Clark County/City of Vancouver Continuum of Care Governance Charter

Background

In 1994, the U.S. Department of Housing and Urban Development (HUD) instructed local communities to form a primary planning and coordinating body for homeless housing and services to work toward the goal of ending homelessness. HUD referred to these groups as the local Continuum of Care (CoC). In the Clark County/Vancouver area the Council for the Homeless (CFTH), the nonprofit that community stakeholders created to lead the community's efforts to end homelessness, had already been hosting a community coalition (called the Coalition of Service Providers). In 1994, the Coalition of Service Providers became this community's CoC. For consistency with the language used by HUD, this document will use the term CoC to refer to the Coalition of Service Providers.

HUD required the CoC to carry out specific functions such as creating and approving the annual submission to HUD to apply for CoC homeless assistance grants (formerly known as Supportive Housing Program, Shelter Plus Care, Moderate Rehabilitation, etc.). When it came to fulfilling these functions, the CFTH Board of Directors has acted as the decision making body for the CoC. The CFTH Board of Directors would receive input from the CoC membership through the general membership meetings and the workgroups and then vote on approving whatever action was needed.

The HEARTH Act of 2009 and the Interim Program Rule for the CoC released in 2012 codified the CoC structure and instructed communities in detail for what each CoC are responsible. In response to these laws and guidance from HUD, the CoC began discussing if a change in its decision making structure was necessary. With input from the 10 year planning workgroup and the CoC workgroup chairs, the CFTH Board of Directors determined it should no longer be the decision making body for the CoC and through this document is creating the CoC Steering Committee to fill this role moving forward.

Purpose of this Document

This charter governs the CoC and details what the CoC is; who can be a part of the CoC; what the CoC is responsible for; how the CoC makes decisions; and how and to whom the CoC delegates authority. This is intended to be a living document that will be reviewed and updated at least annually by the CoC Steering Committee with input from the general membership and made publicly available on the CFTH website. This charter also outlines the transition from the CFTH Board of Directors acting as the decision making group for the CoC to the CoC Steering Committee acting in that role.

What is the CoC?

The CoC is the group composed of representatives of relevant organizations that are organized to plan for and provide, as necessary, a system of outreach, engagement, and assessment; emergency shelter; rapid re-housing; transitional housing; permanent housing; and prevention strategies to address the various needs of homeless or at risk of homelessness persons for Clark County (including the City of Vancouver). By law, the CoC must:

(1) Hold meetings of the full membership, with published agendas, at least semi-annually;

(2) Develop a publicly available invitation process for new members at least annually;

(3) Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years;

(4) Appoint additional committees, subcommittees, or workgroups;

(5) In consultation with the collaborative applicant and the HMIS Lead, develop, follow, and update annually a governance charter;

(6) Consult with recipients and sub-recipients to establish performance targets appropriate for population and program type, monitor recipient and sub-recipient performance, evaluate outcomes, and take action against poor performers;

(7) Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD;

(8) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services;

(9) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

(i) Policies and procedures for evaluating individuals and families eligibility for assistance;

(ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;

(iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;

(iv) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;

(v) Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance;

(10) Designate a single Homeless Management Information System (HMIS) for our community;

(i) Designate an eligible applicant to manage the CoC's HMIS, which will be known as the HMIS Lead;

(ii) Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.

(iii) Ensure consistent participation of recipients and sub-recipients in the HMIS; and

(iv) Ensure the HMIS is administered in compliance with requirements prescribed by HUD.

(11) Planning for and conducting an annual point-in-time count of homeless persons within the geographic area that meets the following requirements:

(i) Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.

(ii) Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.

(iii) Other requirements established by HUD by Notice.

(12) Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;

(13) Providing information required to complete the Consolidated Plan(s) within the Coc's geographic area;

(14) Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum's geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and sub-recipients.

CoC Membership

The general membership of the CoC, the Coalition of Homeless Service Providers, is open to any nonprofit, business, government entity, faith community, or community member who is interested in, and committed to, preventing and ending homelessness in our community. All general membership meetings are open to the public and new member organizations can join at any meeting by filling out a memorandum of understand form.

CoC general membership meetings will be held on the second Wednesday of every odd numbered month at 10am in the community room at the YWCA. The meeting schedule, agenda, and minutes are publicly available on the CFTH website.

CoC Workgroups

In addition to the CoC general membership meetings, the CoC shall have workgroups and taskforces that meet between general membership meetings and move the CoC's agenda forward on specific issues. The CoC Steering Committee will review the workgroups/taskforces at least annually to determine if new workgroups/taskforces are needed, if current workgroups/taskforces could be consolidated, or if a workgroup/taskforce is no longer needed. Currently, the CoC has the following workgroups/taskforces: Coordinated Assessment Workgroup; System Coordination Workgroup; Veteran By Name List, Chronic Homeless By Name List, Housing First Cohort; and the HMIS User's Group.

The meeting schedule for the workgroups/taskforces is located on the CFTH website and all meetings are open to the public.

CoC Steering Committee

The CoC Steering Committee sets policy direction for the CoC and ensures that the CoC meets all of its HUD requirements. When a decision needs to be made on behalf of the CoC, such as when the annual application to HUD needs approval or when a policy needs to be adopted or changed, the CoC Steering Committee is vested with the authority to make those decisions on behalf of the CoC. The CoC Steering Committee should include at least five individuals, with a maximum membership of 18. Individuals may represent more than one Seat Representation. Each Committee member receives a three-year term, renewable after an engaged tenure.

Current CoC Steering Committee Identified Seat Representation are:

- Currently or recently experience/d homelessness
- Employment Provider
- Faith-Based Non-Profit
- Physical Health Provider
- DSHS
- Publicly Funded Emergency Shelter Provider
- Person with lived homelessness experience
- Local Business
- Homeless Advocate
- Behavioral Health Provider
- Faith base Entity
- Youth Provider
- Non-Profit Provider
- Victim Service Provider
- Culturally Specific Group
- Disability Advocate
- Veteran Provider
- Publicly funded homeless/housing provider
- School District
- Law Enforcement Representative

CoC Steering Committee officers include a Chair, up to two Vice-Chair's and a Secretary. This cohort makes up the executive committee of the CoC Steering Committee. The Chair facilitates the meetings and creates the meeting agendas. The Vice-Chair performs the Chair duties when they are unable to meet their duties. The Secretary identifies who will take minutes and signs CoC Steering Committee related documents. Each Executive Committee member receives a three-year term, renewable after an engaged tenure.

All decisions of the CoC Steering Committee, including changing the membership of the CoC Steering Committee or updating this document, must be made by a simple majority vote of the CoC Steering Committee membership. In order for a vote to pass, a majority of the membership of the CoC Steering Committee must vote in favor. For example, if there are 12 members of the CoC Steering Committee, but only 7 are present at a meeting, all 7 would have to vote "aye" for the vote to pass. If one or more CoC Steering Committee members have a conflict of interest and recues themselves for a vote, they shall not count towards the number of "aye" votes needed for passage of the vote. For example, if there are 12 members of the CoC Steering Committee and 5 members recues themselves for a particular vote, only 4 "aye" votes are needed for the vote to pass.

No CoC Steering Committee member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

Collaborative Applicant

The Collaborative Applicant is the entity that submits the community's application in response to the annual HUD CoC funding competition. The Council for the Homeless is the current Collaborative Applicant for the CoC. CFTH will notify the CoC when the annual application is available, update the CoC Steering Committee on any changes in the process, and work closely with the CoC Steering Committee to complete the application process. The CoC Steering Committee must approve the application, including which projects are included and the order in which they are included before CFTH can submit the application to HUD.

HMIS Lead

The HMIS Lead is the organization with primary responsibility for operating a single HMIS for our community. The Council for the Homeless is the current HMIS Lead for the CoC. CFTH will provide the CoC, through the System Performance Workgroup and the CoC Steering Committee, with the reports necessary for the CoC to make informed policy decisions and to monitor its grantees and sub-grantees. CFTH will ensure that there are up-to-date HMIS policies and procedures including a privacy plan, security plan, and data quality plan and, upon request, will bring these documents to the CoC Steering Committee for input and approval. CFTH will conduct regular HMIS user trainings and will hold a bimonthly HMIS User meetings to make sure that users have the most up-to-date information. CFTH will monitor whether all CoC and ESG funded agencies are entering data into HMIS and will alert the CoC Steering Committee if any such agency is not. CFTH will also enter into a participation agreement with all agencies entering data into HMIS that will outline the terms of participation including security plans. CFTH will work closely with the CoC every year to ensure that a comprehensive Point-in-Time count is conducted which is accurate and meets the requirements of HUD. HMIS User Policies and Procedures are located within the Council for the Homeless.

Coordinated Assessment

The Council for the Homeless Housing Solutions Center (HSC) acts as the CoC's Coordinated Assessment. The CoC Coordinated Assessment Workgroup drafts policies regarding the community's coordinated assessment and those policies are brought to the CoC Steering Committee for approval. The HSC administers the Clark County Assessment Tool, which determines the level of service needs. Depending on the score on the Clark County Assessment Tool someone might qualify for diversion, rapid rehousing/transitional housing, or permanent supportive housing. Details regarding the operations of the Coordinated Assessment system are located in the HSC Policies and Procedures manual.

Other HUD Mandated Activities

1. The CoC Steering Committee will provide feedback to the local government (City of Vancouver/Clark County) on their Consolidated Plans.

2. The ESG recipient, Clark County, will present to the CoC Steering Committee at least annually regarding ESG funding decisions and outcomes and the CoC Steering Committee will provide input regarding ESG funding allocations, performance standards, and outcomes.

3. With input from CoC funded projects, the CoC Steering Committee will set annual performance targets for CoC funded projects which align with HUD's performance targets and monitor whether or not projects are achieving those targets. Projects which are struggling to meet outcomes will be offered technical assistance and training. If a project continues to underperform, the CoC Steering Committee will reallocate its funding.

Current CoC Policies

- 1. Each homeless service provider that serves families must display posters listing the educational rights of homeless children and families and the contact information for the homeless school liaisons. Each provider must discuss these rights and are responsible for ensuring that all children are enrolled in the proper educational opportunities.
- 2. A program which serves families with children may not deny admission to or separate children who are under 18, from the family.
- 3. CoC providers shall not deny admission to or separate any family members from other members of their family based on age, sex, or gender.
- 4. Rapid rehousing participants shall pay 30% of their income toward rent.
- Order of priority for CoC Program-funded Permanent Supportive Housing beds are as follows:

 a. chronically homeless individuals and families with the longest history of homelessness and most severe services needs;
 - b. chronically homeless individuals and families with the longest history of homelessness
 - c. chronically homeless individuals and families with the most severe service needs
 - d. all other chronically homeless individuals and families.
- 6. Clark County CoC AntiDiscrimination Policy: Adopted 9/19/2019

See HUD CoC funded program policies for additional requirements.

Core Components of Rapid Re-housing

Adopted: 4/23/2018

Clark County requires that HOME proposals for Tenant-Based Rent Assistance (TBRA) meet a Rapid Rehousing model, with all referrals coming through the Housing Solutions Center. Rapid Re-housing is recognized as a best practice for rate of success and cost-effectiveness in permanently housing persons experiencing homelessness by the Department of Housing and Urban Development (HUD). In addition, this approach is consistent with Washington State's Strategic Plan to Ending Homelessness. Please consider fidelity to this model when reviewing and scoring a TBRA application. This sheet will help you understand Rapid Re-housing, so you can better assess the proposal you are reviewing.

What is Rapid Re-housing?

Rapid Re-housing is an intervention designed to help individuals and families quickly exit homelessness and return to permanent housing. Rapid Re-housing assistance is offered *without preconditions* (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are *tailored to the unique needs of the household*. While a Rapid Re-housing program must have the three core components listed below, it is not required that a household utilize them all.

Component 1: Housing Identification

- Recruit landlords to provide housing opportunities for individuals and families experiencing homelessness.
- Address potential barriers to landlord participation such as concern about short term nature of rental assistance and tenant qualifications.
- Assist households to find and secure appropriate rental housing.

Component 2: Rent and Move-In Assistance (Financial)

• Provide assistance to cover move-in costs, deposits, and rental and/or utility assistance necessary to allow individuals and families to move immediately out of homelessness and to stabilize in permanent housing.

Component 3: Case Management and Services

- Help individuals and families experiencing homelessness identify and select among various permanent housing options based on their unique needs, preferences, and financial resources.
- Help individuals and families experiencing homelessness address issues that may impede access to housing (such as credit history, arrears, and legal issues).
- Help individuals and families negotiate manageable and appropriate lease agreements with landlords.
- Make appropriate and time-limited services and supports available to families and individuals to allow them to stabilize quickly in permanent housing.
- Monitor participants' housing stability and be available to resolve crises, at a minimum during the time Rapid Re-housing assistance is provided.
- Provide or assist the household with connections to resources that help them improve their safety and well-being and achieve their long-term goals. This includes providing or ensuring that the household has access to resources related to benefits, employment and community-based services (if needed/appropriate) so that they can sustain rent payments independently when rental assistance ends.
- Ensure that services provided are client-directed, respectful of individuals' right to self-determination, and voluntary.

Trauma-Informed Care Resolution

Adopted 5/25/2018

As a Homeless Crisis Response System focused on supporting people who are homeless or at-risk of homelessness, we strive to be trauma aware – to understand the dynamics and impact of trauma on the lives of individual staff members, participants, volunteers, families and communities. Through individual empowerment, direct service, program design, and our organizational policies and procedures, we strive to create a trauma-sensitive culture by understanding the relationships between trauma, housing and health.