

## 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-501 - Bergen County CoC

**1A-2. Collaborative Applicant Name:** Bergen County

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

**1A-4. HMIS Lead:** Bergen County

## 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	Yes
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	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	No
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	No
Youth advocates	Yes	Yes	No
Agencies that serve survivors of human trafficking	No	No	No
Other homeless subpopulation advocates	Yes	Yes	No
Homeless or Formerly Homeless Persons	Yes	No	No
SSVF Providers	Yes	Yes	No
NJ Dept. of Veteran's Affairs	Yes	No	No

**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 Bergen CoC hosts full CoC meetings 6 times throughout the year. Notices for meetings are widely distributed and all full CoC meetings are open to any agency or person interested in attending, allowing for input and contribution from a wide variety of agencies and advocates. The CoC has a number of subcommittees that focus on specific areas of interest or concern, enabling the CoC to engage some important patterns. As example, as a recommendation of the CoC membership, Bergen CoC signed on to the Zero:2016 campaign, thus implementing a Veteran's subcommittee. Through this committee there was a successful push to engage the VA in both the subcommittee and the full CoC. There has also been a focus around improving the way the community is addressing family homelessness due to the input from not only the youth providers but specifically from the Homeless Liaison's attendance and participation in the CoC.

**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).
Bergen County Division of Family Guidance	Yes	Yes	No
Greater Bergen Community Action, Inc.	No	Yes	No

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

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings 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).
Center for Hope and Safety	Yes	No
Bergen County Department of Human 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	Yes
End Chronic Homelessness by 2017	Yes
End Family and Youth Homelessness by 2020	No
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 Leadership Committee of the CoC is responsible for oversight of the homeless planning process and thus establishing subcommittees to address specific concerns and needs of the CoC. This group has the responsibility to appoint subcommittee chairs and request volunteers of the CoC to participate on the committee. When Bergen CoC Leadership Committee decided to sign on to the Zero: 2016 campaign, the CoC identified the need to create a subcommittee to address both the veterans and chronically homeless populations. The Bergen County Health, Housing and Human Services Center was identified as the chair for both of these committees and did outreach, along with CoC members to specific agencies as well as asked for volunteers for the committees. While it is these groups that are implementing the strategies, reports and updates are provided to the full CoC and Leadership Committee to ensure progress or to assist in addressing barriers found by the committees.

**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)**

Bergen CoC accepts proposals from any entity interested in applying. To ensure an open process, the CoC announces funding availability at full CoC meetings, which are open meetings, and sends out the funding notice to the full CoC mailing list which includes many agencies that are not currently CoC-funded. Agencies are also able to share the funding notice with other outside agencies. Any agency interested in applying also has the ability to contact the CoC Lead with questions about the CoC or proposal process, to not put them at any disadvantage when completing their proposal.

In determining project funding, there are no factors that would specifically put new agencies at a disadvantage. The CoC focuses on the agency capacity to implement the project rather than strictly whether the agency has experience working with HUD or the CoC. As a result of this process, during the FY2014 competition the CoC reallocated funds to a non CoC-funded agency for a new RRH project.

**1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation?** Bi-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	Yes
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	1	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	1	100.00 %
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	1	100.00 %
How many of the Con Plan jurisdictions are also ESG recipients?	1	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	1	100.00 %

How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1	100.00 %
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**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)**

Bergen County is the only Consolidated Plan jurisdiction within the Bergen County CoC. The entity responsible for the County's Consolidated Plan is the Bergen County Division of Community Development, who is also the CoC Lead. Due to this structure there is continued collaboration between the CoC and Con Plan jurisdiction. CoC agencies are able to provide valuable input to the County and allows the Division to solicit feedback at bi-monthly 1.5 hour CoC meetings related to the Consolidated Plan items. The County is also an integral part in creating strategic goals for addressing homelessness and is able to include them in the Con Plan. During the most recent completion of the Con Plan, the Division was able to bring a court stenographer to a CoC meeting so agencies could provide statements as to what they felt were the most prominent issues and needs related to homelessness in the County, providing the County with feedback they do not always get from having open hearings.

**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)**

The ESG recipient for Bergen County is the County Division of Community Development, who is also the CoC Lead. This structure allows for seamless coordination of ESG and CoC. Both the CoC and ESG committees that determine funding are composed of agencies that participate on the full CoC or CoC Leadership Committee. This allows ESG and CoC to align their funding, ensuring that each source is used in the most appropriate way, filling in gaps and reducing overlap between the two as well as outside sources. The CoC recently implemented system wide performance standards, many of which evaluate not only CoC-funded projects but projects funded through ESG and other sources. The CoC and ESG partners are currently working to incorporate additional standards to focus more closely on eligible uses of ESG outside of emergency shelter and rapid rehousing which are currently included. The ESG recipient also has access to all PIT, HMIS and CoC information needed for reporting or funding decisions.



**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)**

The Center for Hope and Safety (the Center) and Bergen County's Alternatives to Domestic Violence (ADV) through the Dept of Human Services are both active members of the CoC. It is standard practice for a homeless service provider to automatically refer a DV client to the Center for shelter. The agency will either have the client call the Center's hotline directly or will get consent to call the Center on their behalf. In addition, as an active CoC member, the Center is aware of available homeless services. If they feel someone is appropriate for a CoC program, they will obtain consent from the client and then contact the agency directly about the possible referral. The Center will work with the agency to determine eligibility before sending any confidential information through the referral. ADV also has a hotline in which household's who are seeking services related to DV will be referred to. ADV refers all DV households seeking shelter to the Center.

**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
Bergen County Housing Authority	16.00%	Yes-HCV
Englewood Housing Authority	13.00%	Yes-Both
Fort Lee Housing Authority	0.00%	Yes-HCV
Garfield Housing Authority	0.00%	Yes-Public Housing
Housing Authority of the Borough of Lodi	0.00%	No

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

**1C-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)**

There are a number of permanent housing opportunities that target persons experiencing homelessness in Bergen County outside the identified funding sources above. A total of 287 of the 662 permanent housing beds on the Housing Inventory Chart are not funded through CoC, ESG, HCV or Public Housing. These sources include 41 beds dedicated to the HIV population under HOPWA funded, 67 beds of permanent housing under the HUD VASH program as well as 14 beds dedicated by individual agencies. In addition, there are 3 SSVF rapid rehousing providers who are able to provide permanent housing units to homeless veterans and their families. In addition, there are at least 20 units of permanent housing that target the homeless that have been funded through Low Income Housing Tax Credit projects.

**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 checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented:	<input 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 Bergen County Housing, Health and Human Services Center currently serves as the one stop location for housing and services for homeless individuals in Bergen County and is piloting as the coordinated entry system for individuals in the community. The Center is located in the County's largest city and is in close proximity to many of the community service providers, the Board of Social Services, and is accessible by public transportation. The Center also works with the County's outreach teams, including PATH and SSVF, to ensure that any household on the street is connected to the housing and services available through the Center. Persons entering the Center receive a full assessment to determine service needs and are matched to appropriate programs and services both on-site and in the community. While the Center is piloting the coordinated entry process, the CoC is working to formalize the process and ensure that projects are able to receive all referrals through the system.

**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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" 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"/>

Housing Authority Turnover Units Set Aside for Homeless	<input checked="" 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?	19
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	1
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?	18
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"/>
<b>Performance outcomes from APR reports/HMIS</b>	
Length of stay	<input checked="" type="checkbox"/>
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
% connected to mainstream benefits, % discharged to homeless locations	<input checked="" type="checkbox"/>



<b>Monitoring criteria</b>	
<b>Participant Eligibility</b>	<input checked="" type="checkbox"/>
<b>Utilization rates</b>	<input checked="" type="checkbox"/>
<b>Drawdown rates</b>	<input checked="" type="checkbox"/>
<b>Frequency or Amount of Funds Recaptured by HUD</b>	<input checked="" type="checkbox"/>
Outstanding HUD monitoring findings, APR submitted on time, HMIS compliance	<input checked="" type="checkbox"/>

<b>Need for specialized population services</b>	
<b>Youth</b>	<input type="checkbox"/>
<b>Victims of Domestic Violence</b>	<input type="checkbox"/>
<b>Families with Children</b>	<input type="checkbox"/>
<b>Persons Experiencing Chronic Homelessness</b>	<input checked="" type="checkbox"/>
<b>Veterans</b>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

<b>None</b>	<input type="checkbox"/>
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**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)**

Bergen CoC currently has a priority for the chronically homeless and veteran populations. In the local application process, projects received up to 5 points for serving the chronically homeless. The full points were awarded to projects that had dedicated 100% of their beds to the chronically homeless, 3 points where at least 50% of beds were dedicated or prioritized and 1 point where at least 25% of beds were dedicated or prioritized to the chronically homeless. In addition, to receive the full 5 points associated with sponsor capacity/project value, the project needed to show it was working with the continuum in its Zero: 2016 efforts, placing a priority on chronic and veteran's homelessness. Also, while the CoC was measuring project's ability to link households with earned income, the measure excluded adults that were enrolled in the SSDI/SSI process, due to considerations of this populations needs and ability to obtain earned income.

**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 Bergen CoC emailed out the request for renewal concept papers on 5/7/15 and new concept papers on 10/2/15. These notices went out to agencies on the CoC mailing list and was then spread among other mailing lists and between agencies. In addition to the notices, the criteria and expectations of the renewal and new projects were discussed at CoC meetings on 5/13/15 and 9/9/15 and a detailed description of the application process was provided to all agencies on 5/13/15 when a mandatory Technical Assistance session was held that reviewed the performance, monitoring and concept paper scoring criteria. In addition, the policies and procedures related to the CoC selection process was posted to the Bergen County website on 11/18/15.

**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.)**

11/18/2015

**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.)**

No

**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.)**

**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)

Bergen CoC has a 3 part selection process including a performance review, project monitoring and concept paper submission. The monitoring reviews the project's compliance with HUD regulations and local standards and is associated with 40 of the 100 points available during project selection. During the monitoring the Committee reviews clients eligibility for the project based on homeless status, disabling condition, and consistency with dedicated subpopulations. Monitoring also looks at the project's ability to utilize all HUD funding, timely APR submission, if it is providing adequate match and documentation, if drawdowns are done at least quarterly, if it has any outstanding HUD findings and if it has MOUs with relevant agencies, among other items. Monitoring information is collected every other year through an on site monitoring, or on the off years it is done through a desk monitoring using HMIS data and a monitoring form that is submitted by the agency with relevant documentation.

**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, 2-4

**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.**

**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)?**  
**Applicant will enter the HMIS software name (e.g., ABC Software).**

A.W.A.R.D.S.

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

Foothold Technology, Inc.

## 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 Single CoC coverage area:**

**\* 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	\$82,893
ESG	\$20,000
CDBG	\$0
HOME	\$0
HOPWA	\$0
<b>Federal - HUD - Total Amount</b>	<b>\$102,893</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	\$36,540
State	\$0
<b>State and Local - Total Amount</b>	<b>\$36,540</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	\$0
<b>Other - Total Amount</b>	<b>\$0</b>

<b>2B-2.6 Total Budget for Operating Year</b>	<b>\$139,433</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):** 05/11/2015

**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	190	36	154	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	212	40	172	100.00%
Rapid Re-Housing (RRH) beds	34	0	34	100.00%
Permanent Supportive Housing (PSH) beds	599	0	532	88.81%
Other Permanent Housing (OPH) beds	0	0	0	

**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)**

Not Applicable

**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?** Bi-Monthly

## 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	0%	2%
3.3 Date of birth	1%	0%
3.4 Race	0%	1%
3.5 Ethnicity	0%	0%
3.6 Gender	0%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	0%	1%
3.9 Residence prior to project entry	0%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	1%
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	1%	7%

**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?** Bi-Monthly

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

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

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input 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)**

The CoC is currently working the the RHY programs in the County to ensure that all data is being entered into HMIS. The CoC is confident that the information will be entered into the system within the next 12 months. An exact start date has not yet been determined.

## 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): 02/03/2015

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? Yes

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy): 05/11/2015

## 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)**

For the 2015 Point in Time Count, Bergen CoC relied on two methods to complete the sheltered portion of the count, HMIS and interviews with sheltered participants. Any emergency shelter or transitional housing project that entered data in HMIS had their information directly pulled from the system. Data quality was reviewed by agencies to ensure all PIT data was accurate. Bergen CoC decided to utilize HMIS data to avoid duplicate data collection, to prevent additional data quality errors, and due to a community wide push to use HMIS data more effectively. While the majority of data did come from HMIS, interviews with sheltered participants were necessary to collect information on households that were served in domestic violence shelter programs. This method was chosen due to agencies feeling comfortable completing the interviews with their clients and felt it would provide the most accurate and complete information.

**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)**



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

**2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 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)**

The only adjustment made during the 2015 PIT was an additional training that was made available to anyone volunteering for the PIT. In 2014, two in person trainings, manuals and written guidance were available as training techniques for PIT volunteers. In 2015 there was also a webinar version of the PIT training which took place the same week as the Point in Time. This allowed any volunteers who may have signed up later or who missed an in person training to get the information and ask any questions instead of solely relying on the written material available.

## 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):** 02/03/2015

**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?** Yes

**2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy):** 05/11/2015

## 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)**

For the 2015 Point in Time Count, Bergen CoC relied on in person interviews to complete the unsheltered count. The CoC chose this method because there had been success using this methodology in the past and partners thought it would be the most accurate way to obtain specific demographic and subpopulation information. The interviews were conducted in known locations that outreach teams had identified as high frequency locations, a service based count which included food pantries and shelters among other service agencies and interviews were conducted at the project homeless connect event. The event provided connection with services, as well as incentives for persons who would complete PIT interviews. Incentives included food, blankets, hats, etc. Because Bergen County is a suburban community, the CoC felt these methods would be most effective while also being practical for the landscape of the County.

**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 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)**

During the 2015 unsheltered count, the CoC was able to engage several homeless and formerly homeless clients who helped identify locations where many unsheltered households had been staying, leading to a serious improvement in outreach during the unsheltered count. In addition, there were several agencies who participated in the unsheltered count that had not been partners in the effort in the past, including the National Association for the Advancement of Colored People, who assisted the CoC in counting a number of unsheltered households. The CoC also provided a webinar based training for anyone who was volunteering for the count but could not attend the in person training. This allowed for better training of volunteers that were completing the unsheltered count when compared to 2014.

## 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	371	340	-31
Emergency Shelter Total	162	172	10
Safe Haven Total	0	0	0
Transitional Housing Total	176	135	-41
Total Sheltered Count	338	307	-31
Total Unsheltered Count	33	33	0

### 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	887
Emergency Shelter Total	583
Safe Haven Total	0
Transitional Housing Total	344

**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)**

Bergen County has included in its performance standards, the goal of reducing the number of first time homeless households by at least 10% in 2015. To move towards this goal the CoC has worked to prioritize prevention funds for households that agencies feel need it the most. During the most recent CoC meeting on 9/9/15 the CoC members were able to vote for the prioritization of SSH funds provided by the County for prevention funds for at-risk families. In addition to prevention funds, in the implementation of the coordinated entry process, the CoC will formalize a prevention and diversion screening, working to identify resources outside of homeless assistance that the household can utilize to keep them out of homelessness. The CoC is also working to utilize HMIS data elements such as income, benefits, disabling conditions, residence prior to program entry and family composition to determine the profile of household's that are most appropriate and successful with prevention funding.

**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)**

While the CoC has put a prioritization on reducing length of homelessness, it is still working to ensure HMIS data is entered properly to calculate a household's complete length of homelessness. While this is true, the CoC has established a goal of reducing the average length of time persons remain in emergency shelter by 5% and transitional housing by 10% for 2015. To assist agencies working towards these goals, there has been an increase in coordination among shelter, transitional and permanent housing providers. This has improved the ability of homeless projects to move clients quickly into permanent housing in not only CoC funded projects but also housing available through public housing authorities. In addition, the CoC is focusing its funding on permanent housing solutions. In FY2014 and FY2015 the CoC allocated funds to new RRH projects, providing agencies with more options to quickly move clients out of shelters and into permanent housing.



**\* 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	209
Of the persons in the Universe above, how many of those exited to permanent destinations?	116
<b>% Successful Exits</b>	<b>55.50%</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	247
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?	237
<b>% Successful Retentions/Exits</b>	<b>95.95%</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)**

While the HMIS is developing the logic to easily track returns to homelessness, the CoC presently uses the destination element to track discharges to homelessness. The CoC has a performance standard that less than 10% of households will be discharged from TH or PH to a homeless destination. 72% of renewals met this standard during the 2015 performance review. To reduce returns to homelessness, the CoC has funded low barrier projects & has worked with its ESG & other funding sources to create resources for service provision to PH voucher households. The CoC has found that while rental assistance is essential, households have a difficult time maintaining their unit if they do not receive services to improve their self-sufficiency. The CoC also uses HMIS to monitor the reason for discharge, ensuring projects are not enforcing restrictions that result in a large number of clients losing their housing. 83% of projects met the CoC's standard of less than 10%.

**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)**

Bergen CoC has 3 performance standards related to a household's level of income: at least 54% of households will receive some form of income, at least 20% of those not enrolled in SSDI/SSI will have earned income and at least 54% of households will have increased their level of income from project entry to annual update or exit. All agencies that provide services to homeless clients in Bergen County put an emphasis on connecting households to the local Board of Social Services. Once connected eligible households are able to receive non-employment related income including SSI, SSDI, GA, etc. To assist household to increase their earned income, agencies will provide workshops focusing on interview skills, creating a resume, etc. In addition, agencies will connect eligible households to the Workforce Investment Board who implement Work First NJ as well as education and employment services that assist them in developing the skills and resources needed to obtain employment.

**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 Bergen County Workforce Investment Board (WIB) is the primary mainstream employment organization in Bergen CoC. The WIB provides assistance with resume writing, interview skills and career search. They provide connection to computers, telephones and printers free of charge and have an extensive resource library for consumer use. The Bergen County WIB has employment interviewers available to assist consumers with job search as well as the use of online resources. The WIB also provides workshops, trainings and linkages to education opportunities to assist persons in obtaining the skills and resources need to obtain employment. 100% of CoC funded project regularly refer and connect their clients to the employment services available through the WIB.

**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 Bergen CoC's PATH team provides extensive outreach to unsheltered persons in the community. The PATH team keeps track of all clients through HMIS allowing for better tracking by PATH and other housing providers/services that person may interact with. The PATH team has a strong relationship with the Bergen County Housing, Health and Human Services Center and works to provide clients with the information and benefits of receiving shelter or obtaining services and provides them an opportunity to obtain housing vouchers that are available through the CoC and Housing Authorities. The SSVF providers in the community are also closely linked to the Center and work to ensure that any unsheltered veterans are provided a shelter bed and are linked to available housing resources. Lastly, the CoC has a number of formerly homeless persons who work to identify locations where unsheltered homeless may be located and assist them in obtaining services through PATH or the Center.

**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)**

### 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	35	28	-7
Sheltered Count of chronically homeless persons	25	17	-8
Unsheltered Count of chronically homeless persons	10	11	1

**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)**

From 2014 to 2015 Bergen CoC saw a decrease of 7 (20%) in the total number of chronically homeless persons counted. The decrease is seen in the sheltered chronically homeless (8), while there was an increase of 1 in unsheltered chronically homeless from 2014 to 2015. The overall decrease demonstrated can be attributed to the CoC's priority for the chronically homeless and moving household's more quickly out of homelessness into permanent housing. The CoC has set up direct collaboration between shelters and permanent housing vouchers to improve the ability of the chronically homeless to find permanent housing solutions. While implementing these efforts, the CoC recognized that in addition to working with shelters, a stronger outreach needed to be made to the unsheltered chronic persons. During the 2015 PIT the CoC had a number of formerly homeless persons assisting the outreach teams to identify locations where unsheltered were staying, resulting in the increase of 1.

**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)**

Similar to Opening Doors, the CoC has prioritized ending chronic homelessness. Bergen County has seen a steady decrease in the chronically homeless population since the development of the 10 year plan and implementation of Housing First. Over the course of the next 2 years the CoC will take the following actions to increase permanent supportive housing for the chronically homeless:

1. Reallocate funding through the CoC process to the development of new PSH units for the chronically homeless. In the FY2013, FY 2014 and FY2015 applications the CoC will work to create new permanent housing units through reallocation of CoC funds. All new projects must dedicate units to the chronically homeless and may request funding for development or rental assistance
2. The CoC has about 30 units of permanent housing dedicated to the chronically homeless that are not yet leased up. Over the next 2 years the CoC will monitor the lease-up of these vouchers.

**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)**

In the FY2013/FY2014 CoC Application, Bergen CoC identified two main strategies to achieve the goal of ending chronic homelessness that were worked on:

1. Reallocate funding to create new units - during the FY2013 competition, Bergen CoC reallocated \$175,000 to create 3 new beds dedicated to a chronically homeless family. That unit is under construction and should be available within the year. While this effort was made, after evaluating the number of CH beds in the community, as well as other resources such as PHA vouchers that were being utilized for the CH, the CoC did not reallocate FY2014 or 2015 funds to CH beds and instead focused on RRH resources
2. Ensure the lease up of 30 vacant units of CH dedicated PSH - during 2014, the CoC worked to fill the majority of beds that were dedicated to the chronically homeless. While true, there are still 15 CH beds that have become available through turnover that the CoC is currently working to fill

**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 homelessness persons identified on the HIC.	135	126	-9

**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)**

Unfortunately the CoC has seen a decrease in CH beds from 2014 to 2015. This decrease is due to the loss of a 12 bed CH dedicated program in FY2014. The project was lost due to the inability of the agency to utilize the vouchers that were awarded. The project originally applied for sponsor based rental assistance vouchers. Once awarded, the original agency identified was not able to perform the tasks associated with sponsor based vouchers and the grantee was not able to identify another sponsor with the ability to collaborate on them. The project requested a change from sponsor based to tenant based, but the request was denied, leading to the reallocation of these funds in the FY2014 competition. While these 12 were lost, the CoC was able to reallocate funding for 3 additional beds in FY2013, leading to the difference of 9 beds.

**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.** Not Applicable

**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.	182
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.	10
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.	5
This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	50.00%

**3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?** Yes

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)**

The Bergen CoC has joined the Zero: 2016 initiative and is currently on track to end chronic homelessness by June of 2016. The CoC is working to fully utilize the resources available to meet this goal. The CoC has worked with the Bergen County Housing Authority to establish a priority for homeless, enabling the Bergen County Center to move both homeless and chronically homeless quickly out of shelter and into permanent housing through not only CoC funded PSH programs but also Housing Authority administered vouchers. In addition, the CoC is working with current PSH programs to prioritize available turnover beds to the chronically homeless. As shown in 3B-1.5, the CoC has identified approximately 5 beds that through turnover will be prioritized for the chronically homeless. The shelters in the community are also working to move persons out of shelter and into subsidized or unsubsidized housing as quickly as possible, ensuring less chronic homelessness due to extensive shelter stays.



## 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 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 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 has put a serious priority on addressing family homelessness. During the FY2014 competition, Bergen CoC reallocated \$266,149 to fund 11 units of rapid rehousing for families. The CoC is also submitting a Bonus Application in FY2015 to create 18 more units of rapid rehousing. Bergen County has also allocated \$150,000 in rapid rehousing funding through ESG in 2015. It is through these sources that the CoC is working to move families as quickly out of emergency shelter placements and into permanent housing. In addition, the CoC has a number of resources for families, especially through the Board of Social Services to work to identify the resources available to each household, including temporary rental assistance and quickly find a permanent housing unit for them. The CoC is working to establish a prioritization scale for homeless families and hopes to implement this and a diversion tool to prevent families from becoming homeless in 2016.

**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:	3	14	11

**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"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input checked="" 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:	54	39	-15
Sheltered Count of homeless households with children:	53	39	-14
Unsheltered Count of homeless households with children:	1	0	-1

**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)**

Bergen CoC has seen a decrease of 15 (28%) in family homelessness since 2014. The decrease is seen in both the number of sheltered and unsheltered households. The major decrease of 14, found in the sheltered population is due to a shift of resources and priority. The CoC is moving away from the use of transitional housing and is working to move families more directly into permanent housing. With this shift, the full 14 household decrease was seen among transitional housing projects in the community. In addition, the CoC has always had a priority for unsheltered families, working to ensure that no households with children are left without shelter. This priority has enabled the CoC to identify 0 unsheltered households with children in 2015.

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

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

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input 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 checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

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

Vulnerability to victimization:	<input type="checkbox"/>
Length of time homeless:	<input 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, 2104)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	7	8	1

**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)**

Not Applicable

**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):	\$2,038,725.00	\$2,004,783.00	(\$33,942.00)
CoC Program funding for youth homelessness dedicated projects:	\$98,942.00	\$98,942.00	\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$1,939,783.00	\$1,905,841.00	(\$33,942.00)

**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:	16
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	12
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	10

**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)**

The McKinney-Vento local education liaison is a member of both the CoC full membership and Leadership committee and participates in all aspects of homeless planning at those levels, including funding decisions for the CoC. In addition, local education representatives participate in the Annual Point in Time, providing the CoC with information of both homeless and at risk youth. The Head Start Agency is also an active member of the CoC and is attendance at all CoC planning meetings. Resources that are discussed at the CoC meetings with the liaison and head start agency are also shared at the Children's Interagency Coordinating Council (CIACC). The CIACC meets monthly and is a partnership between schools, local leaders, state officials, severe providers and families to address the needs of children who require specialized support, including the homeless. CoC members are active participants in CIACC meetings furthering the coordination among the groups.

**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)**

The CoC coordinates meetings between local education representatives and Coc programs serving families to enable the sharing of information regarding services and student rights. Through the relationship with the CoC, the liaison is available to work with any CoC agency regarding eligibility and the services available to any homeless child. The CoC instructs all ESG and CoC funded programs serving youth and families to evaluate the educational needs of the youth in their programs and connect them with the school homeless liaison to address their educational needs. The liaison is also able to connect homeless families they may come in contact with to CoC programs and agencies to evaluate their eligibility for homeless assistance and programs available through the CoC and ESG.

## 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:	18	22	4
Sheltered count of homeless veterans:	16	17	1
Unsheltered count of homeless veterans:	2	5	3

**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)**

Bergen CoC saw an increase of 4 homeless veterans from 2014 to 2015, an increase of 1 sheltered veteran and 3 unsheltered. The CoC has identified that this increase is due to an increase in the outreach and engagement among the veteran population. Bergen CoC has signed on to the Zero: 2016 initiative and thus has put a specific emphasis on collaborating with the VA and SSVF providers. These SSVG providers were instrumental in the 2015 PIT to assist the CoC in identifying the veterans that are in the community, leading to a slight increase in the number of sheltered and unsheltered veterans counted in 2015.

**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)**

Through the Zero: 2016 initiative, the Bergen CoC has created a close relationship with both the VA and SSVF providers in the community. All SSVF providers dedicate staff on a weekly basis to be present at the Bergen County Center. There they work with persons in the shelter and those they have engaged from outside agencies or those that are unsheltered to identify whether they are eligible for VA eligible services. If so, the SSVF providers will then work with each other and the CoC agencies to identify which VA specific or non-VA housing and services are most appropriate based on their needs. In addition, the Center is also in constant direct contact with the local VA to identify whether clients are eligible for specific VA benefits and to advocate on their behalf in obtaining services. Lastly, all agencies in the continuum are aware and participate in the initiative and know to refer all veterans in their programs or through outreach to the Center or SSVF providers.

**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)**

Every month the Bergen CoC has a veteran's subcommittee that meets to discuss the homeless veterans in the community that need housing and services. This committee includes the Bergen County Center, SSVF providers, the local VA, the Bergen County Division of Veteran's Services, as well as non veteran specific CoC providers. This collaborative works to identify the best resources available to the veterans they have identified as homeless through the community. When a veteran is not VA eligible, the Center, Division of Veteran's Services and CoC providers around the table will work together to identify the most appropriate resources, both through CoC and other outside funding sources such as HCVs to assist these households. Having these providers around the table puts a prioritization on the veterans and works to improve their chances of obtaining housing in non veteran dedicated 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:	16	22	37.50%



Unsheltered count of homeless veterans:	3	5	66.67%
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**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)**

As indicated above, the Bergen CoC is part of the Zero: 2016 initiative and is currently on track to end veteran's homelessness by December 2015. The CoC has implemented a by-name list to identify the homeless veterans in the community. The CoC has also established a veteran's committee which meets on a monthly basis that includes the Bergen County Center, SSVF providers, the local VA, the Bergen County Division of Veteran's Services and local homeless providers. This groups uses the by-name list and needs assessment to determine the most appropriate housing strategy for each veteran. The CoC has worked to utilize housing resources through not only the CoC, but local Public Housing Authorities and the local VA. Continuing this method and utilizing these resources, the Bergen CoC is confident that it will maintain on track and will end veteran's homelessness by the end of 2015.

## 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):	19
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).	19
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

**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)**

North Hudson Community Action (NHCAC) is an FQHC in Bergen County that is actively outreaching and assisting households for enrollment in Medicaid and Affordable Care Act options. NHCAC has certified application counselors who have been present throughout the county to offer free assistance with health insurance education, enrollment process, applications follow up, appeals and exemptions. From Jan 2015 to Sept 2015 NHCAC assisted 401 households enroll in ACA, 125 for NJ Family Care and assisted a total of 1,723 households in Bergen County with health insurance in addition to other items. In addition, there are 4 other agencies in Bergen County who have official healthcare navigators and certified application counselors to assist households. Lastly, all hospitals throughout NJ will temporarily enroll uninsured individuals who attend the hospital in Medicaid and will provide referrals for full enrollment.

**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 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):	19
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:	19
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":	100%

**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):	19
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:	18
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:	95%

**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:	44	58	14

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

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

Not Applicable

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

**4B-7a. If "Yes" 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)**

Not Applicable

**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)**

Not Applicable

**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.

<b>CoC Governance:</b>	<input type="checkbox"/>
<b>CoC Systems Performance Measurement:</b>	<input type="checkbox"/>
<b>Coordinated Entry:</b>	<input type="checkbox"/>
<b>Data reporting and data analysis:</b>	<input type="checkbox"/>
<b>HMIS:</b>	<input type="checkbox"/>
<b>Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:</b>	<input type="checkbox"/>
<b>Maximizing the use of mainstream resources:</b>	<input type="checkbox"/>
<b>Retooling transitional housing:</b>	<input type="checkbox"/>
<b>Rapid re-housing:</b>	<input type="checkbox"/>
<b>Under-performing program recipient, subrecipient or project:</b>	<input type="checkbox"/>
	<input type="checkbox"/>
<b>Not applicable:</b>	<input checked="" 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		
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure	Yes	CoC Rating and Re...	11/18/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes	CoC's Process for...	11/18/2015
06. CoC's Governance Charter	Yes	Bergen CoC Bylaws	11/18/2015
07. HMIS Policy and Procedures Manual	Yes		
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		
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
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:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

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

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** CoC's Process for Reallocating

## **Attachment Details**

**Document Description:** Bergen CoC Bylaws

## **Attachment Details**

**Document Description:**

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## Submission Summary

Page	Last Updated
<b>1A. Identification</b>	11/13/2015
<b>1B. CoC Engagement</b>	11/17/2015
<b>1C. Coordination</b>	11/17/2015
<b>1D. CoC Discharge Planning</b>	11/17/2015
<b>1E. Coordinated Assessment</b>	11/17/2015
<b>1F. Project Review</b>	11/17/2015
<b>1G. Addressing Project Capacity</b>	11/17/2015
<b>2A. HMIS Implementation</b>	Please Complete
<b>2B. HMIS Funding Sources</b>	11/17/2015
<b>2C. HMIS Beds</b>	11/17/2015
<b>2D. HMIS Data Quality</b>	11/17/2015
<b>2E. Sheltered PIT</b>	11/17/2015
<b>2F. Sheltered Data - Methods</b>	11/17/2015
<b>2G. Sheltered Data - Quality</b>	11/17/2015
<b>2H. Unsheltered PIT</b>	11/17/2015
<b>2I. Unsheltered Data - Methods</b>	11/17/2015
<b>2J. Unsheltered Data - Quality</b>	11/17/2015
<b>3A. System Performance</b>	11/17/2015
<b>3B. Objective 1</b>	11/17/2015
<b>3B. Objective 2</b>	11/17/2015
<b>3B. Objective 3</b>	11/17/2015
<b>4A. Benefits</b>	11/17/2015
<b>4B. Additional Policies</b>	11/17/2015
<b>4C. Attachments</b>	Please Complete
<b>Submission Summary</b>	No Input Required

## **Bergen County Continuum of Care Local CoC Funding Selection Process**

The Performance and Evaluation Committee is responsible for selecting projects that will be eligible to apply for funding through the annual Continuum of Care (CoC) Application released by the Department of Housing and Urban Development (HUD). This committee will determine which projects will be supported for funding and the funding level each project will be able to apply for based on the selection process outlined below.

### **Performance and Evaluation Committee Membership**

The Performance and Evaluation Committee membership will be composed of any interested member of the CoC Leadership Committee that would not be applying for funding through the Continuum of Care Process. All members must declare there is no conflict of interest in participating in this committee. The Chair of this committee will be the CoC Lead Agency, the Bergen County Division of Community Development.

### **Overview of Selection Process**

Each year, the Performance and Evaluation Committee will collect information about new and renewal projects seeking funding through the Continuum of Care. The Committee will collect information about each project through the Local Concept Paper, Monitoring Process, and Performance Review. Each project will receive a score for each of the three areas, which will then be combined by the Performance and Evaluation Committee. Once these final, combined scores are calculated, the Review Committee will use these scores to rank each project and determine final funding levels based on the NOFA released by HUD. The Committee will then notify each agency as to its rank and level of funding, and will provide feedback as to how the decision was made.

### **Local Selection Process**

#### Local Concept Paper

Renewal Projects:

- Upon release of the Final Grant Inventory Worksheet (GIW) the Performance and Evaluation Committee will release the Continuum of Care Concept Paper and Scoring Criteria for completion.
- Any agency interested in applying for renewal funding through the CoC will be required to submit a concept paper by the date specified on the announcement.
- Concept papers will be used to collect information focused on the agency's ability to implement the requested project, the project's target population and the willingness of the agency to coordinate with local planning efforts.
- Once all submissions have been received, the Performance and Evaluation Committee will review and score each submission based on the Scoring Criteria that was released with the Concept Paper.
- The Performance and Evaluation Committee has the ability to ask any agency to come in and present if they feel there was not enough information provided or if there were any questions related to the Concept Paper, Monitoring Report or Performance Review that was completed
- Any renewal project that does not submit the concept paper on time will lose an automatic 5 points from their Concept Paper Score.

- Any renewal project that does not submit a concept paper for their project, after a late notice reminder, will not be considered for funding.

#### New Projects:

- After the release of the HUD NOFA, the Performance and Evaluation Committee will release the Continuum of Care Concept Paper and Scoring Criteria for new project applicants. The release will include any local or HUD specified funding priorities and an estimate on the amount available for new projects.
- Any agency interested in applying for new funding through the CoC will be required to submit a concept paper by the date specified on the announcement.
- All agencies submitting new project applications will be required to do a brief presentation for the Performance and Evaluation Committee to provide any additional information about the new project application and to answer any questions the Committee may have.
- After all presentations are complete, the Performance and Evaluation Committee will review and score each submission based on the Scoring Criteria that was released with the Concept Paper.

A mandatory Technical Assistance Training will be provided to all agencies that have an intent to apply for new or renewal funding. This training will review the concept paper and what the Performance and Evaluation Committee is looking for when reviewing the submissions. Any agency that will be submitting a concept paper is required to attend, and those that do not attend the training will not be considered for funding.

#### Monitoring and Performance Evaluation

Prior to final funding decisions and ranking, all renewal projects will have a monitoring and performance evaluation complete, that will follow the process outlined in the Performance and Monitoring Procedures document.

#### Final Project Selection and Announcements

- After all new and renewal project concept papers have been scored and the scores are collected from the monitoring and performance evaluation for each project, the Performance and Evaluation Committee will combine all three to create the Final Project Score.
- This final project score will be used to rank the projects for final funding determination
- Based on the ranking and any funding restrictions outlined in the HUD NOFA, the Performance and Evaluation Committee will make a final determination on the level of funding each project will be able to apply for
- Decisions will be made based on majority vote
- After final funding levels have been determined, the CoC Lead will notify each agency individually, specifying the rank and level of funding for each new and renewal project that was applied for. The notification will also provide an explanation of how the Performance and Evaluation Committee came to its determination and the action the agency can take if interested in trying to appeal the decision of the Committee
  - The CoC Lead will notify all agencies no later than 10 days after the final deadline for all new and renewal Concept Papers has passed

## **Appeals Process**

Any agency that has been denied funding or received reduced funding through the local selection process may appeal the decision to the review committee. To submit an appeal, the agency must submit an appeals letter to the CoC Lead within 5 business days from receipt of the funding notification letter. The appeals letter must include the name of the project and the amount of funding originally requested, as well as a description of the grounds for appeal.

Upon receiving the appeal letter, the review committee will have 10 business days to review the information provided by the agency and provide the agency with the final appeal decision. The decision provided to the agency will include the discussion that occurred among the review committee members as well as detailed reasons for the appeal decision. The CoC Lead will keep detailed information on all review committee decisions, including those that are appealed.

# **BERGEN COUNTY CONTINUUM OF CARE BYLAWS**

## **ARTICLE I – ORGANIZATION**

Section I – Name: The name of this consortium shall be the Bergen County Continuum of Care (CoC).

Section II – Service Area: The CoC enables homeless provider agencies to serve the homeless and those at imminent risk of homelessness in the Bergen County geographic area.

Section III – Address: The principal office of the CoC shall be at the Bergen County Division of Community Development, One Bergen County Plaza, Hackensack, NJ 07601.

## **ARTICLE II – MISSION AND DESCRIPTION**

**THE MISSION OF BERGEN COUNTY’S CONTINUUM OF CARE IS TO PREVENT AND END HOMELESSNESS THROUGH COLLABORATION BY MAXIMIZING EFFORTS AND LEVERAGING RESOURCES.**

The Continuum coordinates a broad array of services that includes, but is not limited to:

- Outreach Assessments
- Prevention of Homelessness
- Emergency Shelter/Services
- Rapid Rehousing
- Transitional Housing
- Case management/Support Services
- Permanent Housing
- Education Resources

The CoC agencies will provide these services through funding from local, state, federal and private sources. The Continuum collaborates with other agencies, government, the faith-based community and other concerned organizations and individuals.

## **ARTICLE III – LEADERSHIP AND DECISION MAKING**

A. For the purposes of relating to HUD, the Bergen County Division of Community Development shall serve as the Collaborative Applicant and Lead Administrative Agency of the Continuum of Care.

B. The leadership group of the CoC shall be known as the Leadership Committee.

C. The purpose of the Leadership Committee is annually:

- 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;
- To make funding recommendations to the Collaborative Applicant for the annual allocation from the U.S. Department of HUD;



- To assure that programs receiving HUD funding are appropriately monitored and meet program performance standards
- To identify additional funding sources that contribute to the community's ability to respond to homeless populations;
- To monitor the effective functioning of the CoC, including review of attendance
- Additional planning and coordinating activities

D. The CoC and all its committees shall be supported by the Division of Community Development and/or an entity designated by the Leadership Committee of the CoC.

#### E. Membership

The Membership of the Leadership Committee shall consist of no more than 11 members, as delineated below. No more than one employee of an agency shall serve on the Leadership Committee at any time.

Category 1: Government Funders (1 from each category)

- Bergen County, Division of Community Development (CoC Lead)
- Bergen County Department of Human Services (HMIS coordinator)
- Bergen County Board of Social Services

Category 2: Public Housing Authorities (2 representatives)

Category 3: Community Stakeholders (2 representatives)

- Education
- Hospitals
- One (1) additional member (such as a private nonprofit i.e.: food pantries or other interested stakeholders)

Category 4: Providers and Consumers or Advocates of Homeless Services and/or Housing, HSAC

- Two (2) homeless provider agencies chosen from the membership by nomination and ballot at the annual meeting
- One (1) homeless or formerly homeless individual
- One (1) Human Services Advisory Council Representative

#### F. Terms of Services

Nominations committee consists of 2 representatives from the General Membership and 2 members of the Leadership Committee, approved by the Chair. They are responsible to present a slate by the November membership meeting and will be voted on by or at the January annual membership meeting.

Agency representatives chosen will rotate every 2 years. Category 2 & 3 will serve one (2) year term except in extenuating circumstances to be approved by majority of Leadership committee.

One member of each category will be initially elected to a 3 year term and that the remainder from each category will be elected to a 2 year term. All terms, thereafter, will be for 2 years.

#### G. Chairperson

The Chair of the Leadership Committee shall be elected biannually, with a term of service of at least 2 years.

#### H. Meetings

The Leadership Committee shall meet at least 6 times annually. The Chair of the Leadership Committee will establish the date, time and place. The notice shall contain a tentative agenda and minutes from the last meeting.

#### I. Quorum and Voting

- a. A quorum shall consist of five members, including at least one member from at least three of the categories
- b. Each member is entitled to one (1) vote on issues that come before the Leadership committee
- c. Decisions will be made by majority vote
- d. Emergency or Special meetings not on the regular schedule require 50% member attendance for the purpose of voting or handling any official business of the Consortium and must provide a minimum of one week prior notice in writing, fax, mail or email.

#### J. Minutes of Meetings

Minutes shall be kept of every meeting and shall include, at a minimum, the date, time and place of the meeting, a list of the attending members, the topic discussed, the decisions reached and actions taken, the list of roll call votes on all motions, any reports made, and other information as may be deemed necessary by the Chairperson.

#### K. Conflicts of Interest

It is the policy of the Bergen County CoC to avoid any conflict, or the appearance of a conflict between the CoC decision making entity and the organizations receiving awards of grants. All members of the CoC decision making entity shall absent themselves from discussing and voting on projects in which they or their agency have a financial or potential financial test.

### **ARTICLE IV – CoC**

#### A. GENERAL MEMBERSHIP: (Private/Nonprofit Sector/Public membership)

- a. Organizational membership (Private/Non Profit/Public agency)  
A private nonprofit 501(c)3 organization whose primary purpose is to provide housing, resources, education and/or services for the homeless.
- b. Individual membership (Public Sector)  
An individual (consumer or advocate) who has an interest and/or works in the field of homelessness

## General Membership Eligibility

- a. Organizational membership
  1. Ascribe to the mission and program standards of the CoC.
  2. Have a demonstrated understanding and knowledge in the field of homelessness.
  3. Shall be committed to providing quality service through cooperative, non-competitive means, and networking with programs in the field of homelessness.
  4. Maintain general and profession ethical standards.
  5. Have a governing board, i.e. a board of directors/board of governors.
- b. Individual membership
  1. Ascribe to the mission and program standards of the CoC.
  2. Have a demonstrated understanding and knowledge in the field of homelessness.
  3. Maintain general ethical standards.

## Approval and Removal of General Members

- a. Approval of a new member is by majority vote of the CoC Leadership Committee, upon recommendation of the CoC.
- b. Removal of a member shall be for good cause or for acting in a manner seriously detrimental to the continuum. Such a removal should be approved by a majority vote of the CoC Leadership Committee, upon recommendation of the CoC Membership Committee.

## Voting and Meetings

- a. Each organizational member and each individual member is entitled to one vote on issues that come before the full membership.
- b. Members may attend CoC Leadership meetings, except closed meetings, and serve on standing committees of the CoC Leadership and CoC Membership committees.
- c. Designee/Alternate:  
The designee's name/title and the alternate should be identified and submitted to the CoC Lead, at Bergen County Division of Community Development prior to the voting. Designees may not be changed without written notification.

B. There shall be at least one member from each entity named below, never to exceed one third public sector at all times:

### Category A: Local Government Representatives:

Bergen County Division of Community Development  
Bergen County Board of Social Services  
Bergen County Department of Human Services  
Bergen County Division of Veterans  
Bergen County One Stop

### Category B: All Public Housing Authorities located in Bergen County

Category C: Education Institutions:

Schools with the highest totals of homeless children, as identified by Bergen County Homeless liaison

Category D: Federal/State Government (including by not limited to):

Veterans Administration, NJ Office  
VASH Service Staff  
Department of Children and Families

Category E: Providers of Housing and/or Homeless services receiving local, County, State or Federal government funds (such as, but not limited to CDBG, SSH, HUD).

Category F: Community Stakeholders (including but not limited to):

United Way of Bergen County  
Local Private Hospitals  
Federally Qualified Health Centers  
Nonprofit Providers  
Consumers or Community Advocates

C. There will be a minimum of two members representing homeless or formerly homeless individuals and families.

D. All organizations and individuals wishing to be considered for membership on the CoC should submit an application to the Leadership Committee.

E. Meetings

The full CoC shall meet at least 6 times per year, but may meet more often, as determined by the CoC Lead. The CoC Lead shall establish the date, time and place of each meeting. There shall be at least 7 or 10 days notice for regular meetings and at least 48 hours for emergency meetings. The notice shall contain a tentative agenda and minutes from the last meeting. All membership meetings are open to the public.

January shall be designated as the Annual Meeting, at which time elections are to occur.

F. Attendance:

All members are expected to regularly attend 70% of the CoC meetings. The Leadership Committee reserves the right to remove any member for consistent failure to attend without a reasonable explanation.

G. Quorum and Voting

1. Regular Meetings: The presence of 40% of the Consortium's members at any meeting shall constitute a quorum.

2. Emergency or Special meetings not on the regular schedule require 50% member attendance for the purpose of voting or handling any official business of the Consortium and must provide a minimum of one week prior notice in writing, fax, mail, or email.

H. Minutes of Meetings:

Minutes shall be kept of every meeting and shall include, at a minimum, the date, time and place of the meeting, the number of the attending organization members, the topics discussed, the decisions reached and actions taken, the list of roll call votes on all motions, any reports made, and other information as may be deemed necessary by the Chairperson. The CoC Lead will keep official copies of the minutes for a minimum of seven years as is the standard for HUD documentation.

**ARTICLE V: ANNUAL DECISION MAKING PROCESS**

A. The Leadership Committee shall set community priorities in keeping with the overall mission of the CoC.

B. The Leadership Committee shall set performance standards to be incorporated in contracts with all funded provider agencies and nothing in this document shall imply that the CoC supersedes the authority of the contractor.

C. The Leadership Committee shall appoint a Technical Review Committee to review all applications for new or renewal projects and make decisions related to funding.

**ARTICLE VI: COMMITTEES**

A. The Leadership Committee Chairperson shall appoint individuals to chair the various standing committees or other committees on an as-needed basis. The appointee may be executive-level member of the CoC or other staff member or community volunteer.

B. Responsibilities of Committees

- a. Responsibilities of the Committee Chairpersons are to: (1) hold regularly scheduled meetings; (2) send out meeting notices; (3) facilitate committee meetings; (4) carry out goals and objectives of committee with committee members; (5) keep accurate attendance records and; (6) report to the full CoC on a quarterly basis
- b. Committee Participation – CoC member agencies are expected to actively participate on pertinent committees. Committee members’ responsibilities are to: (1) regularly attend committee meetings called by the committee chair; (2) participate in committee discussions; (3) assist in the development and implementation of committee activities such as policy development, surveys, etc.; and (4) participate in committee activities related to preparation of relevant sections of HUD applications.

C. The following shall be the standing committees of the Bergen County CoC.

- a. Membership Committee  
Purpose: Solicit and review CoC applications. Make recommendations for removal of members who are in violation of the bylaws.
- b. Mainstream Assistance  
Purpose: To develop policies and systems to help clients to secure mainstream benefits for which they are eligible (e.g. GA, TANF, SSI, SNAP).
- c. Discharge Policy  
Purpose: To develop and implement policies and protocols for the discharge of persons from publicly funded institutions or systems of care (such as health care facilities, foster care or other youth facilities, or correction programs and institutions) in order to prevent such discharge from immediately resulting in homelessness for such persons.
- d. Homeless Survey (BCDHS)  
Purpose: To develop methodology and tools to conduct point-in-time surveys to identify the homeless or those who are at imminent risk of homelessness and to implement such surveys on at least an annual basis.
- e. Homeless Prevention and Rapid Rehousing  
Purpose: To look at trends and issues among those seeking services related to homeless prevention and permanent housing and to utilize data to inform committee recommendations.
- f. Housing Management Information System (HMIS) (BCDHS)  
Purpose: To engage all funded providers in meeting expectations for maintaining accurate and up-to-date program-level data and to provide a forum to discuss HMIS issues or problems.

D. Other committees and subcommittees may be established to respond to community needs and/or emergency funding sources (e.g. frequent users of emergency services, veterans).

## **ARTICLE VII: ADOPTION AND AMENDMENT BYLAWS**

These bylaws may be amended at regular or special meetings of the CoC Consortium by a majority vote of the members present and voting.