during which time technical assistance shall be provided to help the Agency prevent further breaches.
- Probation shall remain in effect until the NJHMIS Assistant Director has evaluated the Agency's security and confidentiality measures and found them compliant with the policies stated in this Agreement and the User Policy, Responsibility Statement, and Code of Ethics Agreement.
- Subsequent violations of system security will result in suspension from the system.

## Hardware

## NJ HMIS Collaborative Hardware Technical Specifications

The following information are for those agencies looking to purchase new hardware. These are not hardware requirements for using AWARDS. The AWARDS application is a web base system, which does not load any software onto your local machines. If your current system has Internet access you will be able to access AWARDS.

### 1. Minimum Recommendations for computer equipment/software.

PIII w/256k RAM

Microsoft Windows 98 or above with IE Browser  
Communication

Ethernet RJ45 connection - Cable/DSL

Or

Phone Line - RJ11 connection

10 Gig Hard drive (not required for AWARDS, for agency use only)

CD-ROM Drive

### 2. Recommended software for your local desktop computers.

This software is not required for AWARDS, but would help protect your local computers.

Antivirus

Spy ware or Spam Blocker

### 3. Recommended software for your local servers.

This software is not required for AWARDS, but would help protect your servers.

Antivirus

Firewall

Spy ware or Spam Blocker

(Look to Techsoup.com for non-profit costs on software.)

**a. Participating Agency Hardware/Software Requirements**

New Jersey's HMIS implementation will require agencies to have a minimum of one Personal Computer ("PC hardware") with Internet connectivity, preferably high-speed – cable, broadband, etc. ("communication hardware"); and one printer ("print hardware"). For the purposes of this document, "HMIS Hardware" refers to all of the above three categories of hardware.

**b. Participating Agency Technical Support Requirements**

Participating agencies are responsible for providing their own technical support for all hardware and software systems used to connect to HMIS.

- Ongoing maintenance and support of Personal Computer and Printer hardware will also be the responsibility of the agency.
- Personal Computer and Printer hardware support will be limited to product warranty directly from the manufacturer. Agencies agree to deal directly with manufacturer(s) during product warranty periods.
- New Jersey's HMIS Implementation is not responsible for any hardware or software upgrades, replacements, or warranty. Agencies will be required to ensure that the supplied hardware continue to meet the minimum standards prescribed by the HMIS application vendor.
- Communication and Internet connection difficulties will be managed between the agencies and the appropriate Internet Service Provider selected by that agency.
- The HMIS Help Desk will provide troubleshooting and problem analysis/triage related to HMIS application usage. If any difficulty is traced to agency hardware or agency Internet connection, the HMIS Help Desk will not be obligated to interface directly with any hardware manufacturer and/or ISP. The HMIS Help Desk will attempt to continue to support and assist the agencies until resolution of the issue/problem, but the primary responsible entity for resolving hardware and Internet communication problems will be the agency. The HMIS Help Desk will be the primary responsible entity for resolving application-specific HMIS problems.

## **New Jersey HMIS Required Data Elements**

**a. Required Data Collection**

Each agency will be required to collect all data elements as listed below. An agency is responsible for what data they enter into HMIS beyond the HUD HMIS Required Data Elements.

**UNIVERSAL DATA ELEMENTS**

- \* Name
- \* Social Security number
- \* Date of birth
- \* Ethnicity and race
- \* Gender
- \* Veteran status
- \* Disabling condition
- \* Residence prior to program entry
- \* Zip code of last permanent address
- \* Program entry date
- \* Program exit date

**Program-Specific Data Elements:**

- \* Income and sources
- \* Non-cash benefits
- \* Physical disability
- \* Developmental disability
- \* HIV/AIDS
- \* Mental health
- \* Substance abuse
- \* Domestic violence
- \* Services received
- \* Destination
- \* Reasons for leaving
- \* Employment
- \* Education
- \* General health status
- \* Pregnancy status
- \* Veterans' information
- \* Children's education

Details about each of these categories may be read in HUD's Federal Register Final Notice FR 4848-N-02 dated July 30, 2004. The relevant pages are 45905-45927.

**LISTING OF AWARDS INTAKE SCREEN ELEMENTS AND THEIR  
REQUIRED RESPONSES:**

**(All required elements have an Asterisk next to them)**

Intake Date: (MM/DD/YY)

Shelter Bed:

Primary Worker

Referred by:

**First Name\*:**

Middle Name:

**Last Name\*:**

Suffix:

Alias:

**Birth Date\*:** (MM/DD/YY)

**Social Security #\*:** (999-99-9999 if unknown)

**SSN Data Quality\*:**

1 = Full SSN reported.

2 = Partial SSN reported.

3 = Don't know or don't have SSN.

4 = Refused.

**Gender\*:**

Male

Female

Trans-Male

Trans-Female

**Ethnicity\*:**

0 = Non-Hispanic/Latino.

1 = Hispanic/Latino.

**Race\*:** (multiple choices)

1 = American Indian or Alaska Native.

2 = Asian.

3 = Black or African-American.

4 = Native Hawaiian or Other Pacific Islander

5 = White

**Chronically Homeless\*:**

Yes

No

Date Left Last Permanent Residence:

**Zip Code of Last Permanent Address\*:**

**Zip Code Data Quality\*:**

1 = Full Zip Code Recorded.

8 = Don't Know.

9 = Refused.

**Residence Prior to Program Entry\*:**

1 = Emergency shelter (including a youth shelter, or hotel, motel, or campground paid for with emergency shelter voucher).

2 = Transitional housing for homeless persons (including homeless youth).

3 = Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab).

4 = Psychiatric hospital or other psychiatric facility.

- 5 = Substance abuse treatment facility or detox center.
- 6 = Hospital (non-psychiatric).
- 7 = Jail, prison or juvenile detention facility.
- 8 = Room, apartment, or house that you rent.
- 9 = Apartment or house that you own.
- 10 = Staying or living in a family member's room, apartment, or house.
- 11 = Staying or living in a friend's room, apartment, or house.
- 12 = Hotel or motel paid for without emergency shelter voucher.
- 13 = Foster care home or foster care group home.
- 14 = Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside).
- 15 = Other.
- 16 = Don't Know.
- 17 = Refused.

**Length of Stay at Previous Residence\*:**

- 1 = One week or less.
- 2 = More than one week, but less than one month.
- 3 = One to three months.
- 4 = More than three months, but less than one year.
- 5 = One year or longer.

**Marital Status\*:**

- Single
- Married
- Common Law
- Divorced
- Separated
- Remarried
- Widow(er)

**Individual/family Type\*:**

- Individual Male
- Individual Female
- Individual Male Youth (< 18)
- Individual Female Youth (< 18)
- Single Parent Family - Male Head
- Single Parent Family - Female Head
- Single Parent Family - Youth Head
- Two Parent Family - Adult
- Two Parent Family - Youth
- Adult Couple without Children

**# of Children\*:** 0-9 (if greater than zero, age and gender for each child)

**Income Sources\*:** (check all appropriate sources and enter dollar amount)

- 1 = Earned Income
- 2 = Unemployment Insurance
- 3 = Supplemental Security Income or SSI
- 4 = Social Security Disability Income (SSDI).
- 5 = A veteran's disability payment
- 6 = Private disability insurance
- 7 = Worker's compensation
- 8 = Temporary Assistance for Needy Families (TANF)
- 9 = General Assistance (GA) (or use local program name).
- 10 = Retirement income from Social Security
- 11 = Veteran's pension
- 12 = Pension from a former job
- 13 = Child support
- 14 = Alimony or other spousal support

- 15 = Other source
- 16 = No financial resources.

Non-Cash Benefits:

- 1 = Food stamps or money for food on a benefits card
- 2 = MEDICAID health insurance program (or use local name)
- 3 = MEDICARE health insurance program (or use local name)
- 4 = State Children's Health Insurance Program (or use local name)
- 5 = Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- 6 = Veteran's Administration (VA) Medical Services
- 7 = TANF Child Care services (or use local name)
- 8 = TANF transportation services (or use local name)
- 9 = Other TANF-funded services (or use local name)
- 10 = Section 8, public housing, or other rental assistance
- 11 = Other source

**Disabling Condition\*:**

- Yes
- No
- Don't Know

General Health:

- 1 = Excellent
- 2 = Very good
- 3 = Good
- 4 = Fair
- 5 = Poor
- 8 = Don't Know

**Currently Pregnant\*:**

- Yes
- No
- (If Yes, Due date: MM/DD/YY)

Special Needs: (Check all that apply)

- Mental Illness
- Alcohol Abuse
- Drug Abuse
- HIV/AIDS
- Mental Retardation/Development Disability
- Domestic Violence
- Other: (specify)

If Yes to Mental Illness:

Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:

- Yes
- No

If Yes to Drug/Alcohol Abuse:

Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently:

- Yes
- No

If Yes to Domestic Violence, when did experience occur:

- 1 = Within the past three months
- 2 = Three to six months ago

- 3 = From six to twelve months ago
- 4 = More than a year ago
- 8 = Don't know
- 9 = Refused

**Employment Status\*:**

- Yes
- No

# of Hours worked in the past week: (#)

Employment Tenure:

- 1 = Permanent
- 2 = Temporary
- 3 = Seasonal

Looking for Work (if not currently employed):

- Yes
- No

**Highest Level of School Completed\*:**

- 0 = No schooling completed
- 1 = Nursery school to 4th grade

**INTAKE SCREEN ELEMENTS continued**

- 2 = 5th grade or 6th grade
- 3 = 7th grade or 8th grade
- 4 = 9th grade
- 5 = 10th grade
- 6 = 11th grade
- 7 = 12th grade, No diploma
- 8 = High school diploma
- 9 = GED
- 10 = Post-secondary school

**Current Student\*:**

- Yes
- No

**Post-Secondary Degree \*:**

- None
- Bachelors
- Associates
- Masters
- Doctorate
- Other graduate/professional degree

**Received vocational training or apprenticeship certificate\*:**

- Yes
- No

**Veteran's Status\*:**

- Yes
- No
- Don't Know
- Refused

Birth Place:

Citizen:

- US Citizen

Registered Alien  
Undocumented Alien

Alien Registration:  
Homeless Cause  
Homeless Duration:

**Previous Living Situation\*:**

Rental Housing  
Streets  
Correctional  
Psychiatric Facility  
Emergency Shelter  
Transitional Housing  
With Family or Friends  
Treatment Facility  
Others  
Own Home

Primary Language:

English  
Spanish  
French  
Chinese  
Arabic  
Hebrew  
Hindi  
Russian  
Sign Language  
Other  
Creole  
Greek  
Italian  
Japanese  
Vietnamese  
Braille

Services Sought: (check all that apply)

Shelter/Housing

Drug Treatment

Mental Health Care

Medical Care

Legal Aid - CRJS/Civil

Legal Aid – immigration

Emergency Contact

Address

Relation:

Grandparent

Parent

Stepparent

Sibling

Guardian

Uncle

Aunt

Spouse

In-Law  
Cousin  
Friend  
Provider

Phone:

**LISTING OF AWARDS DISCHARGE SCREEN ELEMENTS AND THEIR REQUIRED RESPONSES:**

**(All required elements have an Asterisk next to them)**

**Resident:** (displayed)

**Gender:** (displayed)

**Birth Date:** (displayed)

**Admission:** (displayed)

**Address:** (displayed)

**Referral Source:** (displayed)

**Discharge Date\*:** (MM/DD/YY)

**Reason for Discharge\*:**

- Left for a housing opportunity before completing the program.
- Completed program.
- Non-payment of rent/occupancy charge
- Non-compliance with project
- Criminal activity / destruction of property / violence
- Reach maximum time allowed in project
- Needs could not be met by project
- Disagreement with rules/persons
- Death
- Other
- Unknown/disappeared

**Monthly Income At Discharges:** (Displayed from income choices below)

**Income Sources\*:** (check all appropriate sources and enter dollar amount)

- 1 = Earned Income
- 2 = Unemployment Insurance
- 3 = Supplemental Security Income or SSI
- 4 = Social Security Disability Income (SSDI).
- 5 = A veteran's disability payment
- 6 = Private disability insurance
- 7 = Worker's compensation
- 8 = Temporary Assistance for Needy Families (TANF)
- 9 = General Assistance (GA) (or use local program name).
- 10 = Retirement income from Social Security
- 11 = Veteran's pension
- 12 = Pension from a former job
- 13 = Child support
- 14 = Alimony or other spousal support
- 15 = Other source
- 16 = None.

**Non-Cash Benefits:**

- 1 = Food stamps or money for food on a benefits card
- 2 = MEDICAID health insurance program (or use local name)
- 3 = MEDICARE health insurance program (or use local name)
- 4 = State Children's Health Insurance Program (or use local name)
- 5 = Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- 6 = Veteran's Administration (VA) Medical Services
- 7 = TANF Child Care services (or use local name)
- 8 = TANF transportation services (or use local name)
- 9 = Other TANF-funded services (or use local name)
- 10 = Section 8, public housing, or other rental assistance

11 = Other source

**New Residence Setting\*:**

- 1 = Emergency shelter (including a youth shelter, or hotel, motel, or campground paid for with emergency shelter voucher).
- 2 = Transitional housing for homeless persons (including homeless youth).
- 3 = Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab).
- 4 = Psychiatric hospital or other psychiatric facility.
- 5 = Substance abuse treatment facility or detox center.
- 6 = Hospital (non-psychiatric).
- 7 = Jail, prison or juvenile detention facility.
- 8 = Room, apartment, or house that you rent.
- 9 = Apartment or house that you own.
- 10 = Staying or living in a family member's room, apartment, or house.
- 11 = Staying or living in a friend's room, apartment, or house.
- 12 = Hotel or motel paid for without emergency shelter voucher.
- 13 = Foster care home or foster care group home.
- 14 = Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside).
- 15 = Other.
- 16 = Don't Know.
- 17 = Refused.

**Destination Tenure\*:**

- 1 = Permanent
- 2 = Temporary
- 3 = Don't Know
- 4 = Refused.

**Destination Subsidy Type\*:**

- 1 = None
- 2 = Public Housing
- 3 = Section 8
- 4 = S+C
- 5 = HOME Program
- 6 = HOPWA Program
- 7 = Other Housing Subsidy
- 8 = Don't Know
- 9 = Refused.

**New Residence County\*:**

- 01 Atlantic
- 02 Bergen
- 03 Burlington
- 04 Camden
- 05 Cape May
- 06 Cumberland
- 07 Essex
- 08 Gloucester
- 09 Hudson
- 10 Hunterdon
- 11 Mercer
- 12 Middlesex
- 13 Monmouth
- 14 Morris
- 15 Ocean
- 16 Passaic
- 17 Salem
- 18 Somerset

19 Sussex  
20 Union  
21 Warren  
70 NJ-Unknown  
80 USA Not NJ  
90 Non USA  
99 Unkown

**Discharge To:**

**Anonymous Summary:**

**Discharge Notes:**

**Service Charge:**

**Discharge Summary:**

**Alerts:**

***Known Medical Problems: (Displayed)***

***Counselor: (Displayed)***

***Supervisor: (Displayed)***

**b. Appropriate Data Collection**

An agency is responsible for what data they enter into HMIS beyond the HUD HMIS Required Data Elements.

## **Quality Control**

a. **Data Integrity**

HMIS users at the agencies are responsible for the accuracy, correctness, and timeliness of their data entry and are responsible for ensuring that the HUD HMIS Required Data Elements are being collected.

Site Administrators are responsible for monitoring the integrity of data being entered into the NJ HMIS system.

**b. Data Integrity Expectations**

Data entry into AWARDS must take place, at minimum, on a weekly basis.

- Data from across agencies will be synchronized on a weekly basis for reporting purposes.

## **Data Retrieval**

**a. Participating Agencies**

- Interagency and inter-program data will be integrated under HMIS.
- While agencies are required to report a minimum data set on a regular basis, sharing of HMIS data among providers within the CoC is encouraged, but not required and is at the discretion of each client.
- Access to interagency identifiable information will only occur as authorized under state and/or federal statutes or via a Release of Information form signed by the client. Sharing data to determine service needs would therefore be facilitated.

**b. HMIS Software Provider**

The HMIS Software Provider does have access to individual and aggregate data contained within the HMIS. They will be responsible for addressing and resolving all issues that cannot be resolved at the local level.

**c. General Public**

The general public has a right to request non-identifiable aggregate data related to homelessness.

## **User Licenses**

a. **Software Licenses**

- Each agency will receive one user license per user for users to access the NJ HMIS system via the Internet.
- The Site Administrator will be responsible for tracking and reporting on utilization of user licenses. Unused licenses must be reported to the System Administrator.

## **Data Loading**

**a. Client Data**

- NJHMIS provides for the loading and sharing of client information.
- Historical client information, if possible and existing on a legacy MIS system, will initially be migrated to NJHMIS on a one time basis.
- Client data in Foothold Technology AWARDS will be available real-time, assuming that agency data is entered real-time.
- NJHMIS will provide a mechanism to load client data from existing agency MIS systems (i.e., any large scale third or fourth generation database systems) into the NJHMIS system.

**b. Schedule of Data Loads**

- NJHMIS data loads will take place weekly.
- NJHMIS users with data sources other than Foothold Technology AWARDS are encouraged to upload data weekly. However, every agency must upload their data by final business day of each month.
- Although data loads take place weekly, agencies can enter data into NJHMIS in real-time.

## **Training**

**a. HMIS Train-the-Trainer**

- Train-the-Trainer is a concept whereby someone is trained on how to teach others to complete a certain task.
- The person charged with this responsibility of train the trainer for your facility will be given the security level of "HMIS Site Administrator".
- The HMIS Train-the-Trainer will be responsible for training all End Users for his/her respective agency.

**b. Ongoing HMIS Training**

- The HMIS Site Administrator will be provided with necessary training, a written course outline, and available training materials. NJ HMIS Collaborative will provide periodic refresher courses for Site Administrators.
- If an end user leaves an agency, the HMIS Site Administrator is responsible for ensuring that the new person will be trained.

**c. Training Materials for Future Releases**

The HMIS Site Administrator will be provided with necessary training, a written course outline and available training materials.

**APPENDIX:  
Roles and Responsibilities**

**a. System Administrator**

- As the lead agency, the New Jersey Housing Mortgage Finance Agency (NJ HMFA) will employ the System Administrator for the purpose of coordinating access control requirements for all AWARDS users. The System Administrator will be a member of the Advisory Council, Steering Committee, and any subcommittees.
- NJ HMFA will ensure that a backup to the System Administrator is in place, in order to ensure that there is no interruption of service when the primary representative is away or unavailable to assist users.

**Responsibilities**

- Ensure that the Site Administrator has proper access level to the system.
- Chair the Advisory Council and reporting relevant issues to the Steering Committee.
- Implement decisions made by the Steering Committee.
- Assist Site Administrators with access problems, including:
  - Reissue passwords when the Site Administrator or user forgets their password.
  - Assist Site Administrators with questions and/or problems with the system.
- Delete access when Site Administrators are terminated or when they leave an agency.
- Ensure that users are aware of security requirements and policies and procedures.
- Inform Site Administrators when either the AWARDS data entry portal or the reporting portal is out of service.

## **b. HMIS Technical Assistant**

- The lead agency (NJ HMFA) will employ the Technical Assistant.
- This person will report to the System Administrator / HMIS Project Manager.
- The Technical Assistant will be a member of the Advisory Council and will serve, as backup to the System Administrator to ensure that there is no interruption of service when the primary representative is away or unavailable to assist users.
- Will act as a liaison between NJ HMFA and the CoC HMIS subcommittees.

### **Responsibilities**

- Ensure that the Site Administrator has proper access level to the system.
- Chair the Advisory Council and reporting relevant issues to the Steering Committee.
- Assist Site Administrators with access problems, including:
  - Reissue passwords when the Site Administrator or user forgets their password.
  - Assist Site Administrators with questions and/or problems with the system.
- Delete access when Site Administrators are terminated or when they leave an agency.
- Ensure that users are aware of security requirements and policies and procedures.
- Inform Site Administrators when either the AWARDS data entry portal or the reporting portal is out of service.
- Responsible for providing HMIS training to Site Administrators and end users.
- Provide second-level help desk support. If required, communicate issues to the AWARDS technical staff for resolution.

### **c. System Administrative Assistant**

The lead agency (NJ HMFA) will employ the Program Administrative Assistant with the purpose of coordinating and disseminating information to all AWARDS users. This person will report to the System Administrator / HMIS Project Manager.

#### **Responsibilities**

- Take minutes at all NJ HMIS meetings and distributing the minutes to the appropriate people.
- First-level help desk support. This includes:
  - Answering the help desk 800 number
  - Documenting and distributing help desk related issues
  - Escalating help desk issues if unresolved
- Disseminate any NJ HMIS-related documents or information.
- Coordinate and scheduling meetings and trainings.
- Perform other duties as required.

**d. Site Administrator**

- A Site Administrator will be designated by each provider for the purpose of coordinating access control requirements for users within their agency only.
- It is recommended that a backup to the Site Administrator be designated in order to ensure that there is no interruption of service when the primary representative is away or unavailable to assist users.

**Responsibilities**

- Coordinate access control requirements for users within their agency.
- Assist users with access problems, including:
  - Contacting the System Administrator on behalf of users who forget their password
  - Helping new users with logon procedures
- Inform the System Administrator when any of their users leave the agency.
- Assign the user access level.
- Delete access when users are terminated or when they leave the agency.
- Train all users within their agency to use the A.W.A.R.D.S system. The training should include any manuals, guidelines and other documents provided to them at their Train-the-Trainer sessions.
- Ensure that users are aware of security requirements, policies, and procedures.
- Periodically run and review audit reports to ensure appropriate privacy and data access policies are being followed by staff. Site Administrators can produce audit reports that report AWARDS user activity by user ID, time, date, and what client records were added, changed, or deleted.

**e. Participating Agencies**

Participating Agencies agree to use the NJHMIS for the purpose of homeless client intake and agree to collect the HUD-mandated minimum data set and enter this information into the NJHMIS system. The NJHMIS system may also be used for case management.

**Responsibilities**

- All participating agencies agree to abide by all policies and procedures outlined in this manual.
- All participating agencies agree to keep abreast of all AWARDS updates and all policy changes.
- Each agency will be responsible for identifying and approving their respective agency users.
- Each participating agency will be responsible for entering client data, following up on referrals, and running reports.
- All participating agencies are responsible for payment of their annual user fee to NJ HMFA.

**f. NJ HMIS Steering Committee**

- The NJ HMIS Steering Committee is responsible for HMIS-related policies and procedures, and for reviewing recommendations for approval from the NJ HMIS Advisory Council.

**g. NJ HMIS Advisory Council**

The NJHMIS Advisory Council will meet quarterly to discuss recommendations for system-wide changes in HMIS functionality and system-flow. The NJHMIS Project Manager will chair the Advisory Council.

The Advisory Council includes the following standing committees:

- Support Fund
- Training
- Policies and Procedures
- Data, Quality Assurance, and Outcome Measures
- Technology

**Support Fund Committee-  
Chair-  
Purpose:**

To develop criteria for the request of technology support funds by service providers participating in the Collaborative.

This criteria, would include specifics pertaining to, for example but not limited to, organization size and budget, technical capacity, funding limits, type of technology eligible for funding, frequency of which funds can be requested, obligation to collaborative for assistance. In addition, this committee will be charged with researching and providing information on funding/charitable resources interested in building the technological capacity of non-profit organization, making this information accessible to ALL provider agencies within the Collaborative.

**Training Committee-  
Chair-  
Purpose:**

Develop and provide a training strategy using Beta implementation as a baseline, providing recommendations for amendments and improvements for the remaining phases of implementation.

To maintain a pulse on the training needs of end users at the local level. This committee could develop a mechanism by which to regularly assess end users and executive agency staff's satisfaction with training provisions and make recommendations based on findings. Should work in concert with TA staff.

## **Policy and Procedures Committee**

### **Chair-**

#### **Purpose:**

Assess policy and procedures applied during the Beta phase, provide qualitative feedback on issues raised by the community users, what worked, what didn't, recommendations for changes.

This committee's charge is to make sure the policies and procedures of the HMIS Collaborative are not in direct conflict with local service provider agency's protocols, policies, and/or practices and that the same holds true with those of participating agencies in respect to HMIS and the HMIS Collaborative. This committee shall identify such conflicts and bring them forward for review and recommend resolution. This committee may find a need to develop a mechanism to identify areas of possible conflict and how to monitor for those as time moves forward. Will work with HMIS staff in policy changes made at the federal level (HUD) on HMIS, specifically when the changes will impact the providers at the local level.

## **Data, Quality Assurance, and Outcome Measures**

### **Chair-**

#### **Purpose:**

To gather feedback from end users during pilot phase to establish a consensus for needed and/or desired customizations.

To keep abreast of data standards and changes required by HUD in regard to HMIS. To assess issues at the local level that impact data collection and quality. Make recommendations based on assessments. To review outcome measures being used by other HMIS communities to date, determine what outcomes the NJ State HMIS Collaborative would usefully measure.

## **Technology**

### **Chair-**

#### **Purpose:**

To develop technical specification criteria to be used in conjunction with the criteria for need (established by the Support Committee), to determine technical purchases by local agencies with funds granted by the Collaborative Support Fund.

Develop an assessment tool for the evaluation of HMIS technical infrastructure. Evaluate issues regarding the importation and exportation of data.

**h. HMIS User**

NJ HMIS users are those individuals who work in Participating Agencies.

**Responsibilities**

- Each user will be responsible for complying with all the policies and procedures outlined in this manual.
- Each user will be responsible for using the NJ HMIS in an appropriate and ethical manner.

**i. HMIS User Access Levels**

Determination of HMIS user access levels will be based on each user’s job function as it is related to AWARDS’s data entry and retrieval schema. The following access levels are available in AWARDS. All levels are not required. Levels should be used based on each agencies organization structure.

<b>Access Level</b>	<b>Description</b>
<p>HMIS Project Manager  (CoC Executive Officer)</p>	<p>Access is generally limited to the de-identified database. This role allows the user to search the de-identified database of area agencies and programs to view or produce reports of the aggregated data. Sometimes the HMIS Project Manager may have to access the identifiable database for support purpose.</p>
<p>Technical Assistant/Trainer  (CoC Executive Officer)</p>	<p>The same access rights as HMIS Project Manager, however, this person is considered a system-wide Support person and will have access to client level data to facilitate supporting agency problems.</p>
<p>Volunteer  (Direct Care Staff)</p>	<p>Access is limited to service records within an agency. A volunteer can view or edit basic demographic information about clients (the profile screen), but is restricted from viewing detailed assessments. A volunteer can enter new client records; make referrals, or check-in/out a client from a shelter. Normally, this access level allows a volunteer to complete the intake and then refer the client to agency staff or a case manager.</p>
<p>Agency Clerical Staff  (Direct Care Staff)</p>	<p>Agency staff has full access to service records and access to most functions in AWARDS. However, Agency Staff can only access basic demographic data on clients (profile screen). All other screens are restricted, including assessments and case plan records.</p>
<p>Case Manager  (Direct Care Staff)</p>	<p>Case Managers have access to all features, excluding administrative functions. They have access to all screens within AWARDS, including assessments and service records. There is full reporting access.</p>

Site Administrator  (Agency Executive)	Site Administrators have access to all features, including agency level administrative functions. This level can add/remove user for his/her agency and edit their agency and program data. They have full reporting access.
Executive Director  (Agency Executive)	Same access rights as Site Administrator, but ranked above Site Administrator.

<b>Access Level</b>	<b>Description</b>
Regional or CoC Administrator  (Agency Executive)	Regional or CoC Administrator will help to maintain the AWARDS system, but does not have access to client or service records, add/remove users, reset passwords, and access to other system-level options for agencies within their jurisdiction. They can search the de-identified database and produce reports of the aggregated data. They will not have access to client level data.

#### **h. Communication with Participating Agencies**

- Operational procedures will need to be enforced.
- Each agency is responsible for making sure that all necessary NJ HMIS-related communication occurs.

**i. System Availability**

- The AWARDS data entry portal will be available 24 hours a day, 7 days a week.
- Agency and System Administrators will be informed of any operational downtime.

**j. Client Grievance**

- NJ HMIS itself does not intend to create or establish any unique grievance management processes.
- All agencies are responsible for setting up an internal grievance process to handle client complaints related to HMIS, including grievances related to consent and release of information.

**STATE OF NEW JERSEY**  
**HOMELESS MANAGEMENT INFORMATION SYSTEM**  
**COLLABORATIVE**  
**Participation Agreement**

This New Jersey Homeless Management Information System Collaborative (“**NJHMIS or HMIS**”) Participation Agreement (“**Agreement**”) by and between the **New Jersey Housing and Mortgage Finance Agency (“NJHMFA” or “Administrator”)**, a body politic and corporate and an instrumentality exercising public and essential governmental functions of the State of New Jersey with offices located at 637 South Clinton Avenue, PO Box 18550, Trenton, New Jersey 08625-2085, and **[insert agency name]**, a **[insert type of entity]**, (“**Participant**”) with principal offices located at **[insert address]**.

**RECITALS**

**WHEREAS** a New Jersey action plan was created for families and individuals who are homeless or at risk of homelessness; and

**WHEREAS** a Steering Committee prioritized the following activities: (1) development of a State Homeless Action Plan, (2) development of technical assistance programs to strengthen the New Jersey Continuum of Care SuperNOFA, and (3) development of a statewide plan to assist the Continuum of Care in meeting the United States Department of Housing and Urban Development’s (“HUD”) HMIS requirements; and

**WHEREAS** a statewide collaborative was created to address, among other things, HMIS planning and implementation issues; and

**WHEREAS** the purpose of the collaborative is to enable State agencies, service providers, homeless consumers and other stakeholders to understand the scope of homelessness in New Jersey, to improve service delivery to homeless persons and to evaluate the effectiveness of service interventions; and

**WHEREAS** The New Jersey Homeless Management Information System is a client information system that records the use of housing and services which can be used to determine the utilization of services of participating agencies, identify gaps in the local service continuum and develop outcome measurements; and

**WHEREAS** NJHMFA is the Administrator for the NJHMIS Collaborative;

**NOW, THEREFORE** in consideration of the mutual provisions contained herein and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, NJHMFA and Participant hereby agree as follows:

1. Definitions.

- a. Blind Service Providers are defined as agencies serving specific protected client populations. Those client populations typically have one or more of the following issues: (1) domestic violence; (2) HIV/AIDS; (3) Alcohol and/or substance abuse; or (4) mental health.
- b. Client is defined as a consumer of services.
- c. Client records are defined as Private Personal Information (PPI) collected and stored in a computer system.

- d. Close to real-time data entry is defined as within three (3) working days of seeing the Client.
  - e. Partner Agencies are a group of agencies working together to provide services to homeless and low-income individuals and families and they participate in the New Jersey HMIS.
  - f. Project Manager Person – An HMFA agency staff assigned to manage the NJ HMIS Collaborative Project.
  - g. Non-partner agencies are those agencies not participating in the New Jersey HMIS.
2. *Participation Fee.* Each Participant will be charged an annual participation fee to be involved in the NJHMIS Collaborative. The annual fee will be invoiced and payable to the NJHMFA. The initial annual fee in the amount of seven Hundred and fifty (\$0.00) dollars is due prior to the Participant's activation in the NJHMIS system. The annual fee is subject to change, in the sole discretion of the NJHMFA (**See Amendment "A"**).
3. *Confidentiality.* HMFA and Participant agree that the data, information and client records, related documentation, and data stored electronically relating to NJHMIS is confidential and shall be handled as follows:
- a. The Participant shall comply with all Federal, State and Local laws and regulations pertaining to confidentiality of information and records to ensure that client records are protected and not subject to disclosure. The Participant shall only release client records to Non-partner agencies with written consent by the client, unless otherwise provided in the relevant laws and regulations.
  - b. The Participant shall abide by all Federal, State and Local confidentiality laws and regulations pertaining to:
    - 1) all medical conditions, including, but not limited to, mental illness, alcohol and/or drug abuse, HIV/AIDS testing, diagnosis and treatment and other such covered conditions; and
    - 2) a person's status as a victim of domestic violence.A general authorization for the release of medical or other information is NOT sufficient for this purpose.
  - c. Federal, State and Local laws seek to protect the privacy of persons with physical and/or mental illness, who have been treated for alcohol and/or substance abuse, have been diagnosed with HIV/AIDS, and/or have been a victim of domestic violence. The Participant shall seek legal advice in the event that a Non-partner agency requests identifying confidential client information.
  - d. The Participant shall provide a verbal explanation of the NJHMIS database and the terms of consent to the Clients and shall arrange for a qualified interpreter or translator in the event that an individual is not literate in English or has difficulty understanding the Consent form.

- e. The Participant agrees not to release any individual client information obtained from the NJHMIS to any organization or individual without prior written Client consent. Such written Client consent shall specify exactly what information the Client allows to be released. Information that is not approved for disclosure, in writing, by the Client shall not be released. The Participant agrees to provide access (including a copy) of the client's own protected information to the client within thirty (30) days of the client's written request to the Participant.
- f. The Participant shall ensure that all staff, volunteers and other persons, who are issued a User ID and password for the NJHMIS, receive confidentiality training regarding client information and records and have signed a User Policy, Responsibility Statement, and Code of Ethics Agreement.
- g. Any staff, volunteer or other person who has been granted a User ID and password and is found to have willfully committed a breach of system security and/or client confidentiality shall have his or her access to the database revoked immediately, and will be subject to disciplinary action per the Participant's policies and procedures. The NJHMFA reserves the right to review Participant's policies and procedures, review discipline and seek remedies, in its sole discretion, against anyone found to have willfully committed a breach of system security and/or client confidentiality.
- h. In the event of a breach of system security or client confidentiality, the Participant Administrator shall notify the NJHMIS Project Manager within 24 hours. Any Participant that is found to have had breaches of system security and/or client confidentiality shall enter a period of probation, during which technical assistance shall be provided to help the Participant prevent further breaches. Probation shall remain in effect until the Project Manager has evaluated the Participant's security and confidentiality measures and found them compliant with the policies stated in this Agreement and the User Policy, Responsibility Statement, and Code of Ethics Agreement. Subsequent violations of system security may result in suspension from the system. The NJHMFA reserves the right to conduct routine and random audits to monitor security and client confidentiality.
- i. The Participant understands that the NJHMIS fileserver, which shall contain all HMIS-entered Client information, shall be located off-site in a physically secure and electronically monitored facility, and that the client information in the NJHMIS system is backed up and taken off-site daily. The Participant further understands that the fileserver containing all HMIS-entered Client information is maintained by vendor contracting with NJHMFA to provide said services. The contractor vendor has access to client information, said access being necessary to provide technical services to the NJHMFA. Further, the contractor has agreed to keep all

information confidential and maintained in accordance with HUD privacy standards.

- j. The Participant may have access to all Client data entered by the Participant. The Participant shall diligently record in the NJHMIS all service delivery information pertaining to individual clients served by the Participant. The Participant shall not, under any circumstances, knowingly enter false, misleading or biased data, including any data that would unfairly prejudice a client's ability to obtain services.
- k. If this Agreement is terminated, the remaining Partner Agencies shall maintain their right to the use of all Client data previously entered by the terminating Partner Participant, subject to the guidelines specified in this Agreement.
- l. The Participant shall utilize the NJHMIS Client Consent—Release of Information form for all clients providing information to the NJHMIS. The Client Consent—Release of Information form, once agreed to and signed by the Client, authorizes Client data to be shared with Partner Agencies for the period of [REDACTED] year(s), subject to the restrictions defined by the Client Consent form. (See Exhibit A).
- m. Participants' utilizing their own HIPAA-compliant Consent to Release Information for Data Sharing form should incorporate the first two paragraphs from the NJHMIS Collaborative form titled "Client Consent – Release of Information for Data Sharing" into their form. Agencies not using HIPAA-complaint consent for release of information forms shall use the NJHMIS Collaborative Client Consent – Release of Information for Data Sharing form.
- n. All Participants are required to submit a copy of their consent form to the NJHMFA for review and confirmation that the form is in compliance with HUD requirements. Participants agree that the Participant is solely responsible for making sure their consent form meets HUD standards. Participants shall not rely upon the NJHMFA's review and shall hold the NJHMFA, its staff, officers, members and affiliates, harmless from and against any and all claims for damages, losses, liabilities, costs or reasonable expenses related to consent form and HUD requirements under this Agreement.
- o. The Participant shall keep original signed copies of the Client Consent -- Release of Information for Data Sharing form for a period of no less than five (5) years.
- p. In no way does the NJHMIS require or imply that services must be contingent upon a Client's participation in the NJHMIS database. Participant shall provide services to Clients regardless of Client's

participation in NJHMIS, provided the Clients would otherwise be eligible for the services.

1. The Participant shall have access to identifying and statistical data on all Clients who consent to have their information entered in the NJHMIS database, except for data input into the database by “Blind Service Providers”.
- q. A Participant that is a Blind Service Provider shall have access to identifying and statistical data that the Participant inputs into the NJHMIS database for clients served by that Participant.
- r. A Participant that is a Blind Service Provider shall not have access to identifying and statistical data input into the NJHMIS database for clients served by other Blind Service providers.
4. *NJHMIS Use, Data Entry and System Security*. The Participant agrees to use the NJHMIS, enter data into the NJHMIS and operate in a manner to protect the integrity of the NJHMIS in complying with the following guidelines:
  - a. The Participant shall follow, comply with and enforce the User Policy, Responsibility Statement and Code of Ethics. Modifications to the User Policy, Responsibility Statement and Code of Ethics shall be established in consultation with Partner Agencies and may be modified as needed for the purpose of the smooth and efficient operation of the NJHMIS. NJHMFA shall announce approved modifications in a timely manner.
  - b. The Participant shall only enter individuals in the NJHMIS database that exist as Clients under the Participant’s jurisdiction. The Participant shall not misrepresent its Client base in the NJHMIS database by knowingly entering inaccurate information. The Participant shall not use the NJHMIS database with intent to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity.
  - c. The Participant shall use Client information in the NJHMIS, as provided to the Participant or the Partner Agencies, to assist the Participant in providing adequate and appropriate services to the Client.
  - d. The Participant shall consistently enter information into the NJHMIS database and shall strive for real-time, or close to real-time data entry.
  - e. When a Client revokes his or her consent to share information in the NJHMIS database, the User shall immediately notify the Participant Site Administrator of the revocation. When the Participant Site Administrator is notified of a client revocation, the Participant Site Administrator shall remove access to all identifying information about that client within 24 hours.
  - f. The Participant shall not include profanity or offensive language in the NJHMIS database.

- g. The Participant shall utilize the NJHMIS for business purposes only.
- h. NJHMIS shall provide introductory training to Participant staff on the use of the NJHMIS software. NJHMIS shall provide supplemental training regularly to accommodate changes in Participant staff, and address modifications to the AWARDS software when needed.
- i. NJHMIS shall be available to provide technical assistance to Participant staff.
- j. The Participant shall ensure that all staff, volunteers and other persons who are issued a User ID and password for NJHMIS receive client and system security training that covers all items in the NJHMIS User Policy, Responsibility Statement and Code of Ethics.
- k. The Participant shall take the following additional steps to ensure the security of the NJHMIS database system and the confidentiality of Client data:
  - 1. Escort all visitors and Clients to ensure that they do not access staff areas, record storage areas, or other areas potentially containing Client information. Persons not recognized as staff, visitors and Clients will be challenged for identification.
  - 2. Store hard copies of Client records in locking filing cabinets or in rooms that can be locked.
  - 3. Locate photocopiers, printers and fax machines to minimize access by visitors and unauthorized persons.
  - 4. Make sure that directors and other management or supervisory personnel are familiar with security and confidentiality policies and enforce such policies to ensure the security and confidentiality of the NJHMIS database and of Client information.
  - 5. Create an atmosphere where the Participant staff feels comfortable and obligated to report security breaches and misuse of the NJHMIS database system.
  - 6. The Participant shall encourage clients to report any breaches of confidentiality that they observe in the Participant.

5. HUD HMIS – Privacy and Security Standards

- a. All Participants shall review and comply with all standards for privacy and security, appropriate for the Participant's particular organization, as set forth in the *Department of Housing and Urban Development Homeless Management Information System (HMIS); Data and Technical Standards Final Notice*, as found in the Federal Register dated July 30, 2004 Volume 69, Number 146, paying particular attention to Section 4 of said notice.

- b. All Participants are required to submit a copy of their privacy notices and consent forms to the NJHMFA for review and confirmation that each is in compliance with HUD requirements.
- c. Participants agree that the Participant is solely responsible for making sure their notices, forms and other HMIS documentation meets HUD standards. Participants shall not rely upon the NJHMFA's review and shall hold the NJHMFA, its staff, officers, members and affiliates, harmless from and against any and all claims for damages, losses, liabilities, costs or reasonable expenses related to Privacy issues and HUD requirements under this Agreement.

## 6. Reports.

### a. Participant Reports

1. The Participant shall be enabled to report on identifying and statistical data on the Clients it serves, subject to the terms of this Agreement regarding Client confidentiality.
2. The Participant shall not be enabled to report on identifying and statistical data on Clients it does not serve.

### b. Area Reports

1. A Participant operating in an area shall be able to report on non-identifying and statistical data only for that area.
2. The NJHMIS Steering Committee shall develop protocols on customizing and releasing area reports.

c. The Participant may make aggregate data available to other entities outside of the system for funding or planning purposes pertaining to providing services to homeless persons. However, such aggregate data shall not directly identify individual Clients.

d. NJHMIS shall use only unidentified aggregate NJHMIS data for homeless policy and planning activities, in preparing federal, state or local applications for homelessness funding, to demonstrate the need for and effectiveness of programs and to obtain a system-wide view of program utilization in the State.

## 7. Termination.

- a. NJHMFA may terminate this agreement, for cause, if it determines that the Participant has violated any material term.
- b. Upon termination of this agreement for any reason, the Participant shall return or destroy all protected information received from the NJHMIS Program, or created or received by the Participant on behalf of the NJHMIS Program. This provision shall apply to protected information that is in the possession of subcontractors or agents of the Participant. The Participant shall retain no copies of the protected health information.
- c. In the event that the Participant determines that returning or destroying the protected information is infeasible, the Participant

shall notify the NJHMFA of the conditions that make return or destruction infeasible within two weeks in writing to the NJHMIS Project Manager. Upon notification that the return or destruction of the protected information is infeasible, the Participant shall extend the protections of this Agreement to such protected information and limit further uses and disclosures of the information to those purposes that make the return or destruction infeasible, as long as the Participant maintains the information.

- d. This agreement may be terminated by either party upon thirty (30) days written notice.
8. Assignability. Participant may not assign this Agreement or any of its obligations hereunder without the prior written consent of the NJHMFA.
9. Modifications. NJHMFA reserves the right to modify this Agreement at any time. NJHMFA shall provide thirty (30) days prior written notice to Participant of any modification adopted by NJHMFA.
10. Availability of Funding. The NJHMFA's obligations hereunder shall cease immediately, without penalty, if funding is no longer available to meet such obligations.
11. Participant's Representations and Warranties. Participant represents and warrants as follows:
  - a. It has all necessary power and authority to enter this Agreement and to perform all of its obligations hereunder and to manage and control and ensure each individual or entity that Participant authorizes, permits or allows access to the NJHMIS or related services and equipment or facilities also complies with the terms of this Agreement in exercising such individual's access.
  - b. This Agreement has been duly and validly authorized, executed and delivered by Participant and constitutes its valid and binding obligation.
  - c. In performing its obligations hereunder, Participant will comply with all laws, rules and regulations of all governmental bodies having jurisdiction.
  - d. Participant holds all required regulatory authorizations to perform this Agreement according to its terms.
  - e. Participant's obligations under this Agreement do not conflict with any other agreement.
12. NJHMFA's Representations and Warranties. NJHMFA represents and warrants as follows:
  - a. NJHMFA has all the necessary power and authority to enter this Agreement and to perform all of its obligations hereunder.
  - b. This Agreement has been duly and validly authorized, executed and delivered by NJHMFA and constitutes its valid and binding obligation.
  - c. In performing its obligations hereunder, NJHMFA will comply with all laws, rules and regulations or all governmental bodies having jurisdiction.

- d. NJHMFA holds all required regulatory authorizations and permits to provide the Services identified herein.
  - e. NJHMFA obligations under this Agreement do not conflict with any other agreement.
13. Breach. NJHMFA shall notify Participant of any breaches of the terms of this Agreement by Participant, any sharing Participant or any individual acting directly or indirectly under color of authority of Participant. Participant shall have such time as NJHMFA, in its sole and absolute discretion specifies in its notice breach, to cure such breach. In event such breach is not cured within the notice period, this Agreement may be terminated by the NJHMFA without further notice, obligation or liability to Participant.
14. Interpretation. The construction of this Agreement shall not be construed against the Party causing its preparation but shall be interpreted on the basis of the plain meaning of the terms used which have been reviewed by both Parties in consultation with their respective counsel.
15. Choice of laws. This Agreement is governed by the laws of the State of New Jersey, and Federal law, as applicable, without regard to the choice of law provisions of those bodies of law. Any claims asserted against the NJHMFA shall be subject to the New Jersey Contractual Liability Act, N.J.S.A. 59:13-1 et seq. (except for N.J.S.A. 59:13-9 thereof). While this statute is not applicable by its terms to claims arising under contracts with the HMFA, Participant agrees that it shall be applicable to claims arising under this Agreement. The Parties acknowledge that the HMFA is a public entity covered by the provisions of the New Jersey Tort Claims Act, N.J.S.A. 59:1-1 et seq.
16. Captions. Captions in this Agreement are asserted for convenience of reference only and do not define, describe or limit the scope or intent of this Agreement or any of the terms of this Agreement.
17. Entire Agreement. This Agreement contains the entire agreement between the Parties and supersedes all prior or contemporaneous agreements, understandings, representations, and statements, oral or written, between the Parties with respect to the subject matter of this Agreement and the transactions contemplated by this Agreement.
18. Successors and Assigns. All terms of this Agreement shall be binding upon, inure to the benefit of, and be enforceable by the Parties and their respective legal representatives, successors and assigns.
19. Further Assurances. The Parties shall cooperate with each other and execute any documents reasonably necessary to carry out the intent and purpose of this Agreement.
20. Severability. If any provision of this Agreement is declared or found to be illegal, unenforceable, or void by a court of competent jurisdiction, the provision shall in no way affect any other provision, covenant or condition of this Agreement.



**HMIS Participation Fee Declaration of Intent**

To all New Jersey Statewide Homeless Management Information System (HMIS) Collaborative participating Agencies and Continuum of Cares, This letter serves as a Declaration of Intent to adjust the Annual Agencies Participation Fee based on the total number of users per agency (per county) that have logins to the Foothold AWARDS application. It is understood that this letter serves as notification to the New Jersey HMIS Collaborative Agencies and Continuum of Cares that the Fee scales below have been put into place starting April 2009. All invoicing will be reflective of the number of user logins per Agency in AWARDS.

Fees are based on per Agency per Continuum of Care:

- 0 – 15 users: \$750 annual Fee
- 16 – 30 users: \$600 Monthly per Agency (\$7,200.00 Annually)
- 31 – 45 users: \$1,100 Monthly per Agency (\$13,200.00 Annually)
- 46 – 60 users: \$1,600 Monthly per Agency (\$19,200.00 Annually)
- 61 – 75 users: \$2,100 Monthly per Agency (\$25,200.00 Annually)

Abram L. Hillson  
Assistant Director, Supportive Housing and Special Needs  
HMIS Statewide Collaborative Assistant Director  
For the New Jersey Housing and Mortgage Finance Agency

**Exhibit A**

**NJHMIS Collaborative**

**Client Consent – Release of Information for Data Sharing via NJHMIS**

The NJHMIS Collaborative Homeless Management Information System (HMIS) serves the New Jersey Continuums of Care communities and State agencies which include partner agencies working together to provide services to individuals and families in New Jersey who are homeless or at risk of becoming homeless. Information collected in the HMIS database is protected in compliance with the standards set forth in the Health Insurance Portability and Accountability Act (HIPAA) and the U.S. Department of Housing and Urban Development HMIS Data Standards. Every person and agency that is authorized to read or enter information into the database has signed an agreement to maintain the security and confidentiality of the information. Any person or agency that is found to violate their agreement may have their access rights terminated and may be subject to further penalties.

- **I UNDERSTAND THAT:** The partner agencies may share limited identifying information about the people they serve with other parties working to end homelessness.
- The release of my information does not guarantee that I will receive assistance. This release of information includes public funded cash disbursements received during the past 3 years.
- This authorization will remain in effect for a minimum of 18 months unless I revoke it in writing, and I may revoke authorization at any time by signing a written statement or Revocation form.
- The following personal information will not be shared with any NJHMIS partner agencies via the NJHMIS computer system.
  1. HIV/AIDS information, such as status, diagnostic test results, mode of transmission, sexuality.
  2. Domestic violence information, such as abuse history, abuser information, trauma information.
  3. Behavioral health information, such as substance and alcohol abuse and mental illness.
  4. Clients supportive services contacts, medication information and case notes.
- If I revoke my authorization, all information about me already in the database will remain, but will become invisible to all of the partner agencies, except public (county, state or federal) cash disbursements.

If I am applying for county, state or federal cash disbursements such as SSH, HPRP, and TANF Emergency Assistance, this information will be shared with NJHMIS Collaborative users and State agencies.

By signing this form, I agree to share the following level of information with other NJHMIS partner agencies via the NJHMIS computer system:

- 1) I agree to share my [name (First, Middle, Last), client gender, program enrollment and exit dates, and cash disbursements received] via the HMIS system with other NJHMIS partner agencies.
- 2) I agree to share my [name (First, Middle, Last), client gender, ancestry, program enrollment and exit dates, demographic information, miscellaneous information, contacts information, cash disbursements] information via the HMIS system with other NJHMIS partner agencies.
- 3) I do not agree to share any of my information via the HMIS system with other HMIS partner agencies via the NJHMIS computer system. Exception is cash disbursements as noted above.

Client Name ( <i>please print</i> )	Client Signature	Date

Guardian Name, if required ( <i>please print</i> )	Guardian Signature (if required)	Date

Agency Personnel Name ( <i>please print</i> )	Agency Personnel Signature	Date

## NJHMIS Collaborative

### User Policy, Responsibility Statement, and Code of Ethics

#### USER POLICY

Partner agencies shall share information for provision of services to homeless persons and those at risk of homelessness through a networked infrastructure that establishes electronic communication among the partner agencies.

The Client Consent/Release of Information form shall be signed by every client entered into the NJHMIS database system. Minimum data entry on each consenting client includes:

- General information identifying the Client by name, indicating family status and latest residential history;
- Data detailing the client's current housing situation and the cause of their housing crisis;
- Shelter and Transitional housing utilization information, when appropriate.

Data necessary for the development of aggregate reports of homelessness service includes services needs, services provided, referrals and Client goals and outcomes.

The NJHMIS database system is a tool to assist agencies in focusing services and locating alternative resources to help homeless persons. Therefore, agency staff must use the Client information in NJHMIS only to target services to Clients' needs.

#### USER RESPONSIBILITY

Your username and password give you access to NJHMIS software. Initial each item below to indicate your understanding and acceptance of the proper use of your username and password. Failure to uphold the confidentiality standards set forth below is grounds for termination from NJHMIS database access, and may result in disciplinary action from the partner agency as defined in the partner agency's personnel policies.

I agree to maintain the confidentiality of client information in NJHMIS in the following manner:

- My username and password are for my use only and will not be shared with anyone.
- I will take reasonable means to keep my password physically secure.
- I will only view, obtain, disclose, or use the database information that is necessary to perform my job.
- I understand that the only individuals who may view or hear NJHMIS client information are authorized users, and I will take these steps to prevent casual observers from seeing or hearing NJHMIS client information:
- I will log off of NJHMIS before leaving my work area, or make sure that the NJHMIS database has "timed out" before leaving my work area.
- I will not leave unattended any computer that has NJHMIS "open and running".
- I will keep my computer monitor positioned so that persons not authorized to use NJHMIS cannot view it.
- I will store hard copies of NJHMIS information in a secure file and not leave such hard copy information in public view on my desk, or on a photocopier, printer or fax machine.
- I will properly destroy hard copies of NJHMIS information when they are no longer needed.
- I will not discuss confidential client information with staff, clients, or client family members in a public area.
- I will not discuss confidential client information on the telephone in any areas where the public might overhear my conversation.

- \_\_\_ I will not leave messages on my agency's answering machine or voicemail system that contain confidential client information.
- \_\_\_ I will keep answering machine volume low so that confidential information left by callers is not overheard by the public or unauthorized persons.
- \_\_\_ I understand that a failure to follow these security steps appropriately may result in a breach of client confidentiality and system security. If such a breach occurs, my access to NJHMIS will be terminated and I may be subject to further disciplinary action as defined in the partner agency's personnel policy.
- \_\_\_ If I notice or suspect a security breach, I will immediately notify the Agency Site Administrator.

**USER CODE OF ETHICS**

1. NJHMIS users will treat partner agencies with respect, fairness and good faith.
2. Each NJHMIS user will maintain high standards of professional conduct in his or her capacity as a NJHMIS user.
3. NJHMIS users will use NJHMIS in good faith to benefit Clients.
4. NJHMIS users have the responsibility to relate to the Clients of other partner agencies with full professional consideration.
5. Clients have the right to receive assistance even if they do not choose to provide their information to the NJHMIS.

I understand and agree to comply with all the statements listed above.

\_\_\_\_\_  
 NJHMIS User Name (please print)

\_\_\_\_\_  
 NJHMIS User Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Agency or System Administrator Name (please print)

\_\_\_\_\_  
 Agency or System Administrator Signature

\_\_\_\_\_  
 Date

No PHA's in the Morris County Region have a general preference or a limited preference for public housing or housing choice vouchers.

**Homeless Management Information System (HMIS) Lead Agency**  
**MEMORANDUM OF UNDERSTANDING**  
**Between**  
**Morris County**  
**And**  
**The New Jersey Homeless Management Information System Collaborative**

This memorandum of understanding establishes the governance and structures for the partnership between New Jersey Homeless Management Information System Collaborative (hereinafter called NJHMIS Collaborative) and the county-based Continuums of Care (CoC) throughout New Jersey, New Jersey Housing and Mortgage Finance Agency (NJHMFA) and the NJ Advisory Council with regard to understanding the roles and responsibilities of each stakeholder.

**I. PURPOSE AND BACKGROUND**

The purpose of this Memorandum of Understanding (“MOU”) is to confirm agreements between the **Morris County CoC** serving the **County of Morris** Jurisdiction(S) and the NJHMIS Collaborative, acting through the NJHMFA, related to management of the New Jersey Homeless Management Information System (NJHMIS). The participation cost share for your **County CoC** is \$13,000.00 annually. This MOU establishes NJHMFA as the HMIS Lead Agency for the CoC, defines general understandings, and defines the roles and specific responsibilities of each party related to key aspects of the governance and operation of the HMIS Project. HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD CoC funds and Emergency Solutions Grant (ESG) funding. HMIS is essential to efforts to coordinate client services and inform community planning and public policy. Through HMIS, homeless households would benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in New Jersey, including required HUD reporting. The parties to this MOU recognize that thorough and accurate capture and analysis of data about homeless services and households is necessary to service and systems planning, effective resource allocation, and advocacy, and thus, share a mutual interest in successfully implementing and operating HMIS in New Jersey.

**II. DURATION**

Except as provided in Section VIII (Termination), the duration of this MOU shall be from Fiscal year November 1<sup>st</sup> through October 31<sup>st</sup>. It is anticipated that this MOU will not need to be renewed annually once agreed upon and signed.

**III. GOVERNANCE AND PARTICIPATION**

**1. CoC Governance:**

The CoC is the lead planning group for HUD-funded efforts to end homelessness and for implementing and operating a homeless CoC system in New Jersey. As such and per HUD policy, the CoC is responsible for HMIS Project oversight and implementation, which encompasses planning, administration, software selection, managing the HMIS Data Warehouse in compliance with HMIS Standards if one exists, and reviewing and approving all policies, procedures, and data management plans governing Contributing HMIS Organizations (described in section IV 4 below). The CoC’s oversight and governance responsibilities are carried out by a minimum of two representatives from each of the participating CoC’s to the Collaborative Advisory Council.

**2. Purpose:**

The purpose of the Advisory Council is to provide support and recommendations and directions to the HMIS Lead Agency and their CoC related to the HMIS regulations and standards as set forth by HUD and our State Partners.

**3. Lead Agency Designation:**

The CoC designates NJHMFA as the Lead Agency for the New Jersey Balance of State Homeless Management Information System Collaborative. The NJHMFA is charged with managing the HMIS Data System/Warehouse operations on its behalf and providing HMIS Project administrative functions at the direction of the CoC, through its Advisory Council Members.

#### **4. Contributing HMIS Organizations (“CHO”):**

A CHO is defined as an organization (inclusive of the HMIS Lead) that operates a provider program and a program-level, HMIS-compliant system (described in Section II(5) below), whether or not it is a member of the CoC, and that contributes Protected Personal Information or other client-level data to the HMIS Data System/Warehouse. CHOs must enter into Participation Agreements in order to contribute such data to the HMIS Data System/Warehouse. The authority to enter into Participation Agreements with CHOs for the purposes of ensuring compliance with all applicable HUD and CoC HMIS Project requirements, including the operation of a program-level HMIS-compliant system, rests with the HMIS Lead Agency.

#### **5. Program-level HMIS-compliant System:**

A program-level HMIS-compliant system is defined as a client management information system operated by a provider program that allows the provider program to collect the minimum required data elements and to meet other established minimum participation thresholds as set forth in a CHO HMIS Agency Participation Agreements. These systems may include CARES, AWARDS, and other data systems owned or operated by providers.

#### **6. CHO HMIS Administrator (Agency Site Administrator):**

A CHO HMIS Administrator is defined as a single point-of-contact established by each CHO who is responsible for day-to-day operation of the CHO’s data collection system, ensuring program-level data quality according to the terms of the Agency Participation Agreement and associated data quality plans. If applicable, managing the upload process from the CHO program-level HMIS-compliant system to the Lead Agency’s HMIS Data System/Warehouse.

#### **7. End User:**

An End User is defined as an employee, volunteer, affiliate, associate, or any other individual acting on behalf of a CHO or an HMIS Lead Agency who uses or enters data in the HMIS Data System/Warehouse or program-level HMIS-compliant system from which data are entered or periodically uploaded to the HMIS Data System/Warehouse.

#### **8. Software and Hosting:**

The participating CoC’s Advisory Council Members along with the HMIS Lead Agency have selected a single product—Foothold Technology Service (“FTS”)—to serve as the sole HMIS Data System/Warehouse for the New Jersey HMIS Collaborative. All CHOs are expected to regularly input or upload data, at intervals and through mechanisms specified by the HMIS Vendor or the HMIS Lead Agency, to the Data System/Warehouse. The authority to enter into contracts with FTS for the purposes of operating and overseeing the HMIS Data System/Warehouse is the responsibility of the HMIS Lead Agency.

### **IV GENERAL UNDERSTANDINGS**

#### **1. Funding:**

- 1a. HUD Grant(s) - HMIS Project activities are funded in part by HUD CoC grants or direct payments from counties which do not have room under their HUD pro-rata share to offer a grant? The CoC authorizes NJHMFA, as the HMIS Lead Agency, to apply for and administer these funds. The terms and uses of HUD funds are governed by the HUD CoC grant agreement and applicable rules.
- 1b. Cash Match -The HUD CoC grants require a cash match. The match is made up of CHO Agency License fees and our state Partners (Department of Community Affairs and Department of Human Services) contributions.

#### **2. Fees:**

The HMIS Lead Agency annual participation license fees cover the fiscal year November 1<sup>st</sup> to October 31<sup>st</sup>. The CHOs are invoiced in November of each year. CHOs that upload HMIS data will be required to pay their own costs associated with establishing and operating their own program-level, HMIS-compliant system in accordance with the terms of the Agency Participation Agreement. At the discretion of the HMIS Lead Agency, with approval from the Advisory Council, a small annual increase can be provided to help offset costs to the HMIS Lead Agency.

### **3. Compliance with HMIS Standards:**

It is the responsibility of the CoC to ensure that the HMIS Lead Agency is operating the HMIS Project in compliance with HUD HMIS Technical Standards (2004), HUD HMIS Data Standards (2010), other applicable laws, and any future standards HUD will release. The parties agree to update this MOU (as provided in section VII, Amendment/Notices), other HMIS Project operational documents, and HMIS Project practices and procedures in order to comply with any updates to these standards established in notices or other guidance, within the HUD-specified timeframe for such changes.

### **4. Local Operational Policies and Agreements:**

The CoC charges the NJHMIS Collaborative, with the support of the Advisory Council, with developing and maintaining agreements, policies, and procedures. These agreements, policies and procedures include, but are not limited to, an operating policies and procedures manual for use and management of the data system/warehouse (including procedures for ensuring the security of data, disaster recovery, and data quality assurance), privacy policies and notices, data collection and technical standards for CHOs, Agency Participation Agreements, and End User Agreements. Once reviewed and approved, changes to the policies and procedures may be made from time to time at the request of NJHMFA or the CoC, through its Advisory Council Committee Members, to comply with HUD HMIS standards or otherwise improve HMIS operations. During any such modification periods, all existing HMIS policies and procedures will remain in effect until such time as the CoC Steering Committee approves the changes.

## **V. SPECIFIC RESPONSIBILITIES OF THE PARTIES**

### **1. CoC Responsibilities:**

The CoC shall select the representatives to the Advisory Council which serves as the lead HMIS Project governance body, providing oversight, project direction, policy setting, and guidance for the HMIS Project. The CoC exercises all its responsibilities for HMIS governance through its Advisory Council Members, with guidance from the CoC's Data Management Committee, effective as of the date of the authorization of this MOU. These responsibilities include:

- a) Ensuring and monitoring compliance with relevant HUD regulations and standards;
- b) Reviewing all official meeting minutes and all approvals, resolutions, and other key decisions of the Advisory Council that may be required by HUD rules related to the HMIS governing body;
- c) Reviewing all HMIS Lead Agency's Project policies, and procedures;
- d) Reviewing and approving all Local CHO's involvement in their CoC's HMIS;
- e) Reviewing all HMIS Lead Agency's Project policies, and procedures;
- f) Establishing data quality standards and benchmarks for all CHO's;
- g) Reviewing data quality standards and plans, and establishing protocols for addressing CHOs' compliance with those standards;
- h) Promoting the effective use of HMIS data, including measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs;
- i) Using HMIS data to inform CoC programs and system design, and measuring progress toward implementation of the CoC Strategic Plan and other CoC-established goals ;
- j) Provide all local information as necessary for compilation of the annual Housing Inventory Count (HIC), the HMIS elements of the annual Point-in-Time (PIT) Count, Annual Homeless Assessment Report (AHAR), Federal and local reports;

- k) Coordinating participation in the HMIS (and broader CoC) by all homeless prevention and assistance programs and other mainstream programs serving homeless people or working to prevent homelessness;
- l) Coordinate and producing the data quality and outcomes reports to present to CHO at monthly meetings;
- m) CoC will make the final decision on a CHO participation in their HMIS system.

## **2. NJHMIS Collaborative Responsibilities:**

NJHMFA serves as the Lead Agency for the HMIS Project, managing and administering all HMIS operations and activities. NJHMFA exercises these responsibilities at the direction of the CoC with directions from its Advisory Council Members. These responsibilities are contingent on continued receipt of the appropriate HUD grant funding, our State Partners, User License Fees and are as follows:

### **a) Governance and Reporting**

- Provide staffing for operation of the HMIS Project;
- Create system to generate data quality reports and analyses for review by the CoC and for submission to HUD;
- Provide, at least annually, a point-in-time unduplicated count of clients served in the HMIS (for sheltered PIT Count, AHAR, APR Pulse reports and/or other reports as required);
- Create annual report of unduplicated count of clients served in the HMIS over the course of one year (for AHAR);
- Create reports, at least annually, that can account for the lodging units in the HMIS (for HIC, AHAR, and Pulse reports, or as required); and an unduplicated count of newly homeless clients;
- Ensure the consistent contribution of data that meets all HUD-established data standards, at minimum, every program operating with funds authorized by the McKinney-Vento Act as amended by the HEARTH Act, including ESG funds;
- Work with the CoC to facilitate participation by all homeless prevention and assistance programs and other mainstream programs serving homeless people to participate in the HMIS;
- Facilitate the Collaborative Advisory Council Meetings.
- Attend local CoC and Data Committee meetings as often as possible;
- Determine the length of time that records must be maintained for inspection and monitoring purposes pursuant to HUD standards and ensure compliance with these standards;
- Respond to CoC Steering and Data Management Committee directives; and
- Provide data needed to inform CoC's progress toward achieving its Strategic Plan goals.

### **b) Planning and Policy Development**

- Manage and maintain mechanisms for soliciting, collecting and analyzing feedback from end users, CHO HMIS Site administrators, CHO program managers, CHO Executive directors, and homeless persons;
- Identify general milestones for project management, including training and expanding system functionality, and ensure that the HMIS Action plan is carried out and regularly reviewed;
- Develop and, upon adoption by the CoC Advisory Council Members, implement written policies and procedures for the operation of the HMIS Project and HMIS Data Warehouse, including requirements and standards for any CHO, and provide for the regular update of these procedures as required by changes to policy;
- Provide assistance to the CoC adopted and implemented data quality plan consistent with requirements established by HUD, and review and update this plan annually and upon update to HUD regulations, notice, or guidance;
- Develop and, upon adoption by the CoC Advisory Council Members, implement a security plan consistent with requirements established by HUD, and review and update this plan annually and upon update to HUD regulations or guidance;
- Develop and, upon adoption by the CoC Advisory Council Members, implement a disaster recovery plan

consistent with requirements established by HUD, and review and update this plan annually according to the most current HUD regulations or guidance;

- Develop and, upon adoption by the CoC Advisory Council Members, implement a privacy policy specifying data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; and process and protections for victims of domestic violence, dating violence, sexual assault, and stalking included in the data warehouse;
- **Ensure privacy protection in project administration; and**
- Develop and, upon approval by the CoC Advisory Council Members, execute HMIS Participation Agreements with each CHO, including:
  - Obligations and authority of the HMIS Lead and the CHO;
  - Protocols for participation in HMIS Project;
  - Requirements of the policies and procedures by which the CHO must abide;
  - Sanctions for violating the HMIS Participation Agreement; and
  - Terms of sharing and processing Protected Identifying Information between the HMIS Lead and the CHO;
  - CHO's annual participation fees to be paid to the Lead HMIS Agency.

**c) Grant Administration**

- Prepare and submit NOFA Project Applications for HUD's HMIS grants for those counties that allowed grant funds to the Lead HMIS Agency via E-SNAPS;
- Create annual budgets outlining the most efficient resource allocation to meet HMIS Project requirements;
- Support HMIS by funding eligible HMIS activities with eligible matching sources to serve as the HUD-required match;
- Manage spending for both HUD grants and matching funds;
- Manage the reimbursement payment process and maintain records of all reimbursement documents, funds, approvals, denials, and other required or relevant records;
- Ensure accurate and regular (quarterly, at minimum) draw down of HUD grant funding; and
- Complete and submit APR for HUD grants.

**d) System Administration**

- Oversee the day-to-day administration of the HMIS system;
- Manage contracts for FTS, which includes training for CHOs and DHS staff, and licensing of HMIS Server;
- Ensure HMIS software meets the minimum data and technical functionality requirements established by HUD in rules or notices, including un-duplication, data collection, maintenance of historical data, reporting (including HUD-required reports, data quality and audit reports), and any other requirements established by HUD or our State Partners (Department of Community Affairs & Department of Human Services);
- Ensure HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission, and destruction of data and the maintenance of privacy, security, and confidentiality protections;
- Develop standard reports and queries of HMIS data (e.g., data quality report, CoC quarterly report, etc.);
- Oversee and relate small- and large-scale changes to the HMIS software through coordination with Staff, the CoC's Advisory Council Members, and CHO HMIS administrators, if applicable;
- Maintain continuous End users trainings and CHO User Group meetings to discuss implementation of policies and procedures and data entry and upload processes when and if feasible;
- Update contact list of HMIS administrators for all CHOs in conjunction;
- Maintain original copies of all CHO's Participation Agreements and other required documents the end users must sign in a fire proof cabinet; and
- Maintain original copies of all CoC's MOU's agreements in a fire proof cabinet;

**e) End-User Administration**

- Provide or coordinate technical assistance and support structure;
- Document technical issues experienced by providers;
- Develop and deliver a comprehensive training curriculum and protocol, including accompanying tools and resources, that:
  - Includes, but is not limited to, data entry requirements and techniques, client confidentiality and privacy requirements, data security and data quality;

- Requires all CHO Site Administrators to participate in trainings; it is the responsibility of the CHO Site Administrator to ensure end users at the CHO receive training and HMIS information;
- Is encouraged for all HMIS end users, including intake staff, data entry staff and reporting staff at all CHOs;
- Is offered, at a minimum, monthly;
- Is offered in a manner that assures every new end user completes training prior to or shortly after collecting any HMIS data or using the HMIS; and
- Is conducted in a manner that assures every current end user completes a training update at least annually.

**f) Data Quality and Compliance Monitoring**

- Consistent with the CoC data quality plan, support the data quality plan by developing report tools needed;
- Consistent with the CoC data quality plan, develop reporting tools to allow monitoring of established data quality benchmarks for CHOs, including bed coverage rates, service-volume coverage rates, missing/unknown value rates, timeliness criteria, and consistency criteria;
- Consistent with the CoC's data quality plan, run and disseminate data quality reports on a quarterly basis to CHO programs indicating levels of data entry completion, consistency with CoC program models, and timeliness;
- Consistent with the CoC data quality plan, provide quarterly reports on HMIS participation rates, data quality and other analyses to the CoC and Data Management Committee; and
- Monitor compliance by all CHOs with HMIS participation requirements, policies and procedures, privacy standards, security requirements, and data quality standards through an annual review per the process outlined in the Agency Participation Agreement and approved by the CoC Advisory Council Members.

**G) Examples of Data Quality:**

The CoC in collaboration with the HMIS Lead Agency are jointly responsible for ensuring that the HMIS data processing capabilities, including the collection, disclosure, transmission, and destruction of data and the maintenance privacy, security, and confidentiality protections.

The CoC will set benchmarks that will measure the reliability and validity of the data collected in the AWARDS application. Timely and accurate data is considered to be within 3 days of a client's admission into your program.

Example:

Looking at a particular data element and assessing how many client records have blank or missing data helps analyze how reliable the data is. The more clients with missing or incomplete information, the less valid the data is.

**Data Quality benchmark 5 % or less missing**

**Data Quality Plan**

- Rationale behind its inclusion
- Factors to address for relevant component
- Special Issues and Exceptions to be considered
- Set benchmarks as a starting point for discussion, and make them based on the program types

**Timeliness Criteria Benchmark**

- Intake data should be entered in the HMIS AWARDS application within 3 days.
- Services and special issues data is to be entered into the HMIS system within 2 days of the client being serviced.
- A client must be discharged from the HMIS AWARDS system within 2 day after leaving a program.

**Overall Goals**

- No less than 5% of incomplete data for all HUD Universal and Program Specific Elements data
- Complete and accurate data for the month must be entered into the HMIS AWARDS system by the last Friday of the month.
- Uploading programs will not follow the above benchmarks and instead will upload their data in accordance to the guidelines setup with the CoC

**VI. DATA ACCESS AND MANAGEMENT:**

NJHMFA's authorized staff shall manage the data that is maintained in the FTS data system/warehouse and will have access to all data entered by CHOs. NJHMFA staff will only use the data for purposes having to do with the CoC. The CoC and State Partners will have access to aggregated and/or otherwise de-identified data that have met quality assurance standards as stipulated by NJHMFA HMIS staff.

**VII. AMENDMENT/NOTICES:**

This MOU may be amended in writing by either party once amendments have been approved by a majority of the Advisory Council Members. Notices shall be mailed or delivered to NJHMIS Collaborative, Assistant Director of HMIS at New Jersey Housing and Mortgage Finance Agency – 637 South Clinton Avenue – P.O. Box 18550 Trenton, New Jersey, 08650-2085

**VIII. TERMINATION:-**

Either party may terminate this MOU at a date prior to the renewal date specified in this MOU by giving sixty (60) days written notice to the other party. If the funds relied upon to undertake activities described in this MOU are withdrawn or reduced, or if additional conditions are placed on such funding, any party may terminate this MOU within thirty (30) days by providing written notice to the other parties. The termination shall be effective on the date specified in the notice of termination.

This MOU will replace the current agreement between the Continuum of Care and the HMIS Lead Agency commencing upon the signature of the parties.

For the Morris County Continuum of Care (CoC) serving the County of Morris Jurisdiction(S)

Signed: Shelia D. Carter Date: 8/16/13  
County and/or Continuum of Care Representative

Title: Herman Service Coordinator

For the New Jersey Housing and Mortgage Finance Agency

Signed: Anna A. Rendano Date: 8-23-13

Executive Director of HMFA or Designee.