

## Before Starting the CoC Application

The CoC Consolidated Application is made up of three parts: the CoC Application, the Project Listing, and the Project Applications. The Collaborative Applicant is responsible for submitting two of these sections. In order for the CoC Consolidated Application to be considered complete, each of these two sections **REQUIRES SUBMISSION**:

- CoC Application
- Project Listing

Please Note:

- Review the FY2013 CoC Program NOFA in its entirety for specific application and program requirements.
- Use the CoC Application Detailed Instructions while completing the application in e-snaps. The detailed instructions are designed to assist applicants as they complete the application forms in e-snaps.
- As a reminder, CoCs are not able to import data from the 2012 application due to significant changes to the CoC Application questions. All parts of the application must be fully completed.
- All questions marked with an asterisk (\*) are mandatory and must be completed in order to submit the application.

For Detailed Instructions click [here](#).

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

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**1A-1 CoC Name and Number:** LA-506 - Slidell/Southeast Louisiana CoC

**1A-2 Collaborative Applicant Name:** Northlake Homeless Coalition

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

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**1B-1 How often does the CoC conduct meetings of the full CoC membership?** Monthly

**1B-2 How often does the CoC invite new members to join the CoC through a publicly available invitation?** Monthly

**1B-3 Does the CoC include membership of a homeless or formerly homeless person?** Yes

**1B-4 For members who are homeless or formerly homeless, what role do they play in the CoC membership?** Outreach, Volunteer, Organizational employee, Community Advocate  
Select all that apply.

**1B-5 Does the CoC's governance charter incorporate written policies and procedures for each of the following:**

1B-5.1 Written agendas of CoC meetings?	Yes
1B-5.2 Centralized or Coordinated Assessment System?	No
1B-5.3 Process for Monitoring Outcomes of ESG Recipients?	No
1B-5.4 CoC policies and procedures?	No
1B-5.5 Written process for board selection?	Yes
1B-5.6 Code of conduct for board members that includes a recusal process?	Yes
1B-5.7 Written standards for administering assistance?	No

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**1C-1 Provide information for up to five of the most active CoC-wide planning committees, subcommittees, and/or workgroups, including a brief description of the role and the frequency of meetings. Collaborative Applicants should only list committees, subcommittees and/or workgroups that are directly involved in CoC-wide planning, and not the regular delivery of services.**

	Name of Group	Role of Group (limit 750 characters)	Meeting Frequency	Names of Individuals and/or Organizations Represented
1C-1.1	NHC Coordinated Access & Assessment Taskforce	With assistance of TA, the group is developing the region-wide system that will be implemented by the CoC including policies & procedures. The Taskforce is undergoing system mapping, surveying and interviewing to better determine the model that should be incorporated. The Taskforce is obtaining input from the agencies providing homeless services, homeless individuals and families, and the church community to help form decisions. The geographical layout of the region and lack of public transportation will also be addressed along with community opinions as the final model(s) are designed.	Monthly	HMIS provider; CoC representative; Parish Government; Faith-based Community; ESG provider; PSH provider; Community representative; TA
1C-1.2	NHC Executive Committee	The Committee is actively working to determine the next steps the CoC should take to become a viable non-profit capable of addressing the needs of the homeless as well as meeting HUD requirements as a CoC. The Committee is developing criteria for hiring a full time ED, expanding written policies and procedures, and implementing the Coordinated Access & Assessment system.	Monthly	HMIS provider; CoC representative; St. Tammany Parish gov; Domestic Violence provider; transitional housing provider; 2 permanent supportive providers

1C-1.3	Project Review & Selection Committee	The Committee reviews projects participant data and bed utilization. For the grant, the Committee formulates evaluation tools based upon three categories: non-DV projects; DV projects; and HMIS project. A set of questions are developed based upon the category and the Renewal Project Threshold requirements. As questions are developed, the source of the information is also identified. The Committee develops the process independent evaluators use to review and rate each project. Once completed, the Committee meets to review the outcome, selecting the projects that will be approved for funding and ranking the projects based upon HUD tier guidelines.	Semi-Annually	HMIS provider; CoC representative; St. Tammany Parish govt; University Professor; homeless service providers; faith-based ministries; social services provider
1C-1.4	NHMIS User Group	The Group meets to discuss HMIS usage, data quality, policies, dissemination of information from the Louisiana Services Network Data Consortium, and software changes. Findings from discussions are reported back to the LSNDC, when applicable. The monthly meetings are also used for demonstrations of new features, changes to data standards, improved workflows, etc.	Monthly	HMIS provider staff; CoC representatives; CHO end users
1C-1.5				

**1C-2 Describe how the CoC considers the full range of opinions from individuals or organizations with knowledge of homelessness or an interest in preventing and ending homelessness in the geographic area when establishing the CoC-wide committees, subcommittees, and workgroups.  
(limit 750 characters)**

The CoC utilizes monthly general membership meetings to obtain opinions from the community, Point-in-Time Census to obtain opinions from the homeless population, and agency surveys of formerly homeless consumers served to obtain opinions from formerly homeless individuals and families. Decisions within the CoC are then formed based upon all of the opinions gathered.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**1D-1 Describe the specific ranking and selection process the CoC uses to make decisions regarding project application review and selection, based on objective criteria. Written documentation of this process must be attached to the application along with evidence of making the information publicly available.  
(limit 750 characters)**

The Board reviews project performance & HUD & CoC priorities criteria. Evaluation matrices are developed to quantify project performance & priorities. Measures are developed to score areas such as rates of housing stability for project consumers, rates of income increases for project consumers, HMIS data completeness & accuracy rates, & expenditure of prior years funding. Evaluation matrices are developed based on 3 categories: non-DV projects; DV projects; & HMIS project. The ranking of projects is based on the actual score with highest score in first position. The Planning Project is not scored as it was determined that the CoC would rank it in the last position. All applicants were made aware of their ranking on 1/17/14 and the ranking of projects was announced publicly on the NHC website on 1/22/14.

**1D-2 Describe how the CoC reviews and ranks projects using periodically collected data reported by projects, conducts analysis to determine each project's effectiveness that results in participants rapid return to permanent housing, and takes into account the severity of barriers faced by project participants. Description should include the specific data elements and metrics that are reviewed to do this analysis.  
(limit 1000 characters)**

Each project that is applying for renewal funding is scored on housing stability, with a measure for those in PSH having resided 6 months or longer, and those in TH having exited to PH. This is considered elemental to the effectiveness and core mission of the projects. There are also measures in the scoring process that relate to increasing income. These measures take into account a scale of barriers that could affect project participants, based upon the populations for whom the programs are designed. For instance, persons placed in TH have fewer rates of long-term disabling conditions that make employment difficult and have more opportunities for increasing income through employment. Persons in PSH are more likely to be eligible for non-employment income through SSI and SSDI, amongst others. Thusly, both sources of income are treated as equitable measures for scoring the projects, and acknowledging the variance in barriers to increasing income. The Project Review Committee takes these scores into consideration when ranking of projects.

**1D-3 Describe the extent in which the CoC is open to proposals from entities that have not previously received funds in prior Homeless Assistance Grants competitions.  
(limit 750 characters)**

The CoC announces any new bonus grants across the region that are available should a new agency be interested in applying for the funds through an RFP selection process. The CoC then works with the agency interested in applying to help them better understand how the programs operate and are structured along with their responsibilities for completing the Project Application, Annual Progress Reports, utilizing HMIS to capture their homeless data, and becoming an active participant within the CoC if they are not already an active participant. When reallocations are announced, agency's eligible under 24 CFR 578.15 will be invited to apply for new permanent supportive housing projects or new rapid re-housing projects for homeless households with children.

**1D-4 On what date did the CoC post on its website all parts of the CoC Consolidated Application, including the Priority Listings with ranking information and notified project applicants and stakeholders the information was available? Written documentation of this notification process (e.g., evidence of the website where this information is published) must be attached to the application.** 01/22/2014

**1D-5 If there were changes made to the ranking after the date above, what date was the final ranking posted?**

**1D-6 Did the CoC attach the final GIW approved by HUD either during CoC Registration or, if applicable, during the 7-day grace period following the publication of the CoC Program NOFA without making changes?** Yes

**1D-6.1 If no, briefly describe each of the specific changes that were made to the GIW (without HUD approval) including any addition or removal of projects, revisions to line item amounts, etc. For any projects that were revised, added, or removed, identify the applicant name, project name, and grant number.  
(limit 1000 characters)**

**1D-7 Were there any written complaints received by the CoC in relation to project review, project selection, or other items related to 24 CFR 578.7 or 578.9 within the last 12 months?** No

**1D-7.1 If yes, briefly describe the complaint(s), how it was resolved, and the date(s) in which it was resolved. (limit 750 characters)**



## **1E. Continuum of Care (CoC) Housing Inventory**

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**1E-1 Did the CoC submit the 2013 HIC data in Yes**  
**the HDX by April 30, 2013?**

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

### Intructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

### 2A-1 Describe how the CoC ensures that the HMIS is administered in compliance with the CoC Program interim rule, conformance with the 2010 HMIS Data Standards and related HUD Notices. (limit 1000 characters)

In compliance with CoC Program interim rule, the Northlake Homeless Coalition (NHC) has designated an HMIS that serves the catchment area of the CoC jurisdiction. Since 2003, Southeastern Louisiana University, through the Northlake HMIS Data Project (NHMIS), has managed the HMIS for the CoC and has continuously been selected as a project applicant in the HUD CoC funding competitions. A representative from both the NHC and the NHMIS serve on the Board of Directors for the Louisiana Services Network Data Consortium (LSNDC), which is the governing body for HMIS within Louisiana. The LSNDC, under the guidance of the Policy and Data Quality/Technology Committees, have developed procedural standards and agreements that comply with the 2010 HMIS Data Standards. These documents identify organization participation requirements, including rules around data collection, client privacy, and security maintenance. The LSNDC governing board reviews, revises, and approves all procedural standards and agreements, which are then released for adoption by the membership CoCs. The NHC reviews and approves use of the LSNDC agreements.

### 2A-2 Does the governance charter in place between the CoC and the HMIS Lead include the most current HMIS requirements and outline the roles and responsibilities of the CoC and the HMIS Lead? If yes, a copy must be attached.

Yes

### 2A-3 For each of the following plans, describe the extent in which it has been developed by the HMIS Lead and the frequency in which the CoC has reviewed it: Privacy Plan, Security Plan, and Data Quality Plan. (limit 1000 characters)

The Louisiana Services Network Data Consortium (LSNDC) is the governing body for the statewide implementation of HMIS in Louisiana and is comprised of representatives from each CoC and regional HMIS lead organizations. The Policy and Data Quality Committees of the LSNDC have developed a stand-alone Data Quality Plan that specifies the measures for data accuracy, timeliness, and completeness, and is reflective of the compliance requirements set by the 2010 HMIS Data Standards. The Data Quality Plan also identifies the responsible parties for monitoring these measures. The Plan was adopted by the CoC and enacted by the Northlake HMIS participants in 2012; it is reviewed as needed, with a formal annual review, or when HUD releases new guidance. Additionally, the LSNDC has developed Standard Operating Policies and Procedures (SOPPs) that incorporate 14 policies that address security and privacy protocols for all parties involved in the HMIS. The SOPPs were initially adopted by the CoC in 2008, as have the periodic revisions that have been made by the LSNDC. It is the intent of the LSNDC to create stand-alone documents for Privacy and Security Plans in the upcoming year.

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

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

**2A-6 Does the CoC plan to change the HMIS software within the next 18 months?** No

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

**2B-1 Select the HMIS implementation coverage area:** Statewide

**2B-2 Select the CoC(s) covered by the HMIS: (select all that apply)** LA-508 - Houma-Terrebonne/Thibodaux CoC, LA-507 - Alexandria/Central Louisiana CoC, LA-506 - Slidell/Southeast Louisiana CoC, LA-505 - Monroe/Northeast Louisiana CoC, LA-503 - New Orleans/Jefferson Parish CoC, LA-504 - Baton Rouge CoC, LA-502 - Shreveport/Bossier/Northwest CoC, LA-501 - Lake Charles/Southwestern Louisiana CoC

**2B-3 In the chart below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.**

### 2B-3.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$149,877
ESG	\$9,100
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$158,977

### 2B-3.2 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
Other Federal - Total Amount	\$0

**2B-3.3 Funding Type: State and Local**

Funding Source	Funding
City	\$0
County	\$2,020
State	\$45,010
State and Local - Total Amount	\$47,030

**2B-3.4 Funding Type: Private**

Funding Source	Funding
Individual	\$0
Organization	\$18,703
Private - Total Amount	\$18,703

**2B-3.5 Funding Type: Other**

Funding Source	Funding
Participation Fees	\$0
Other - Total Amount	\$0

2B-3.6 Total Budget for Operating Year	\$224,710
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**2B-4 How was the HMIS Lead selected by the CoC?** Agency Volunteered

**2B-4.1 If other, provide a description as to how the CoC selected the HMIS Lead.  
(limit 750 characters)**

## 2C. Homeless Management Information System (HMIS) Bed Coverage

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2C-1 Indicate the HMIS bed coverage rate (%) for each housing type within the CoC. If a particular housing type does not exist anywhere within the CoC, select "Housing type does not exist in CoC" from the drop-down menu:**

* Emergency shelter	0-50%
* Safe Haven (SH) beds	Housing type does not exist in CoC
* Transitional Housing (TH) beds	76-85%
* Rapid Re-Housing (RRH) beds	Housing type does not exist in CoC
* Permanent Supportive Housing (PSH) beds	86%+

**2C-2 How often does the CoC review or assess its HMIS bed coverage?** Semi-Annually

**2C-3 If the bed coverage rate for any housing type is 64% or below, describe how the CoC plans to increase this percentage over the next 12 months.  
(limit 1000 characters)**

The Northlake HMIS Data Project has strong coverage and data quality amongst the providers who are active participants in the CoC, or who are mandated to be CHOs. Like the CoC, they struggle with involving those organizations that are not well- integrated into the network of service providers, but that do provide housing through their ministry programs. These include two project-based emergency shelters and motel voucher distributions. These organizations participate in the PIT count, wherein the sheltered residents who are interviewed are entered into the HMIS, but the organizations have not been receptive to capturing data in the HMIS year-round. The HMIS project has been refocusing efforts to change this by offering ongoing assistance with data entry, and trying to identify other feasible incentives for participation, such as report generation. These methods have been effective with another similarly structured provider. Over the course of the next 12 months, the CoC, with the aid of comparable CHOs, will meet with these providers to reassess the feasibility of HMIS participation, and initiate participation, where possible. It is anticipated that, at least, two more providers that issue motel vouchers will join the HMIS.

**2C-4 If the Collaborative Applicant indicated that the bed coverage rate for any housing type was 64% or below in the FY2012 CoC Application, describe the specific steps the CoC has taken to increase this percentage. (limit 750 characters)**

The CoC identified an HMIS coverage rate below 64% for emergency shelters in 2012. Almost 80% of the ES beds within the region are located at privately-owned ministries that do not have strong systems of programmatic or fiscal accountability. For these organizations, HMIS participation is not a priority and efforts to incentivize becoming CHOs have been unsuccessful. There has been some growth with incorporating them into the CoC through increased meeting attendance. Approximately 5% of ES beds are provided through motel vouchers provided through other faith-based organizations. There is a greater concern for accountability with these organizations, and the CoC has been able to increase interest for participation over the last 12 months and anticipates the incorporation of two more providers in the next year.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2D-1 For each housing type, indicate the average length of time project participants remain in housing. If a housing type does not exist in the CoC, enter "0".**

Type of Housing	Average Length of Time in Housing
Emergency Shelter	26
Transitional Housing	6
Safe Haven	0
Permanent Supportive Housing	15
Rapid Re-housing	0

**2D-2 Indicate the percentage of unduplicated client records with null or missing values on a day during the last 10 days of January 2013 for each Universal Data Element listed below.**

Universal Data Element	Percentage
Name	0%
Social security number	3%
Date of birth	1%
Ethnicity	1%
Race	2%
Gender	1%
Veteran status	1%
Disabling condition	1%
Residence prior to program entry	1%
Zip Code of last permanent address	2%
Housing status	2%
Head of household	0%

**2D-3 Describe the extent in which HMIS generated data is used to generate HUD required reports (e.g., APR, CAPER, etc.). (limit 1000 characters)**



All service providers within the CoC who are not primarily serving persons fleeing from domestic violence are required to generate the client data portions of their respective Annual Performance Reports (APRs). The Regional HMIS Lead provides them with monthly reports of APR client data to ensure ongoing accurate data entry. Additionally, the HMIS is used to generate quarterly and annual APR client data reports for the State-run Shelter + Care Program, of which the CoC is a service provider. There are no direct ESG awardees within the CoC, only sub-grantees with the State program. The sub-grantee contractors generate HMIS client data for the subgrantee and the State. Over the course of the upcoming year, the statewide HMIS will be generating client data necessary for the CAPER for the State directly. In addition, the CoC has provided a local CDBG awardee with homeless data from HMIS for the Consolidated Plan.

**2D-4 How frequently does the CoC review the data quality in the HMIS of program level data?** Monthly

**2D-5 Describe the process through which the CoC works with the HMIS Lead to assess data quality. Include how the CoC and HMIS Lead collaborate, and how the CoC works with organizations that have data quality challenges.  
(Limit 1000 characters)**

The CoC is provided with monthly data quality reports by the Regional HMIS Lead, as part of the data monitoring plan that consists of a monthly data quality report that assesses missing minimum data captures for active client records from the previous month. Users are expected to clean any inaccuracies or null responses within two weeks, with an allowance of no more than 3% null data. These percentages are compared to completeness rates from the previous month's report, as well as the number of active client records in comparison to their bed capacity and the previous month's client count. If there are discrepancies that remain unaddressed, the users are provided with assistance for reconciling the issues by the HMIS Lead. The CoC has actively encouraged consistent, timely, and accurate data maintenance from all CHOs, but has not policed activity by the CHOs. As the Regional HMIS Lead and CoC become a more integrated governance structure, the CoC will further enforce set HMIS standards as part of their overall purview. This will include monitoring of HMIS accuracy and allocating more technical resources for those CHOs that are unable to meet the data monitoring plan requirements.

**2D-6 How frequently does the CoC review the data quality in the HMIS of client-level data?** Monthly

## 2E. Homeless Management Information System (HMIS) Data Usage and Coordination

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

### 2E-1 Indicate the frequency in which the CoC uses HMIS data for each of the following activities:

* Measuring the performance of participating housing and service providers	Annually
* Using data for program management	Annually
* Integration of HMIS data with data from mainstream resources	Never
* Integration of HMIS data with other Federal programs (e.g., HHS, VA, etc.)	Never

## 2F. Homeless Management Information System (HMIS) Policies and Procedures

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2F-1 Does the CoC have a HMIS Policy and Procedures Manual? If yes, the HMIS Policy and Procedures Manual must be attached.** Yes

**2F-1.1 What page(s) of the HMIS Policy and Procedures Manual or governance charter includes the information regarding accuracy of capturing participant entry and exit dates in HMIS? (limit 250 characters)**

Policy 4.3 of the LSND C Policies and Standard Operating Procedures, pgs 18-19, and Policy 1.3 of the LSND C Data Quality Plan (App B), pg 36, states the required timeliness and accuracy of recording entry/ exit dates of either activity.

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

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2G-1** Indicate the date of the most recent sheltered point-in-time count (mm/dd/yyyy): 02/25/2013

**2G-2** If the CoC conducted the sheltered point-in-time count outside of the last 10 days of January 2013, was an exception granted by HUD? Yes

**2G-3** Enter the date the CoC submitted the sheltered point-in-time count data in HDX: 04/30/2013

**2G-4** Indicate the percentage of homeless service providers supplying sheltered point-in-time data:

Housing Type	Observation	Provider Shelter	Client Interview	HMIS
Emergency Shelters	0%	0%	90%	10%
Transitional Housing	0%	0%	60%	40%
Safe Havens	0%	0%	0%	0%

**2G-5** Comparing the 2012 and 2013 sheltered point-in-time counts, indicate if there was an increase, decrease, or no change and then describe the reason(s) for the increase, decrease, or no change. (Limit 750 characters)

The 2013 PIT count of sheltered persons identified 241 persons experiencing homelessness. This is a 1.6% increase from the 2012, when 237 persons were counted. When comparing the two program types that comprise our shelter services, 86 persons slept in ES beds or used motel vouchers, and 155 persons were residing in TH. A greater number of available ES beds were utilized in 2013 than in 2012 (+5), while there were 4 fewer persons in motels. Overall, there was 1 more person in ES on the night of the PIT Count. There was an increase of 11 beds from the HIC of 2012, primarily in the form of overflow beds and motel vouchers. Approximately, 76% of the beds were occupied. Additionally, there is an increase of 3 persons in TH beds and an increase of 7 beds in 2013, primarily through a TH program for persons with HIV/AIDS that was new inventory.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**\* 2H-1 Indicate the method(s) used to count sheltered homeless persons during the 2013 point-in-time count:**

Survey providers:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Extrapolation:	<input type="checkbox"/>
Other:	<input type="checkbox"/>

**2H-2 If other, provide a detailed description.  
(limit 750 characters)**

Not Applicable.

**2H-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population during the 2013 point-in-time count was accurate.  
(limit 750 characters)**

1. Survey Providers: Comprehensive PIT survey instruments and instructions were developed and utilized by the staff of non-HMIS participating or volunteers trained to administer at some emergency shelters. Findings from the surveys were vetted through the organizations for validation and accuracy. The surveys administered to the shelters included data necessary for the PIT Count, as well as assessing a Vulnerability Index score.
2. HMIS: An assessment specifically developed for the PIT were created for ES and TH CHOs as an addendum to standard data collection; the assessment captured most comparable data to that collected in the administered surveys. Findings from the HMIS were vetted through the organizations for validation and accuracy.

## 2I. Continuum of Care (CoC) Sheltered Homeless Point-in-Time (PIT) Count: Data Collection

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**\* 2I-1 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"/>
Sample of PIT interviews plus extrapolation:		<input type="checkbox"/>
Sample strategy: (if Sample of PIT interviews plus extrapolation is selected)		
	Provider expertise:	<input type="checkbox"/>
	Interviews:	<input checked="" type="checkbox"/>
	Non-HMIS client level information:	<input type="checkbox"/>
	Other:	<input type="checkbox"/>

**2I-2 If other, provide a detailed description.  
(limit 750 characters)**

Not Applicable.

**2I-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population count during the 2013 point-in-time count was accurate.  
(limit 750 characters)**

1. HMIS: Subpopulation data on sheltered homeless persons was recorded in the HMIS by ES and TH CHOs as part of their initial program intake records. In accordance with data standards, HMIS participating providers are required to capture long-term disabling conditions, veteran status, and history of domestic violence. For the purposes of the PIT, this data was already recorded or was recorded as part of the services provided on the night of the count. These questions were present in the PIT HMIS assessment and were pre-populated by the system, where applicable.

2. Interviews: Non-CHO ES and TH providers conducted interviews with each consumer who was served on the night of the PIT count. Questions regarding subpopulation identifiers were components of the survey instruments used by all organizations, assuring comprehensive data.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**\* 2J-1 Indicate the methods used to ensure the quality of the data collected during the sheltered point-in-time count:**

Training:	<input checked="" type="checkbox"/>
Follow-up	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication :	<input type="checkbox"/>
Other:	<input type="checkbox"/>

**2J-2 If other, provide a detailed description.  
(limit 750 characters)**

**2J-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the sheltered homeless population count during the 2013 point-in-time count was accurate.  
(limit 750 characters)**

1. Training: Training sessions were held on the administration of the survey instruments used for counting persons in the non-CHO ES and TH facilities in the week prior to the count. Instructional guides were also provided. Training was also provided for those updating HMIS records for the purposes of the PIT.
2. Follow-up: Following the count, the CoC emailed reminders to participating organizations to submit completed surveys or finalize updating HMIS data by the stated deadline. Counts were also vetted through organizations to ensure maximum response rates.
3. HMIS: All data collected was entered into the HMIS, by both CHOS and non-CHOs. Reports of population and subpopulation data for each provider were generated and sent to the organizations for review and verification as part of the vetting process.



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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2K-1 Indicate the date of the most recent unsheltered point-in-time count:** 02/25/2013

**2K-2 If the CoC conducted the unsheltered point-in-time count outside of the last 10 days of January 2013, was an exception granted by HUD?** Yes

**2K-3 Enter the date the CoC submitted the unsheltered point-in-time count data in HDX:** 04/30/2013

**2K-4 Comparing the 2013 unsheltered point-in-time count to the last unsheltered point-in-time count, indicate if there was an increase, decrease, or no change and describe the specific reason(s) for the increase, decrease, or no change. (limit 750 characters)**

The 2013 PIT count of unsheltered persons identified 30 persons experiencing homelessness during the specified night. This is a 23% decrease from the 2012 census, when 39 persons were counted. It is suspected that a greater number of persons utilizing PSH beds, with an increase of 44 beds since the previous assessment, is consistent with an decrease of unsheltered persons. With that said, the relationship between the rise in PSH beds and decrease in unsheltered persons has not been determined as correlative. As a largely, rural and exurban CoC, the number of persons without shelter is more difficult to locate, and the majority of unsheltered persons are identified while presenting for services.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**\* 2L-1 Indicate the methods used to count unsheltered homeless persons during the 2013 point-in-time count:**

Public places count:	<input type="checkbox"/>
Public places count with interviews on the night of the count:	<input checked="" type="checkbox"/>
Public places count with interviews at a later date:	<input type="checkbox"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Other:	<input type="checkbox"/>

**2L-2 If other, provide a detailed description. (limit 750 characters)**

Not applicable.

**2L-3 For each method selected, including other, describe how the method was used to ensure that the data collected on the unsheltered homeless population during the 2013 point-in-time count was accurate. (limit 750 characters)**

Public places count with interviews on the night of the count: The unsheltered count was conducted through interviews with persons residing in places not meant for human habitation, during the 4 days following the selected PIT date. Volunteers canvassed public spaces that are known locations including truck stops, bridges, parks, and nature trails. All respondents were asked where they slept on the night of the count. Surveyors returned to locations that showed evidence of habitation. Service-based count: Interviews were also conducted at soup kitchens and a food pantry, during the same period. The survey was included in the intake process of several service providers in instances where persons sought assistance and self-identified as being unsheltered on the night of the count.

HMIS: HMIS was used for deduplication purposes.

## **2M. Continuum of Care (CoC) Unsheltered Homeless Point-in-Time Count: Level of Coverage**

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**2M-1 Indicate where the CoC located unsheltered homeless persons during the 2013 point-in-time count:** A Combination of Locations

**2M-2 If other, provide a detailed description.  
(limit 750 characters)**

Not applicable.

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

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**\* 2N-1 Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2013 unsheltered population count:**

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input checked="" type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey question:	<input checked="" type="checkbox"/>
Enumerator observation:	<input type="checkbox"/>
Other:	<input type="checkbox"/>

**2N-2 If other, provide a detailed description.  
(limit 750 characters)**

Not applicable.

**2N-3 For each method selected, including other, describe how the method was used to reduce the occurrence of counting unsheltered homeless persons more than once during the 2013 point-in-time count. In order to receive credit for any selection, it must be described here.  
(limit 750 characters)**

Training: Surveyors were trained and assigned to pre-identified locations to canvass over the course of 4 days following the PIT date. This minimized the occurrence of duplication of sites and interviews.

Unique identifier: The survey instruments captured personally identifying information (PII). As all survey responses were keyed into HMIS, unique identifiers were systematically created for each respondent, based upon an algorithm that uses name, date of birth, and gender. Any cases of matching respondents from the count were omitted, as were any cases where pre-existing records suggested that a person was currently sheltered, after verifying with the CHO.

Survey question: Surveyors received training from the CoC prior to the count period and were instructed to ask respondents if they had been previously interviewed.

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

### Objective 1: Increase Progress Towards Ending Chronic Homelessness

#### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

In FY 2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). The first goal in Opening Doors is to end chronic homelessness by 2015. Creating new dedicated permanent supportive housing beds is one way to increase progress towards ending homelessness for chronically homeless persons. Using data from Annual Performance Reports (APR), HMIS, and the 2013 housing inventory count, complete the table below.

#### 3A-1.1 Objective 1: Increase Progress Towards Ending Chronic Homelessness

	Proposed in 2012 CoC Application	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-1.1a For each year, provide the total number of CoC-funded PSH beds not dedicated for use by the chronically homeless that are available for occupancy.		231	221	214
3A-1.1b For each year, provide the total number of PSH beds dedicated for use by the chronically homeless.	78	89	99	106
3A-1.1c Total number of PSH beds not dedicated to the chronically homeless that are made available through annual turnover.		10	7	5
3A-1d Indicate the percentage of the CoC-funded PSH beds not dedicated to the chronically homeless made available through annual turnover that will be prioritized for use by the chronically homeless over the course of the year.		4%	3%	2%
3A-1.1e How many new PSH beds dedicated to the chronically homeless will be created through reallocation?		0	0	10

**3A-1.2 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.**

**(limit 1000 characters)**

With the implementation of the Coordinated Access and Assessment System in 2014, permanent supportive housing beds will be increased through 1) prioritization of chronically homeless individuals and families as beds become available; 2) implementation of the VI-SPDAT to determine the level of need to ensure those with the highest need is placed into housing; and 3) the region's HMIS system will be utilized to track real-time availability of permanent supportive housing beds to ensure quality referrals.

Additionally, the Northlake Homeless Coalition will address shifting transitional housing programs to either rapid re-housing or permanent supportive housing models. This will also increase the number of available permanent supportive housing beds for chronically homeless individuals and families.

As a result of these steps, the region anticipates increasing the number of chronically homeless beds as we move toward ending chronic homelessness.

**3A-1.3 Identify by name the individual, organization, or committee that will be responsible for implementing the goals of increasing the number of permanent supportive housing beds for persons experiencing chronic homelessness.**

**(limit 1000 characters)**

The Northlake Homeless Coalition Executive Director will work with Hammond Housing Authority, Southeast Advocates for Family Empowerment, NAMI St. Tammany, and St. Tammany Parish Community Action Agency to address shifting transitional housing to either rapid re-housing or permanent supportive housing models.

The Northlake Homeless Coalition Executive Director will work with the Northlake Homeless Coalition Coordinated Access and Assessment Taskforce to develop and coordinate the system that will be the guiding force toward prioritizing chronically homeless individuals and families for permanent supportive housing beds as they become available.

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

### Objective 2: Increase Housing Stability

#### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Achieving housing stability is critical for persons experiencing homelessness. Using data from Annual Performance Reports (APR), complete the table below.

**3A-2.1 Does the CoC have any non-HMIS projects for which an APR should have been submitted between October 1, 2012 and September 30, 2013?** Yes

#### 3A-2.2 Objective 2: Increase Housing Stability

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-2.2a Enter the total number of participants served by all CoC-funded permanent supportive housing projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013:	182	200	231
3A-2.2b Enter the total number of participants that remain in CoC-funded funded PSH projects at the end of the operating year PLUS the number of participants that exited from all CoC-funded permanent supportive housing projects to a different permanent housing destination.	176	194	224
3A-2.2c Enter the percentage of participants in all CoC-funded projects that will achieve housing stability in an operating year.	97%	97%	97%

**3A-2.3 Describe the CoC's two year plan (2014-2015) to improve the housing stability of project participants in CoC Program-funded permanent supportive housing projects, as measured by the number of participants remaining at the end of an operating year as well as the number of participants that exited from all CoC-funded permanent supportive housing projects to a different permanent housing destination. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above. (limit to 1000 characters)**

The CoC is committed to maintaining housing stability for households in permanent supportive housing. The CoC has surpassed the national average with an actual achievement in 2013 of 97%. Over the next two years CoC projects will: 1) Assist program participants to apply for and obtain mainstream benefits and make income gains. 2) Prioritize vacancies with chronically homeless to fill beds vacated through natural turn over, which will require more intensive supportive services. 3) Providers with higher outcomes will mentor lower performing projects, providing assistance to identify barriers to success. 4) Will identify those tenants, who no longer need intensive support and making plans to move into non-supportive housing, thereby opening units for those in greater need.

**3A-2.4 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of housing stability in CoC-funded projects. (limit 1000 characters)**

Case Managers with the following agencies/organizations will be responsible for maintaining our CoC's high level of housing stability: Hammond Housing Authority, Southeast Advocates for Family Empowerment, NAMI St. Tammany, Volunteers of America Greater New Orleans, Southeastern Louisiana University- HMIS and St. Tammany Parish Community Action.



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

### Objective 3: Increase project participants income

#### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Assisting project participants to increase income is one way to ensure housing stability and decrease the possibility of returning to homelessness. Using data from Annual Performance Reports (APR), complete the table below.

**3A-3.1 Number of adults who were in CoC-funded projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013:** 253

#### 3A-3.2 Objective 3: Increase project participants income

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-3.2a Enter the percentage of participants in all CoC-funded projects that increased their income from employment from entry date to program exit?	40%	44%	47%
3A-3.2b Enter the percentage of participants in all CoC-funded projects that increased their income from sources other than employment from entry date to program exit?	47%	50%	55%

**3A-3.3 In the table below, provide the total number of adults that were in CoC-funded projects with each of the cash income sources identified below, as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013.**

Cash Income Sources	Number of Participating Adults	Percentage of Total in 3A-3.1	
Earned Income	75	29.64	%
Unemployment Insurance	2	0.79	%
SSI	76	30.04	%

SSDI	70	27.67	%
Veteran's disability	3	1.19	%
Private disability insurance	0		%
Worker's compensation	0		%
TANF or equivalent	1	0.40	%
General Assistance	0		%
Retirement (Social Security)	3	1.19	%
Veteran's pension	2	0.79	%
Pension from former job	0		%
Child support	4	1.58	%
Alimony (Spousal support)	0		%
Other Source	7	2.77	%
No sources	37	14.62	%

**3A-3.4 Describe the CoC's two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that increase their incomes from non-employment sources from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table (3A-3.2) above.  
(limit 1000 characters)**

Currently we have non-employment income from entry to exit of 47% of our adult participants. Our two-year plan to increase non-employment income involves: 1) Providers will screen all incoming persons for eligibility for TANF, SSI, SSDI, and other resource assistance. 2) Providers will assist participants with trying to obtain child support. 3) Providers will work with veterans to receive the benefits to which they are entitled.

**3A-3.5 Describe the CoC's two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that increase their incomes through employment from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above.  
(limit 1000 characters)**

CoCs 2 yr plan to increase employment income includes, provider case managers (CM) helping persons attain ID, birth certificates, SS card, etc. CMs will use employment specialists to help persons attain & maintain employment; & help with resume writing, interview skills, etc. CMs will link persons to employment programs such as La Rehab Services & Work Pays, a coordinated system of employment supports & services for people with disabilities in La. CMs will also meet with representatives from the regions technical/community colleges, businesses, job services, Work Pays and other employment and education sources to build working relationships that will enhance services for the participants served. This includes working with these existing organizations to hold special job fairs serving homeless individuals with and without disabilities. In addition, CMs will work as a group to standardize criteria for projects intake and assessment to help better identify employment barriers that need to be addressed for making participants more job-ready. The CoC anticipates growth in employment rates amongst all participant populations upon program exit as a result.

**3A-3.6 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of project participants in all CoC-funded projects that increase income from entry date to program exit. (limit 1000 characters)**

Case managers from Volunteers of America GNO, St. Tammany Parish Community Action Agency, Hammond Housing Authority, Southeast Advocates for Family Empowerment, Southeast Louisiana Veterans Health Care System, and NAMI St. Tammany will be responsible for increasing the rate of project participants who increase their income from entry date to program exit.

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

### Objective 4: Increase the number of participants obtaining mainstream benefits

#### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Assisting project participants to obtain mainstream benefits is one way to ensure housing stability and decrease the possibility of returning to homelessness. Using data from Annual Performance Reports (APR), complete the table below.

**3A-4.1 Number of adults who were in CoC-funded projects as reported on APRs submitted during the period between October 1, 2012 and September 30, 2013.** 253

#### 3A-4.2 Objective 4: Increase the number of participants obtaining mainstream benefits

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-4.2a Enter the percentage of participants in ALL CoC-funded projects that obtained non-cash mainstream benefits from entry date to program exit.	78%	80%	82%

**3A-4.3 In the table below, provide the total number of adults that were in CoC-funded projects that obtained the non-cash mainstream benefits from entry date to program exit, as reported on APRs submitted during the period between October 1, 2013 and September 30, 2013.**

Non-Cash Income Sources	Number of Participating Adults	Percentage of Total in 3A-4.1
Supplemental nutritional assistance program	129	50.99 %
MEDICAID health insurance	130	51.38 %
MEDICARE health insurance	61	24.11 %
State children's health insurance	20	7.91 %
WIC	6	2.37 %

VA medical services	2	0.79	%
TANF child care services	1	0.40	%
TANF transportation services	0		%
Other TANF-funded services	0		%
Temporary rental assistance	0		%
Section 8, public housing, rental assistance	0		%
Other Source	0		%
No sources	51	20.16	%

**3A-4.4 Describe the CoC's two year plan (2014-2015) to increase the percentage of project participants in all CoC-funded projects that access mainstream benefits from entry date to program exit. Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above. (limit 1000 characters)**

The CoC-funded projects have a 78% rate for participants who obtain mainstream benefits at program exit. This high level is reflective of the work the CoC-funded projects case managers do to help participants obtain mainstream benefits. Case managers bring services to the participant since the region lacks sufficient public transportation. The case managers have built working relationships with the mainstream benefit agencies, including DCFS, DHH, and SSA, allowing them to better serve their participants. Participants are walked through the various application systems, in an effort to prevent denials or rejections of applications. In cases when a participant is denied a mainstream benefit, case managers quickly step in to help facilitate the appeals process. This hands-on case management approach has allowed our participants to receive needed mainstream benefits at a higher percentage than the national average.

**3A-4.5 Identify by name the individual, organization, or committee that will be responsible for increasing the rate of project participants in all CoC-funded projects that that access non-cash mainstream benefits from entry date to program exit. (limit 1000 characters)**

Case managers from Volunteers of America GNO, St. Tammany Parish Community Action Agency, Hammond Housing Authority, Southeast Advocates for Family Empowerment, Southeast Louisiana Veterans Health Care System, and NAMI St. Tammany will be responsible for increasing the rate of project participants who increase their income from entry date to program exit.

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

#### Objective 5: Using Rapid Re-Housing as a method to reduce family homelessness

##### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

In FY2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP). Rapid re-housing is a proven effective housing model. Based on preliminary evidence, it is particularly effective for households with children. Using HMIS and Housing Inventory Count data, populate the table below.

#### 3A-5.1 Objective 5: Using Rapid Re-housing as a method to reduce family homelessness.

	2013 Actual Numeric Achievement and Baseline	2014 Proposed Numeric Achievement	2015 Proposed Numeric Achievement
3A-5.1a Enter the total number of homeless households with children per year that are assisted through CoC-funded rapid re-housing projects.	0	0	10
3A-5.1b Enter the total number of homeless households with children per year that are assisted through ESG-funded rapid re-housing projects.	0	8	8
3A-5.1c Enter the total number of households with children that are assisted through rapid re-housing projects that do not receive McKinney-Vento funding.	0	2	3

**3A-5.2 Describe the CoC's two year plan (2014-2015) to increase the number homeless households with children assisted through rapid re-housing projects that are funded through either McKinney-Vento funded programs (CoC Program, and Emergency Solutions Grants program) or non-McKinney-Vento funded sources (e.g., TANF). Response should address the specific strategies and actions the CoC will take to meet the numeric achievements proposed in the table above. (limit 1000 characters)**

Over the next two HUD NOFAs, several of the transitional housing programs will be reallocated to rapid re-housing programs that serve homeless households with children. The CoC will work with local governments and non-profits to fund rapid re-housing programs with ESG state funds. The CoC will take the role of educating local government and non-profits regarding the operation and benefits of rapid re-housing programs in ending homelessness in our region. In addition, the CoC will increase the usage of SSVF by strengthening the referrals to the program contractor serving the region.

**3A-5.3 Identify by name the individual, organization, or committee that will be responsible for increasing the number of households with children that are assisted through rapid re-housing in the CoC geographic area. (limit 1000 characters)**

CoC Executive Director, St. Tammany Parish Human Services Director, Tangipahoa Parish Grants Director, Livingston Parish OEP Director, and State of Louisiana ESG Director will work together with area non-profit organizations that apply for ESG funding to operate rapid re-housing programs that increase the number of homeless households with children.

**3A-5.4 Describe the CoC's written policies and procedures for determining and prioritizing which eligible households will receive rapid re-housing assistance as well as the amount or percentage of rent that each program participant must pay, if applicable. (limit 1000 characters)**

In 2014, as the CoC develops and implements the Coordinated Access and Assessment System, it will include written policies and procedures for determining and prioritizing which eligible households will receive rapid re-housing assistance and the percentage of rent each program participant must pay.

**3A-5.5 How often do RRH providers provide case management to households residing in projects funded under the CoC and ESG Programs? (limit 1000 characters)**

Case managers for the ESG-funded RRH programs work with service recipients on a monthly basis. Once the CoC reallocates to create RRH projects, case management will be provided no less than once a month.

**3A-5.6 Do the RRH providers routinely follow up with previously assisted households to ensure that they do not experience additional returns to homelessness within the first 12 months after assistance ends? (limit 1000 characters)**

The ESG-funded RRH providers typically follow up with service recipients for three months after assistance ends. As part of the plan to track and reduce re-occurrence of homelessness, the CoC will encourage the ESG providers to increase this to twelve months.

## **3B. Continuum of Care (CoC) Discharge Planning: Foster Care**

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3B-1.1 Is the discharge policy in place State Mandated Policy mandated by the State, the CoC, or other?**

**3B-1.1a If other, please explain.  
(limit 750 characters)**

**3B-1.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.  
(limit 1000 characters)**

The Department of Children and Family Services (DCFS) Discharge Plan requires an in-depth Youth Transition Plan incorporating housing arrangements. Transition planning efforts are made to provide mentor opportunities, education, trainings, identify supports and promote teamwork in order to aid in a smooth transition from Foster Care to other living arrangements. This provides or assists the youth with safe and stable housing so that he/she is unlikely to become homeless. Youth may transition into private housing, scattered-site housing programs and on-campus housing. Also, if appropriate, OCS will work with families and youth on family re-unification. Representatives from all publicly funded foster care providers in the region are able to network with the homeless provider agency to discuss housing placements for individuals aging out of foster care, where they may be best served. Youth aging out of Foster Care routinely go to Covenant House, Lindy's Place, and Miramon Center for Housing needs.

**3B-1.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.  
(limit 1000 characters)**

The comprehensive discharge plan incorporates the youth and their case managers, CASA worker, attorney, Department of Children and Family Services, 21st Judicial Courts, foster care family's, and parents/guardians to work together to ensure the youth is not discharged into homelessness. Youth exiting at age 18 are advised that they have the opportunity to contract with the state for voluntary foster care services to support their educational/vocational plans up to age 21.



## 3B. Continuum of Care (CoC) Discharge Planning: Health Care

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3B-2.1 Is the discharge policy in place** State Mandated Policy  
**mandated by the State, the CoC, or other?**

**3B-2.1a If other, please explain.**  
**(limit 750 characters)**

**3B-2.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.**  
**(limit 1000 characters)**

All CoC-funded agencies work with all publicly-funded hospital social workers to ensure patients are not routinely discharged into homelessness to the maximum extent practicable. Many hospitals require patients to be assessed for needs, capacity to meet needs and access to support resources. Patients are assisted who need skilled care, lack access to basic needs, or unable to care for themselves.

At the Northlake Homeless Coalition (NHC) meetings, all CoC and non-CoC funded housing programs announce their unit/bed availability. Bed availability is also listed on the NHC website for those that are unable to attend the meeting. Representatives from all publicly funded hospitals in the Region are invited to attend the meetings where they can network with the homeless provider agency to discuss referring patients to their programs. Patients routinely go to family homes, Miramon Center, Timothy Trumpet of Truth, House of Serenity and Caring Center for housing needs.

**3B-2.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.**  
**(limit 1000 characters)**

St. Tammany Parish Hospital, Slidell Memorial Hospital, Bogalusa Medical Center, Riverside Medical Center, Lallie Kemp Regional Medical Center, North Oaks Hospital, Hood Memorial Hospital, Our Lady of the Lake and St. Helena Community Health Center social worker staff at each hospital works with families/friends, low income apartments and subsidized apartment landlords to ensure persons are not discharged to the street or place not meant for human habitation.

## **3B. Continuum of Care (CoC) Discharge Planning: Mental Health**

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3B-3.1 Is the discharge policy in place State Mandated Policy mandated by the State, the CoC, or other?**

**3B-3.1a If other, please explain.  
(limit 750 characters)**

**3B-3.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.  
(limit 1000 characters)**

Hospital staff prepares a discharge plan for the homeless person with psychiatric and/or co-occurring substance abuse disorders to return to the community, as appropriate. The goal of the process is to provide individuals with full access to available mainstream resources, supportive services and appropriate housing.

Representatives from all publicly funded mental health facilities are invited to attend Northlake Homeless Coalition meetings where they can network with the homeless provider agency to discuss referring patients to the CoC funded programs. Patients are routinely discharged to licensed facilities including partial hospitalization programs, rehab facilities, or to family members.

**3B-3.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.  
(limit 1000 characters)**

Mental health facilities work with the patient, family members, mental health clinics, partial hospitalization programs, rehab option programs, 21st Judicial Behavioral Health Court and private psychiatrists to ensure patients being discharged from publicly funded mental health facilities are not discharged into homelessness.

## **3B. Continuum of Care (CoC) Discharge Planning: Corrections**

### **Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3B-4.1 Is the discharge policy in place State Mandated Policy mandated by the State, the CoC, or other?**

**3B-4.1a If other, please explain.  
(limit 750 characters)**

**3B-4.2 Describe the efforts that the CoC has taken to ensure persons are not routinely discharged into homeless and specifically state where persons routinely go upon discharge.  
(limit 1000 characters)**

The Louisiana Sentencing Commission Reentry and Evidence Based Committee have representatives serving on the Louisiana Policy Academy to determine better solutions for offenders released into homelessness. As a result of these meetings, discussions have taken place with the Louisiana Housing Corporation regarding a possible rental assistance program for those to be released without a residence, including those who are sex offenders. The NHC CoC has a representative on the Louisiana Policy Academy and the Louisiana Sentencing Commission Reentry and Evidence Based Committee in order to stay abreast of the issues facing offenders being released.

Currently, offenders being released from their facilities are discharged to family homes, former residence, half-way houses, and shelter services if nothing else is available.

**3B-4.3 Identify the stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.  
(limit 1000 characters)**

Probation and Parole Community Resource Coordinator, Reception and Diagnostic Center personnel, Transition Specialist, offenders, family members, and 21st Judicial Court system all work together as stakeholders and collaborating agencies to ensure the offender being released is not discharged into homelessness.

## 3C. Continuum of Care (CoC) Coordination

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3C-1 Does the Consolidated Plan for the jurisdiction(s) within the CoC's geography include the CoC's strategic plan goals for addressing and ending homelessness?** Yes

**3C-1.1 If yes, list the goals in the CoC strategic plan. (limit 1000 characters)**

1. Increase access to stable and affordable housing by creating new permanent supportive housing beds for chronically homeless & increase percentage of participants in CoC funded TH that move into PH; 2. Increase economic security by increasing the percentage of participants in CoC funded projects that are employed at program exit; 3. Improve health and stability by increasing the percentage of participants remaining in CoC funded permanent housing projects for at least 6 mos.; 4. Retool the Homeless Crisis Response System by developing and implementing the Coordinated Access and Assessment System region wide, and move toward transitioning Transitional Housing programs into Rapid Re-housing programs.

**3C-2 Describe the extent in which the CoC consults with State and local government Emergency Solutions Grants (ESG) program recipients within the CoC's geographic area on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and subrecipients. (limit 1000 characters)**

The CoC has 2 reps on the La Advocacy Coalition for the Homeless (LACH) the body in the state advocating for allocations & usage of ESG funds. Based on a collaborative approach, LACH submits comments & concerns to the state to guide how ESG funds should be used in our region. At the La Homeless Conference, attendees discuss the needs in communities across the state where ESG funds can have the most impact. Many of these requests & recommendations are taken into account by the state when designing criteria.

In addition, regular conversations are held between the Co-Chair of the NHC, the State ESG Representative, the various agencies receiving ESG, and the Parish governments requesting the funds to ensure the funds are being utilized to meet the needs of the community. The NHC will also begin working on developing program evaluations that will assist each agency receiving ESG to improve their program. Through the program evaluations, the NHC will have a better way to determine how allocations should be addressed in the various communities. This information will be shared with the respective Parish government that applies for the ESG funding through the State.

**3C-3 Describe the extent in which ESG funds are used to provide rapid re-housing and homelessness prevention. Description must include the percentage of funds being allocated to both activities. (limit 1000 characters)**

ESG funds within CoC are granted through the State of Louisiana allocation only. The shift from using ESG for sheltering to using it for preventing homelessness and returning persons to permanent housing quickly has been gaining momentum. Over the course of the past two years, there has been a greater push by the State for funds to be used for Rapid Re-Housing and Homeless Prevention, with greater emphasis on Rapid Re-Housing services. In 2012, the subrecipients within our CoC were awarded \$267,050, with 57% of funds dedicated to HP and 12% dedicated to RRH. In 2013, greater emphasis was placed on projects providing more RRH. Of the \$184,200 awarded, 45% of funds were allocated to RRH programs and 45% of the funds were to be used for Prevention. With that said, the funding was delayed and the projects were slow to begin operations; thusly, there were no RRH beds reported in the 2013 HIC.

**3C-4 Describe the CoC's efforts to reduce the number of individuals and families who become homeless within the CoC's entire geographic area. (limit 1000 characters)**

Our CoC is dedicated to reducing the number of individuals and families who become homeless. Our CoC works closely with agencies that serve the homeless and clients at imminent risk of losing their housing. The CoC grant recipients take the following steps to prevent/reduce homelessness; 1) screen for eligibility; 2) refer to emergency shelters, homeless prevention or housing programs; 3) complete assessments; 4) provide housing assistance; 5) provide case management; & 6) refer to mainstream providers.

**3C-5 Describe how the CoC coordinates with other Federal, State, local, private and other entities serving the homeless and those at risk of homelessness in the planning and operation of projects. (limit 1000 characters)**

The CoC regularly evaluates all funding sources providing resources to the homeless service system. Staff from Federal, State, local, private and other entities serving the homeless and those at risk of homelessness attend monthly CoC meetings and provide information about available programs, eligibility requirements and ways to streamline the process for accessing services.

**3C-6 Describe the extent in which the PHA(s) within the CoC's geographic area are engaged in the CoC efforts to prevent and end homelessness. (limit 1000 characters)**

While one PHA works directly with the CoC, efforts will be made to work with the remaining six PHAs across the region to engage in the conversation regarding efforts to prevent and end homelessness. Discussions will center on how our region can best meet the needs of those experiencing homelessness and those at risk of homelessness. By having everyone utilizing the VI-SPDAT and the Coordinated Access and Assessment System, we can all better utilize vouchers and permanent supportive housing beds for persons experiencing homelessness or those at risk of homelessness. This will allow limited funding for housing to be spent in the most productive way possible. These discussions will also be a catalyst for breaking down the barriers currently existing between the CoC and PHAs, which see themselves as independent organizations that make decisions based on limited data. As HUD pushes the PHAs to get involved with their CoC, these barriers will quickly break down.

**3C-7 Describe the CoC's plan to assess the barriers to entry present in projects funded through the CoC Program as well as ESG (e.g. income eligibility requirements, lengthy period of clean time, background checks, credit checks, etc.), and how the CoC plans to remove those barriers. (limit 1000 characters)**

Through the Coordinated Access and Assessment System, the CoC will be able to address barriers to entry. Each denial to services will be reviewed by a committee to determine if program changes should be suggested. Should program changes be necessary, the committee will work with the agency to incorporate any necessary changes to prevent unnecessary denials.

In addition, the System will incorporate an annual assessment to evaluate the system performance and make course corrections accordingly. This will help ensure barriers to service, accessibility of services and other issues are address and corrected as they are identified.

**3C-8 Describe the extent in which the CoC and its permanent supportive housing recipients have adopted a housing first approach. (limit 1000 characters)**

As the Northlake Homeless Coalition Coordinated Access and Assessment Taskforce are developing the region's system, discussion is underway in shifting the existing permanent supportive housing programs to a housing first model. Agency's providing permanent supportive housing will meet with the Taskforce members to discuss the benefits of the housing first model and how this model will impact the current way the programs are operating. These discussions are vital in order to have buy-in by the permanent supportive housing programs and the community in general. It is anticipated that the permanent supportive housing programs will embrace the housing first model.

**3C-9 Describe how the CoC's centralized or coordinated assessment system is used to ensure the homeless are placed in the appropriate housing and provided appropriate services based on their level of need. (limit 1000 characters)**

The Northlake Homeless Coalition Coordinated Access and Assessment Taskforce has adopted the use of the VI-SPDAT to ensure homeless individuals and families are placed in appropriate housing and provided necessary support services to meet their needs. Through the VI-SPDAT, intake specialist will be able to quickly evaluate the level of housing and supportive services needed for the individual or family. For those homeless individuals and families that have the highest level of needs, they will be provided with a quality referral to one of the permanent supportive housing programs. For those individuals and families that have a low level of need, they will be provided with quality referrals to the service(s) that most meet their needs.

**3C-10 Describe the procedures used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or disability who are least likely to request housing or services in the absence of special outreach. (limit 1000 characters)**

Homeless service providers use all or a mix of social media, speaking engagements, networking, collaboration, shelter & hospital outreach to market housing & supportive services to eligible persons who are least likely to request housing & services in absence of special outreach. During the point-in-time count, reps from various agencies are prepared with housing applications to obtain information for the individual or family. When a case manager arrives at a shelter or other location where persons experiencing homelessness gather to complete an application on 1 individual or family, others at that location are provided the opportunity to also complete applications.

The CoC requires all funded programs to make services accessible and available to all persons regardless of race, color, religion, gender, age, familial status or disability. The CoC reviews HMIS data as well as PIT data to determine the needs of populations not routinely accessing services. Once populations have been identified; the CoC explores the reasons for their exclusion from services and develops strategies to engage them in the services.

**3C-11 Describe the established policies that are currently in place that require all homeless service providers to ensure all children are enrolled in early childhood education programs or in school, as appropriate, and connected to appropriate services within the community. (limit 1000 characters)**

A written policy governing their specific programs to ensure all children are enrolled in early childhood education programs or are in school. Those agencies that provide homeless services to families has an identified staff person that is responsible for working with the various Homeless Liaisons in the school system to ensure they are in school and have access to the various programs available to homeless youth. No child shall be required to change schools based on the location of their temporary placement. Children may remain in their school of origin should they choose. Staff should assist families with children ages 0 to 5 years in accessing Head Start. Several of the Homeless Liaisons with the various school systems actively participate in the NHC monthly meetings where lines of communication regarding the issues facing homeless youth are discussed in both the meeting setting and during networking opportunities.

**3C-12 Describe the steps the CoC, working with homeless assistance providers, is taking to collaborate with local education authorities to ensure individuals and families who become or remain homeless are informed of their eligibility for McKinney-Vento educational services. (limit 1000 characters)**

Homeless Liaison representatives from the various school systems participate in the CoC by providing presentations on McKinney-Vento services, networking with homeless service providers and building strong working relationships with the various agency case managers that directly work with the homeless families and children. There is a strong referral system between the Homeless Liaisons and the homeless service providers ensuring homeless families are well informed and receive needed McKinney-Vento educational services. All HUD funded providers that serve families have established policies to ensure participants are informed of their rights and assistance opportunities through the school systems.

**3C-13 Describe how the CoC collaborates, or will collaborate, with emergency shelters, transitional housing, and permanent housing providers to ensure families with children under the age of 18 are not denied admission or separated when entering shelter or housing. (limit 1000 characters)**

Since the region has limited emergency shelters, case managers with the various homeless service providers work with families to identify the best resources available including which shelter best meets a family's needs. All of the CoC-funded TH and PSH programs have written policies and procedures to ensure families with children under the age of 18 are not denied admission or separated when entering their housing programs. The case managers with these programs have excellent working relationships with emergency shelters, transitional housing and permanent housing program staff as well as the various homeless liaisons in the school systems. This affords quick resolution for providing assistance to families.



**3C-14 What methods does the CoC utilize to monitor returns to homelessness by persons, including, families who exited rapid re-housing? Include the processes the CoC has in place to ensure minimal returns to homelessness.  
(limit 1000 characters)**

The CoC utilizes HMIS to follow returns to homelessness for people exiting rapid re-housing, transitional housing and permanent housing programs. Case managers will follow- up with persons leaving housing to ensure minimal returns to homelessness.

**3C-15 Does the CoC intend for any of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes?** No

**3C-15.1 If yes, 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 1000 characters)**

**3C-16 Has the project been impacted 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 2013 CoC Program Competition?** No

**3C-16.1 If 'Yes', 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)**

### **3D. Continuum of Care (CoC) Coordination with Strategic Plan Goals**

**Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**In 2013, applications submitted to HUD for the Continuum of Care (CoC) Program will be evaluated in part based on the extent in which they further the achievement of HUD's goals as articulated in HUD's Strategic Plan and the Opening Doors: Federal Strategic Plan to Prevent and End Homelessness (FSP).**

**3D-1 Describe how the CoC is incorporating the goals of Opening Doors in local plans established to prevent and end homelessness and the extent in which the CoC is on target to meet these goals.  
(limit 1000 characters)**

Throughout 2013, the Northlake Homeless Coalition's (NHC) Strategic Plan to End and Prevent Homelessness was developed using the Federal Strategic Plan, "Opening Doors" as the template. The plan followed the guidelines for community strategic plan development published by USICH. The plan aims to connect Federal goals to local actions to prevent, reduce, and eventually end homelessness in Southeast Louisiana. The goals and objectives outlined in the plan are intended to guide the activities of homeless providers, including the NHC, toward meeting the goals outlined in the Opening Doors plan and the HEARTH Act. During the development of the plan, input from USICH was incorporated to ensure proper alignment as well as achieving becoming a USICH Opening Doors Community.

**3D-2 Describe the CoC's current efforts, including the outreach plan, to end homelessness among households with dependent children.  
(limit 750 characters)**

Representatives from the CoC and non-CoC funded agencies will provide monthly updates regarding availability of TH and PSH homeless family units, as they become available through turnover or development. This information will be announced at the Northlake Homeless Coalition general meetings and posted on the Coalition's website. By representatives making this information available, agencies working with homeless families will have the ability to move their families off the street and into transitional or permanent housing. Additionally, this information will help shelters better serve their participants by linking them to known available units.

**3D-3 Describe the CoC's current efforts to address the needs of victims of domestic violence, including their families. Response should include a description of services and safe housing from all funding sources that are available within the CoC to serve this population. (limit 1000 characters)**

The CoC has partnered with Southeast Advocate for Family Empowerment (SAFE) a domestic violence program to assure that all survivors' needs are met within the CoC geographical region. Southeast Advocate provides housing assistance to all victims of domestic violence both male and female. There is a housing case manager available to assure that victims and their children are safe and out of danger. Southeast Advocate for Family Empowerment have scattered sites throughout Tangipahoa, Livingston, Washington, and St. Helena parish. SAFE provides not only housing but employment, and a long term housing plan with the victims of domestic violence.

Safe Harbor provides services to victims of domestic violence in St. Tammany Parish. Available services include the domestic violence hotline, emergency shelter, counseling services, advocacy, outreach and education.

These programs do not report client information in HMIS, but rather provide aggregate information for reporting purposes.

**3D-4 Describe the CoC's current efforts to address homelessness for unaccompanied youth. Response should include a description of services and housing from all funding sources that are available within the CoC to address homelessness for this subpopulation. Indicate whether or not the resources are available for all youth or are specific to youth between the ages of 16-17 or 18-24. (limit 1000 characters)**

There are currently no homeless services specifically for unaccompanied youth in our region. There are small start-up non-profits that are trying to come up with resources to provide housing services. However, as of the writing of this document, nothing has been formalized. Unaccompanied youth from our region can receive housing and supportive services at Covenant House located in New Orleans. Covenant House serves ages 22 and younger.

**3D-5 Describe the efforts, including the outreach plan, to identify and engage persons who routinely sleep on the streets or in other places not meant for human habitation. (limit 750 characters)**

Our region is mostly comprised of non-urban communities, homeless individuals are rarely found sleeping on the streets but rather in remote wooded living environments. Our region does not have a funded outreach program that provides trained staff to locate & enter remote living environments. We rely on homeless individuals seeking services at non-profits & churches to help identify & engage persons regarding their situation & needs. During the Homeless Census each year, the NHC tries to identify areas where homeless individuals might access services during that specific week. Efforts are placed in identifying possible locations where homeless individuals & families are living in places not meant for human habitation. Efforts have been made to walk wooded areas to locate the homeless.

**3D-6 Describe the CoC's current efforts to combat homelessness among veterans, particularly those are ineligible for homeless assistance and housing through the Department of Veterans Affairs programs (i.e., HUD-VASH, SSVF and Grant Per Diem). Response should include a description of services and housing from all funding sources that exist to address homelessness among veterans. (limit 1000 characters)**

The Department of Veterans Affairs has a seat on the governing body of the CoC. This affords the region the ability to stay abreast of funding opportunities and important issues facing homeless Veterans. Within the region, the Department of Veterans Affairs has two outpatient clinics, one transitional living facility operated by Quad Vets, one permanent supportive housing program operated by Volunteers of America Greater New Orleans which prioritizes homeless Veterans, and a Supportive Services to Veteran Families (SSVF) program operated by Volunteers of America Greater New Orleans. The CoC's Strategic Plan to End and Prevent Homelessness is aligned with the Federal Plan and calls for an end to homeless Veterans by 2015. Goals and objectives used in order to achieve the end to homelessness will incorporate strengthening the CoC, improving access to services, and developing a stronger homeless crisis response system.

### 3E. Reallocation

**Instructions:**

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**3E-1 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new permanent supportive housing projects dedicated to chronically homeless persons?**

No

**3E-2 Is the CoC reallocating funds from one or more eligible expiring grant(s) into one or more new rapid re-housing project for families?**

No

**3E-2.1 If the CoC is planning to reallocate funds to create one or more new rapid re-housing project for families, describe how the CoC is already addressing chronic homelessness through other means and why the need to create new rapid re-housing for families is of greater need than creating new permanent supportive housing for chronically homeless persons.  
(limit 1000 characters)**

**3E-3 If the CoC responded 'Yes' to either of the questions above, has the recipient of the eligible renewing project being reallocated been notified?**

Not Applicable

## 4A. Continuum of Care (CoC) Project Performance

### Instructions

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

#### **4A-1 How does the CoC monitor the performance of its recipients on HUD-established performance goals? (limit 1000 characters)**

The CoC funded agencies undergo an annual review utilizing information gathered from their Annual Progress Reports and monthly HMIS performance reports. Some of the performance rating criteria include assessment of their proposed and actual housing and income performance measures.

Projects are evaluated on the following: ending chronic homelessness, increasing housing stability, increasing participant income, connecting to mainstream benefits, as well as the projects capacity for helping the CoC meet various strategic planning objectives. Components of the proposed CoC Planning grant will develop an enhanced year round monitoring, evaluation performance criteria program for all HUD funded projects.

#### **4A-2 How does the CoC assist project recipients to reach HUD-established performance goals? (limit 1000 characters)**

In the past, the CoC has assisted projects to reach HUD established performance goals by reviewing projects annually to help identify areas where improvement was needed. However, it is the responsibility of project recipients to self-monitor as to whether or not these issues have been adequately addressed. As stated in the proposed CoC Planning grant, performance monitoring will include measuring each programs goals. Projects will be assessed year round to insure compliance with CoC project performances thresholds that are based on HUD established performance goals. The projects are reviewed to determine program effectiveness in meeting the goals of ending chronic homelessness, increasing housing stability, increasing participant income and connecting to mainstream benefits. The CoC will investigate reallocating funds in the FY2014 Application towards rapid re-housing. The Monitoring Committee will assess performance throughout the year and provide guidance to help projects progress.

#### **4A-3 How does the CoC assist recipients that are underperforming to increase capacity? (limit 1000 characters)**

The CoC assist recipients that are underperforming by sharing information, identifying the weakness of the project experiencing potential problems and compare the findings with projects that has achieved high performance. Projects are reviewed annually and HMIS reports are reviewed monthly, showing how well each project is performing in comparison to similar projects. Lesser performing projects are matched with higher performing projects that provide guidance and mentorship. It is anticipated, with the CoC Planning grant, that additional assistance in monitoring, evaluation, and supervision for poor performers will lead to increased capacity. The projects inability to meet or exceed threshold may lead to reallocation of the funds.

**4A-4 What steps has the CoC taken to reduce the length of time individuals and families remain homeless?  
(limit 1000 characters)**

With very limited Permanent Supportive Housing and other subsidized Permanent Housing options, the length of time that persons are on waiting lists can be six months or longer. The CoC is in the process of evaluating the systems in place that are "first come, first serve" rather than prioritizations based upon need. Also, data that allows for systematically tracking length of time someone awaits housing has not been captured in an informative manner. Unless a person moves from an emergency shelter or transitional housing, temporal data in the HMIS on homelessness prior to PSH, such as time on a waiting list, is not a constant. With the Coordinated Access and Assessment System, shifts in service delivery will focus upon triage and prioritizations for housing. The CoC plans to use a housing first and a no wrong door approach to remove barriers. There will also be a shift to RRH for TH programs, wherein persons return to permanent housing swiftly, rather than making persons "housing ready". All components will standardize a system for service delivery that shall reduce the length of time persons are homeless.

**4A-5 What steps has the CoC taken to reduce returns to homelessness of individuals and families in the CoC's geography?  
(limit 1000 characters)**

Housing programs within the CoC go to great lengths to ensure that their consumers remain in housing and not return to homelessness. An important component of maintaining stability in permanent housing is to have the necessary supportive services in place, but only to the degree that is needed. The CoC encourages housing programs to increase service recipients' access to mainstream benefits and other supports that will help maintain their housing. This includes working to increase income, either through employment or eligible benefits programs. Additionally, housing service providers work to remove barriers that inhibit self-sufficiency wherever possible. This, too, helps continue stable permanent housing. While there has not been a systematic measure of how many persons return to homelessness, the re-occurrence of persons in HMIS who have exited any of the CoC-funded programs appears infrequently. It is a goal of the CoC to be able to quantify rates of these returns, so that the CoC may more effectively address and potentially reduce these occurrences.

**4A-6 What specific outreach procedures has the CoC developed to assist homeless service providers in the outreach efforts to engage homeless individuals and families?  
(limit 1000 characters)**

Even though the CoC lacks funding for conducting outreach, the CoC utilizes service providers for disseminating information regarding programs. As a primarily rural and exurban jurisdiction, outreach conducted through human services networks, such as the CoC's e-mail blast and meeting presentations, has been the most effective means for identifying eligible individuals and families for these housing resources. Homeless service providers use all or a mix of social media, speaking engagements, networking, collaboration, shelter and hospital outreach to market housing and supportive services to eligible persons. Once a year during the point-in-time count, representatives from various agencies and volunteers from the community are prepared with housing applications to immediately obtain information in order to expedite services for the individual or family.



## **4B. Section 3 Employment Policy**

### **Instructions**

\*\*\* TBD \*\*\*\*

**4B-1 Are any new proposed project applications requesting \$200,000 or more in funding?** No

**4B-1.1 If yes, which activities will the project(s) undertake to ensure employment and other economic opportunities are directed to low or very low income persons?  
(limit 1000 characters)**

**4B-2 Are any of the projects within the CoC requesting funds for housing rehabilitation or new constructions?** No

**4B-2.1 If yes, which activities will the project undertake to ensure employment and other economic opportunities are directed to low or very low income persons:**

## 4C. Accessing Mainstream Resources

### Instructions:

For guidance on completing this form, please reference the FY 2013 CoC Application Detailed Instructions and the FY 2013 CoC Program NOFA. Please submit technical question to the OneCPD Ask A Question at <https://www.onecpd.info/ask-a-question/>.

**4C-1 Does the CoC systematically provide information about mainstream resources and training on how to identify eligibility and program changes for mainstream programs to provider staff?** Yes

**4C-2 Indicate the percentage of homeless assistance providers that are implementing the following activities:**

* Homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.	83%
* Homeless assistance providers use a single application form for four or more mainstream programs.	0%
* Homeless assistance providers have staff systematically follow-up to ensure mainstream benefits are received.	100%

**4C-3 Does the CoC make SOAR training available for all recipients and subrecipients at least annually?** No

**4C-3.1 If yes, indicate the most recent training date:**

**4C-4 Describe how the CoC is preparing for implementation of the Affordable Care Act (ACA) in the state in which the CoC is located. Response should address the extent in which project recipients and subrecipients will participate in enrollment and outreach activities to ensure eligible households are able to take advantage of new healthcare options.  
(limit 1000 characters)**

Trainings have been given across the state on how the Affordable Care Act is being implemented in La & how to apply for health insurance through the marketplaces. The trainings include how the Act will work for people at risk of homelessness & those experiencing homelessness. Trainings have been provided by: Access Health Louisiana, Louisiana Health Cooperative, Louisiana Healthcare Education Coalition, & Volunteers of America Greater New Orleans. La left all responsibility for its health insurance marketplace to the federal government & is not participating in the Medicaid expansion program, a decision that leaves 34% of uninsured La adults in the coverage gap – neither qualifying for Medicaid nor eligible for subsidies to purchase insurance through marketplaces. Recipients & sub-recipients will work with participants to link to Health Ins Marketplaces. Assistance given in applying for coverage. Recipients of CoC funds will identify 1 staff person to serve as ACA liaison. Recipients will work to ensure persons served have an advocate for needed services. Case managers will monitor, and if needed, intervene to achieve desired goals & outcomes for persons served in enrolling.

**4C-5 What specific steps is the CoC taking to work with recipients to identify other sources of funding for supportive services in order to reduce the amount of CoC Program funds being used to pay for supportive service costs?  
(limit 1000 characters)**

CoC is working with recipients to identify other sources of funding through mainstream benefits agencies, including Department of Children and Family Services, Louisiana Department of Health and Hospitals and the Social Security Administration. These mainstream resources help participants with employment, housing, food, health, SSI, SSDI, and mental health. Also, the CoC is exploring managed care benefits which possibly could cover and pay for services such as case management, life skills, behavioral health and other wrap-around services. Also, the CoC is linking providers with educational material and information about Affordable Care Act resources.

## Attachments

Document Type	Required?	Document Description	Date Attached
Certification of Consistency with the Consolidated Plan	Yes	LA 506 Certificat...	01/31/2014
CoC Governance Agreement	No	LA 506 Governance...	01/31/2014
CoC-HMIS Governance Agreement	No	LA-506 CoC HMIS G...	01/27/2014
CoC Rating and Review Document	No	1D1 Project Revie...	01/31/2014
CoCs Process for Making Cuts	No	Minutes - Proj Sc...	01/31/2014
FY2013 Chronic Homeless Project Prioritization List	No		
FY2013 HUD-approved Grant Inventory Worksheet	Yes	GIW_LA-506_Review...	01/31/2014
FY2013 Rank (from Project Listing)	No	FY2013 LA-506 CoC...	01/31/2014
Other	No	LA-506 HMIS Stand...	01/27/2014
Other	No		
Other	No		
Projects to Serve Persons Defined as Homeless under Category 3	No		
Public Solicitation	No		

## **Attachment Details**

**Document Description:** LA 506 Certificates of Consistency

## **Attachment Details**

**Document Description:** LA 506 Governance Documents

## **Attachment Details**

**Document Description:** LA-506 CoC HMIS Governance Agreement

## **Attachment Details**

**Document Description:** 1D1 Project Review and Ranking

## **Attachment Details**

**Document Description:** Minutes - Proj Scoring and Ranking Mtg

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** GIW\_LA-506\_Reviewed09\_20\_13

## **Attachment Details**

**Document Description:** FY2013 LA-506 CoC Ranking List

## **Attachment Details**

**Document Description:** LA-506 HMIS Standard Operating Procedures

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

Page	Last Updated
1A. Identification	No Input Required
1B. CoC Operations	01/31/2014
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2A. HMIS Implementation	01/31/2014
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2H. Sheltered Data - Methods	01/27/2014
2I. Sheltered Data - Collection	01/28/2014
2J. Sheltered Data - Quality	01/28/2014
2K. Unsheltered PIT	01/31/2014
2L. Unsheltered Data - Methods	01/28/2014
2M. Unsheltered Data - Coverage	01/28/2014
2N. Unsheltered Data - Quality	01/28/2014
Objective 1	01/31/2014
Objective 2	01/31/2014
Objective 3	01/31/2014
Objective 4	01/31/2014
Objective 5	01/31/2014
3B. CoC Discharge Planning: Foster Care	01/31/2014
3B. CoC Discharge Planning: Health Care	01/31/2014
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<b>3B. CoC Discharge Planning: Mental Health</b>	01/28/2014
<b>3B. CoC Discharge Planning: Corrections</b>	01/28/2014
<b>3C. CoC Coordination</b>	01/31/2014
<b>3D. Strategic Plan Goals</b>	01/28/2014
<b>3E. Reallocation</b>	01/28/2014
<b>4A. Project Performance</b>	01/31/2014
<b>4B. Employment Policy</b>	01/22/2014
<b>4C. Resources</b>	01/31/2014
<b>Attachments</b>	01/31/2014
<b>Submission Summary</b>	No Input Required



**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Slidell/Southeast Louisiana CoC - LA 506

Project Name: See Attached List

Location of the Project: Livingston, St. Helena, Tangipahoa, & Washington Parishes

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care, Supportive Housing Programs

Name of  
Certifying Jurisdiction: State of Louisiana

Certifying Official  
of the Jurisdiction  
Name: Carol M. Newton

Title: Director, CDBG Program

Signature: 

Date: 1/22/2014

**Northlake Homeless Coalition**  
**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: St. Tammany Parish Community Action Agency**

Project: Supportive Housing Transition Housing Program

Location: Slidell, St. Tammany Parish, Louisiana

Funding Request: \$95,533

Project Description: Provides 6 units of scattered site transitional housing and services to homeless families with children in St. Tammany Parish.

**Applicant: NAMI, St. Tammany**

Project: Supportive Housing - Transitional Housing

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$166,522

Project Description: Provides transitional supportive housing in two adjacent Mandeville group homes with 24-hour staffing to 6 homeless men and 6 homeless women with serious mental illness or dual diagnoses from the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: NAMI, St. Tammany**

Project: Supportive Housing - Transitional Housing (Expansion)

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$69,734

Project Description: Expands transitional supportive housing program to provide more adequate staffing and staff compensation, as well as a van for transporting clients to medical care and to other needed services.

**Applicant: NAMI, St. Tammany**

Project: Supportive Housing - Permanent Housing

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$78,880

Project Description: Provides permanent housing and support services in 7 adjacent apartments with 10 total beds for homeless adults with serious mental illness from the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: NAMI, St. Tammany**

Project: Supportive Housing – Permanent Group Home

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$170,342

Project Description: Provides permanent housing utilizing 1 unit with 8 beds for individuals with severe physical mental illness, Veterans, substance abuse and mental illness.

**Northlake Homeless Coalition**  
**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: Southeastern Louisiana University**

Project: Northlake HMIS Data Project

Location: Hammond, Tangipahoa Parish, Louisiana

Funding Request: \$149,877

Project Description: Provides a dedicated homeless management information system, including technical support and equipment, to agencies providing housing and services to the homeless in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Permanent Supportive Housing for Homeless Persons with Disabilities

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$115,653

Project Description: Provides 23 scattered site units of client-leased permanent housing and case management services to homeless adults, including persons in families with children, who are severely mentally ill or dually diagnosed with substance abuse and mental illness in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Permanent Housing for the Homeless with Disabilities

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$166,369

Project Description: Provides 23 scattered site units of client-leased permanent housing and case management services to homeless adults, including persons in families with children, who have severe mental illness or other disabling conditions in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Northshore Permanent Housing for Disabled Individuals

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$333,375

Project Description: Provides 30 scattered site units of client-leased permanent housing and case management services to homeless adults, including persons in families with children, who have severe mental illness or other disabling conditions in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Supportive Housing Program, Supportive Services

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$50,952

Project Description: Provides outreach, intake, assessment, case management, and housing placement services to homeless seriously mentally ill and dually diagnosed persons entering the Continuum of Care system in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, Washington and City of Slidell.

**Northlake Homeless Coalition**  
**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: Volunteers of America of Greater New Orleans**

Project: Project ROK

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$45,188

Project Description: Provides outreach, intake, assessment, case management and assistance to those housed to remain in stable housing. Project serves those with mental illness, HIV/AIDS, substance abuse and physical disabilities in the parishes of Livingston, St. Helena, Tangipahoa, St. Tammany, Washington and City of Slidell.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Gimme Shelta – Scattered Permanent Housing

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$196,471

Project Description: Provide 31 scattered site housing units for chronically homeless individuals and homeless families in the parishes of Tangipahoa, Washington, Livingston, St. Tammany, St. Helena and City of Slidell that have a diagnosis of HIV/AIDS, mental illness, physical disability, and/or substance abuse.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Project PHVA

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$42,871

Project Description: Provide 3 scattered site units of client-leased permanent housing and case management services to chronically homeless individuals and families, with priority given to U.S. Military Veterans that have a diagnosis of HIV/AIDS, mental illness, physical disability, and/or substance abuse in St. Tammany and Tangipahoa Parishes.

**Applicant: Volunteers of America of Greater New Orleans**

Project: Project CH TWSH

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$88,148

Project Description: Provide 8 scattered site units of client-leased permanent housing and case management services to chronically homeless individuals and families that have a diagnosis of HIV/AIDS, mental illness, physical disability, and/or substance abuse in Washington, Tangipahoa, and St. Helena Parishes.

**Applicant: Southeast Spouse Abuse Program**

Project: Transitional Housing & Services for Domestic Violence Survivors

Location: Hammond, Tangipahoa Parish, Louisiana

Funding Request: \$150,818

Project Description: Provides 16 units of scattered site transitional housing and supportive services to homeless women and children who are survivors of domestic violence in the parishes of Livingston, St. Helena, Tangipahoa, and Washington.

**Northlake Homeless Coalition**  
**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: Southeast Spouse Abuse Program**

Project: Transitional Housing – Expanded

Location: Hammond, Tangipahoa Parish, Louisiana

Funding Request: \$87,977

Project Description: Provides 6 units of scattered site transitional housing and supportive services to homeless unaccompanied women who are survivors of domestic violence in the parishes of Livingston, St. Helena, Tangipahoa, and Washington.

**Applicant: Hammond Housing Authority**

Project: Successful Transitions Program

Location: Hammond, Tangipahoa Parish, Louisiana

Funding Request: \$183,038

Project Description: Provides 16 units of scattered site transitional housing and services to homeless families with children in Tangipahoa Parish.

**Applicant: Northlake Homeless Coalition**

Project: NHC Planning Project

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$28,642

Project Description: Planning for Northlake Homeless Coalition to hire an Executive Director that will oversee the operation of the organization.

**Certification of Consistency  
with the Consolidated Plan****U.S. Department of Housing  
and Urban Development**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.  
(Type or clearly print the following information:)

Applicant Name: Slidell/Southeast Louisiana CoC - LA 506

Project Name: See Attached List

Location of the Project: St. Tammany Parish

Name of the Federal  
Program to which the  
applicant is applying: Continuum of Care, Supportive Housing Programs

Name of  
Certifying Jurisdiction: St. Tammany Parish

Certifying Official  
of the Jurisdiction  
Name: Patricia Brister

Title: Parish President

Signature: Patricia P. Brister

Date: 1-30-14

**Northlake Homeless Coalition**  
**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: St. Tammany Parish Community Action Agency**

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Location: Slidell, St. Tammany Parish, Louisiana

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Location: Mandeville, St. Tammany Parish, Louisiana

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**Slidell/Southeast Louisiana CoC – LA 506**

**Applicant: Volunteers of America of Greater New Orleans**

Project: Project ROK

Location: Mandeville, St. Tammany Parish, Louisiana

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Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$196,471

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Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$42,871

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Project: NHC Planning Project

Location: Mandeville, St. Tammany Parish, Louisiana

Funding Request: \$28,642

Project Description: Planning for Northlake Homeless Coalition to hire an Executive Director that will oversee the operation of the organization.

**ARTICLES OF ORGANIZATION**  
**FOR NORTHLAKE HOMELESS COALITION (NHC)**

Articles of incorporation of the undersigned, a majority of whom are citizens of the United States, desiring to form a Non-Profit Corporation under the Non-Profit Corporation Law of the State of Louisiana, do hereby certify:

**First:** The name of the Corporation shall be the Northlake Homeless Coalition using the acronym NHC.

**Second:** The place in this state where the principal office of the corporation is to be located is 823 Carroll Street, Suite B, Mandeville, LA 70448, St. Tammany Parish.

**Third:** Said corporation is organized exclusively for charitable purposes, including for such purpose, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**Fourth:** The names and addresses of the persons who are the initial trustees of the corporation are as follows: Diana Wild (Chairperson) 63081 Pine Acres Rd., Lacombe, LA 70445

Mona Mistric (Committee Member) 11095 Sims Rd., Denham Springs, LA 70706

**Fifth:** No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article Third hereof. No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions which are deductible under section 170 (c) (2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**Sixth:** Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principle office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

In Witness hereof, we have hereunto subscribed our names this 28 day of April, 2011.

Mrs. Eileen Andries  
Witness  
EILEEN ANDRIES

Diana Wild  
Chairperson

James Jenson  
Witness

Mona Mistric  
Committee Member

[Signature]  
Notary Public

LIBREORY ANDRIES  
NOTARY PUBLIC #15471  
ST. TAMMANY PARISH

**Northlake Homeless Coalition**

823 Carroll Street

Mandeville, LA, 70448

Phone: 985-674-0488 \* Fax: 985-674-0336

**EIN: 27-0870858**

AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF  
NORTHLAKE HOMELESS COALITION

The undersigned, acting pursuant to the Corporation Law of Louisiana, hereby amends the articles of incorporation as follows:

Article II

The corporation is formed for the purpose of engaging in any lawful activity for which corporations may be formed under Chapter 2, Title 12, of the Louisiana Revised Statutes (Non-Profit Corporations Law). The Northlake Homeless Coalition is organized exclusively for charitable, religious, educational, and scientific purposes, including for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

The amendment has been adopted by unanimous consent of the executive committee <sup>directors</sup> through email confirmation on the 9<sup>th</sup> of September, 2011.

THUS DONE AND PASSED on the 13<sup>th</sup> of September, 2011, signed in the East Baton Rouge Parish, State of Louisiana, before the undersigned Notary Public.

  
Signature of Executive Committee Officer

of Women Outreaching Women

Executive Committee Member

Title

**IN-PERSON FILING**

Notary Public

Jay Dardenne  
Secretary of State



# ARTICLES OF INCORPORATION

(R.S. 12:203)

Domestic Non-Profit Corporation  
Non-Stock Corporations Only  
Enclose \$60.00 filing fee  
Make remittance payable to  
Secretary of State  
*Do not send cash*

Return to: Commercial Division  
P. O. Box 94125  
Baton Rouge, LA 70804-9125  
Phone (225) 925-4704  
Web Site: [www.sos.louisiana.gov](http://www.sos.louisiana.gov)

STATE OF LOUISIANA  
I hereby certify that this is a true and correct copy,  
as taken from the original on file in this office.

STATE OF LOUISIANA

PARISH OF St. Tammany

*Jay Dardenne*  
Jay Dardenne  
Secretary of State

Date: **AUG 26 2009**

1. The name of this corporation is: Northlake Homeless Coalition

RDB

2. This corporation is formed for the purpose of: (check one)  
☒ Engaging in any lawful activity for which corporations may be formed under Chapter 2, Title 12,  
of the LA Revised Statutes (Non-Profit Corporation Law)  
☐ \_\_\_\_\_  
(Use for limiting corporation activity)

3. The duration of this corporation is: (may be perpetual) Perpetual

4. This corporation is a nonprofit corporation.

5. The location and municipal address (not a P.O. Box only) of this corporation's registered office is:  
823 Carroll St, Ste B, Mandeville, LA 70448

6. The full name and municipal address (not a P.O. Box only) of each of this corporation's registered agent(s) is/are:  
DIANA Wild 63081 Pine Acres Rd., Lacombe, LA 70445

7. The full name and address of each incorporator of this corporation is:  
DIANA Wild 63081 Pine Acres Rd., Lacombe, LA 70445

8. The corporation's initial board of directors, municipal addresses (not a P.O. Box only) and term of office are:

Name(s)/Address(es)	Term of Office
<u>Erin Matheny 44091 Fern St., Hammond, LA 70403</u>	<u>1yr</u>
<u>DIANA Wild 63081 Pine Acres Rd., Lacombe, LA 70445</u>	<u>1yr</u>
<u>Ramona Mistic, 11109 Sims Rd, Denham Springs, LA 70706</u>	<u>1yr</u>

9. This corporation is to be organized on a non-stock basis.

10. Other Provisions: \_\_\_\_\_

Incorporator(s) Signature(s):

Diana H. Will

On this 26 day of August, 2009 before me, personally  
appeared Diana H. Will, to me known to be the person  
described in and who executed the foregoing instrument, and acknowledged that he executed it  
as his free act and deed.

[Signature]

Notary

L. GREGORY A. DRIES  
NOTARY PUBLIC #15472  
COMM. IN LIVINGSTON PARISH

**AGENT'S AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE**

I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above  
named corporation.

Registered agent(s) signature(s):

Diana H. Will

Sworn to and subscribed before me this 26 day of Aug, 2009.  
**NOTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #**

[Signature]

Notary Signature

L. GREGORY A. DRIES  
NOTARY PUBLIC #15472  
COMM. IN LIVINGSTON PARISH

BY-LAWS  
NORTHLAKE HOMELESS COALITION

ARTICLE I: NAME

The name of this organization shall be Northlake Homeless Coalition (herein referred to as "the Coalition"). The address of the principal office of this board shall be Northlake Homeless Coalition, TBD.

ARTICLE II: MISSION AND PURPOSE

Mission Statement:

The mission of the Coalition is to eliminate homelessness in Region IX.

Purpose:

The purpose of the Northlake Homeless Coalition is to serve as the Continuum of Care for Region IX by providing homeless individuals, public and private agencies, businesses and organizations whose interest is serving the homeless population, an opportunity for networking, education, advocacy and collaboration in an effort to eliminate homelessness in Region IX. Region IX consists of St. Tammany, Tangipahoa, Livingston, Washington and St. Helena Parishes. The Coalition will serve as the Region IX lead agency for the Department of Housing and Urban Development SuperNOFA housing grants and will assist and advise the agencies applying for the HUD SuperNOFA in administering the programs. The objectives of the Coalition are:

- A. Provide an opportunity for collaboration and unified representation regarding the issues related to homelessness
- B. To serve as the official homeless continuum of care for Region IX
- C. To utilize resources, both public and private
- D. To provide services, assistance and other activities of sufficient scope and size, to give promise to progress toward elimination of homelessness
- E. To create programs which are developed, conducted, and administered with maximum feasible participation of residents of the areas and members of the groups served
- F. To advocate on behalf of the homeless population in Region IX
- G. As lead agency, responsible for overseeing the process for putting together the HUD SuperNOFA application

### ARTICLE III: NON-DISCRIMINATION POLICY

This organization shall be non-partisan and non-sectarian, and shall not discriminate on the basis of race, color, sex, religion, physical or mental disabilities, sexual orientation or national origin.

### ARTICLE IV: MEMBERSHIP

Volunteer membership shall be comprised of homeless individuals, public and private agencies, businesses and organizations or any individual whose interest is in serving the homeless population, and ending homelessness.

#### A) VOTING

Voting shall be done by simple majority of those present at any given general membership meeting. Notification for voting issues shall be announced by email to the general membership two (2) weeks prior to the meeting. The Executive Board reserves final right of determination regarding any and all items voted on by the general membership.

All members will abstain from voting in the event of a conflict of interest.

#### B) MEETINGS

The Coalition General Membership meetings shall meet bi-monthly per calendar year. The Executive Board shall provide a report at each of the general membership meetings.

All meetings will be governed by and conducted according to the latest edition of Robert's Rules of Order.

All meetings are open to the public.

### ARTICLE V: EXECUTIVE BOARD

An Executive Board shall be established to manage and oversee all affairs of the organization with emphasis on submission of the HUD SuperNOFA grant.

#### A) STRUCTURE AND SELECTION OF BOARD

Membership on the Coalition Executive Board shall be comprised of the following representation:

1. One of the co-chairs shall preside at all general membership and Executive Board

meetings. The co-chair presiding over the meetings shall be considered serving as the President. Should one chair step down or be removed, the position shall be filled by an individual representing the same as that of sector chair that is being replaced.

2. One of the co-chairs shall oversee and facilitate all meetings. This individual shall not exercise voting privileges unless there is a need to break a tie.

3. Executive Board members will be comprised of one or both of the following:

- a. Agencies receiving HUD funding are required to designate a representative who will serve on the Executive Board
- b. A maximum of two seats shall be elected to serve on the Executive Board as representation from the general membership through the following process:
  - i. Announce at General Meeting that the Executive Board is seeking two board members from the general membership to serve on the board.
  - ii. General Membership will nominate individuals for the slate.
  - iii. General Membership will vote to select their two (2) board representatives.
  - iv. Selectees will serve on the Executive Board for one (1) year with concurrent terms allowed

#### B) QUORUM

For voting purposes a quorum will consist of 2/3 of the Executive Board.

#### C) RECORD OF MEETINGS

The board shall keep a written record for each meeting including a record of votes on all motions.

#### D) MEETINGS

The Coalition Executive Board shall meet a minimum of six (6) times per calendar year. A regular meeting schedule may be adopted by the board indicating the time and place of meetings.

Special meetings will be held upon call of one of the Co-Chairs or upon request of any four (4) members of the Executive Board.

#### E) VACANCIES

Should a board vacancy occur at any time, it shall be filled in accordance with Article V, Section



A of these bylaws. The replacements shall maintain the same balance or ratio between the public and private sectors.

#### F) REMOVAL

Any member of the Executive Board who misses three (3) consecutive Executive Board meetings without good cause may be removed by majority vote. The affected agency will be contacted to replace their representative to the board.

#### Alternates

The board will allow alternates to substitute for its members. The board member or its representing agency may select a representative to serve in his/her place or in his/her absence.

### ARTICLE VII: TERMS OF OFFICE

Agency Representatives will serve concurrently on the Executive Board in accordance with grant funding.

The Co-Chairs may serve staggered rotating two (2) year terms.

Executive Board members shall not be paid for their services.

### ARTICLE VIII: OFFICERS

The Coalition Executive Board shall elect the following officers:

Co-Chairs: One of the co-chairs shall preside at all general membership and Executive Board meetings. The co-chair presiding over the meetings shall be considered serving as the President. Should one chair step down or be removed, the position shall be filled by an individual representing the same as that of sector chair that is being replaced.

Secretary: The Secretary shall engage in all activities inherent to the successful function of the board.

Treasurer: The Treasurer shall serve as financial officer.

Officers shall serve two year terms.

## ARTICLE IX: COMMITTEES


The Executive Board shall establish committees as deemed necessary or desirable. The composition of these committees shall fairly reflect the composition of the board.

## ARTICLE X: AMENDMENTS TO BY-LAWS

These bylaws may be amended or altered by a two thirds (2/3) majority vote, at any regular or special meeting of the Coalition with two weeks notice.

WHEREAS, these By-Laws have been duly proposed, offered, seconded and adopted at the regular meeting of the Northlake Homeless Coalition, this document then supersedes and nullifies any prior By-Law document adopted by the Northlake Homeless Coalition.

This document supersedes and nullifies any prior By-Law document adopted by the Coalition

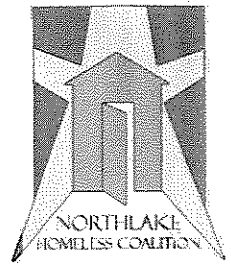
  
Co-Chair, Public Sector

Date: 6/11/08

  
Co-Chair, Private Sector

Date: 6/11/08

\*Amended \_\_\_\_\_



## **Code of Conduct**

No employee, officer, agent, volunteer or affiliate of this organization will engage in activities resulting in financial gain from monies or benefits from funding contracts or agreements with this organization. No employee, officer, agent, volunteer or affiliate of this organization may accept gifts of money, goods, services, or gratuities from any person receiving services from this organization or from persons performing services for the organization. If an employee, officer, agent, volunteer or affiliate of this organization is found to be in violation of this policy they will be notified immediately and asked to comply with the policy. If the violation has not been remedied within a reasonable amount of time, the employee, officer, agent, volunteer or affiliate will be relieved of his or her duties with the Northlake Homeless Coalition.

All employees, officers, agents, volunteers or affiliates of this organization are required to acknowledge having read and understood this policy by signing a certification which is kept on file for their duration of tenure with the organization.

**Northlake Homeless Coalition**  
**Conflict of Interest Policy**

**Article I: Purpose**

The purpose of the conflict of interest policy is to protect this tax-exempt Northlake Homeless Coalition's (herein after referred to as the NHC) when it is contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the Organization or might result in possible excess benefit transaction. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations.

**Article II: Definitions**

**1. Interested Person**

Any director, principal officer, or member of a committee with governing board delegated powers, who has a direct or indirect financial interest as defined below, is an interested person.

**1. Financial Interest**

A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:

- a. An ownership or investment interest in any entity with which the NHC has a transaction or arrangement,
- b. A compensation arrangement with the NHC or with any entity or individual with which the NHC has a transaction or arrangement, or
- c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the NHC is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

A financial interest is not necessarily a conflict of interest. Under Article III, Section 2, a person who has a financial interest may have a conflict of interest only if the appropriate governing board or committee decides that a conflict of interest exists.

**Article III: Procedures**

**1. Duty to Disclose**

In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement.

**2. Determining Whether a conflict of Interest Exists**

After disclosure of the financial and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

**3. Procedures for Addressing the Conflict of Interest**

- a. An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest.
- b. The chairperson of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
- c. After exercising due diligence, the governing board or committee shall determine whether the Organization can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest.
- d. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the NHC's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement.

**4. Violations of the Conflicts of Interest Policy**

- a. If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.
- b. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate and corrective action.

**Article IV: Records of Proceedings**

The minutes of the governing board and all committees with board delegated powers shall contain:

- a. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial interest, any action taken to determine whether a conflict of interest was present, and the governing board's or committee's decision as to whether a conflict of interest in fact existed.
- b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

**Article V: Compensation**

- a. A voting member of the governing board who receives compensation, directly or indirectly, from the NHC for services is precluded from voting on matters pertaining to that member's compensation.
- b. A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the NHC for services is precluded from voting on matters pertaining to that's member's compensation.
- c. No voting member of the governing board or committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the NHC, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

**Article VI: Annual Statements**

Each director, principal officer and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person:

- a. Has received a copy of the conflicts of interest policy,
- b. Has read and understands the policy,
- c. Has agreed to comply with the policy, and
- d. Understands the NHC is charitable and in order to maintain its federal tax exemption must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

**Article VII: Periodic Reviews**

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, periodic reviews shall be conducted. The periodic reviews shall, at a minimum, include the following subjects:

- a. Whether compensation arrangements and benefits are reasonable, based on competent survey information and the result of arm's length bargaining.
- b. Whether partnerships, joint ventures, and arrangements with management organizations conform to the NHC's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurements, impermissible private benefit or in an excess benefit transaction.

**Article VIII: Use of Outside Experts**

When conducting the periodic reviews as provided for in Article VII, the NHC may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the governing board of its responsibility for ensuring periodic reviews are conducted.

## **HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) GOVERNANCE CHARTER of the NORTHLAKE HOMELESS COALITION (NHC)**

### **PURPOSE:**

The Northlake Homeless Coalition (NHC), the coordinating body for the LA-506 Slidell/Southeast Louisiana Continuum of Care (CoC), manages and maintains a subsection of the state-wide Homeless Management Information System (HMIS) database operated by the Louisiana Service Network Data Consortium (LSNDC). The HMIS database is used to record and store the client-level demographic and service data of participating service agencies so it can be aggregated to discern patterns and trends about the extent and nature of homelessness over time, produce unduplicated counts of homeless persons, discern and explain patterns of service usage, and measure the effectiveness of participating projects. The purpose of this document is to serve as a Governance Charter for the oversight of the HMIS system.

### **DESIGNATION:**

- The designated Regional HMIS Lead Agency is the Northlake HMIS Data Project, located at Southeastern Louisiana University, which operates in Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington parishes. The Northlake HMIS Data Project is a member of the NHC.
- The designated HMIS software tool is ServicePoint™ by Bowman Systems of Shreveport, Louisiana.
- The NHC CoC has contracted with the Louisiana Service Network Data Consortium (LSNDC) to participate in a state-wide HMIS database in order to improve delivery of HMIS-related services and enable participating agencies to better comply with federal regulations and the expectations of the US Department of Housing and Urban Development (HUD).

### **RESPONSIBILITIES OF THE CoC**

The Northlake Homeless Coalition (NHC CoC) shall:

- Work with the Regional HMIS Lead Agency and the LSNDC to read and interpret any and all regulations, notices and other communications issued by HUD, and to annually review and, as necessary, revise any and all policies, procedures and plans related to the HMIS Project and the CoC Program.
- Identify and designate an HMIS Software tool for use by the participating agencies. The designated HMIS software tool is ServicePoint™ by Bowman Systems of Shreveport, Louisiana.
- Designate a legal entity to serve as the Regional HMIS Lead Agency. Once designated, the Regional HMIS Lead Agency will abide by the terms and conditions outlined in this governance charter. The designated Regional HMIS Lead Agency is the Northlake HMIS Data Project, under the auspices of Southeastern Louisiana University, located in Hammond, and serving the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington.
- Contract with any organizations that will improve delivery of HMIS-related services and enable participating agencies to better comply with federal regulations and the expectations of the US Department of Housing and Urban Development (HUD). The Northlake Homeless Coalition CoC has contracted with the Louisiana Service Network Data Consortium (LSNDC) to participate in a state-wide HMIS database.
- In consultation with participating agencies, provide feedback and guidance to the HMIS Lead Agency in

regards to its performance. This includes polling participating agencies through use of surveys and similar tools, receiving and interpreting comments from agencies, and interpreting the results of ServicePoint™ reports to determine data quality and identify other areas of concern.

- In consultation with participating agencies, establish guidelines and operating policies that are in compliance with federal regulation, HUD guidelines, and HMIS Data and Technical Standards. These policies and procedures shall be open to review to ensure the ongoing viability and responsiveness of policies to the HMIS project's environment.
- Provide support to the Regional HMIS Lead Agency and to the Regional HMIS Lead System Administrator when the Lead System Administrator is unable to perform his/her duties due to interference from a participating agency. This support may take the form of negotiating with the non-compliant agency, censoring said agency, or imposing consequences, including but not limited to recommending to HUD that granted funds be removed from the agency.
- Contribute data to the HMIS Lead Agency to use in reporting for the Point-in-Time (PIT) count, the Housing Inventory Count (HIC) and the Annual Homeless Assessment Report (AHAR), among other HUD reporting that the HMIS Lead Agency produces for the NHC CoC.
- Execute a Governance Agreement between the NHC CoC and the LSNDG which delineates the obligations and authority of the Regional HMIS Lead Agency, the LSNDG state-wide system and the NHC CoC. This agreement will include the requirements of the LSNDG Standard Operating Procedures and any future regulatory documents set forth by HUD and the LSNDG; discussing possible sanctions for violating the agreement. This agreement will also require that the LSNDG, the Regional HMIS Lead Agency, NHC CoC and the regional participating agencies will process protected identifying information in a manner consistent with this agreement.
- Collaborate with the HMIS Lead Agency in all appropriate ways to ensure that the policy goals developed by the NHC are met. In particular, the Chairperson of the Northlake Homeless Coalition and the Regional HMIS Lead System Administrator will work together to share information, develop goals and address issues with ServicePoint™, data quality and participating agencies as they occur.
- Work with participating agencies and the Regional HMIS Lead Agency to develop performance benchmarks for CoC Program Project performance, including that of the HMIS Project.
- Gather reports from the CoC Program Project representatives and review them to determine if benchmarks have been met. Findings from these periodic reviews will be considered as project performance criteria and will influence scoring and ranking of projects for the CoC Program NOFA Competition.

## RESPONSIBILITIES OF THE REGIONAL HMIS LEAD AGENCY

The Regional HMIS Lead Agency shall:

- Obtain and maintain all grants supporting the HMIS project, provide staffing, and purchase the required licenses, equipment and software for the CoC. As well, the HMIS Lead Agency will ensure that all participating agencies have the basic equipment needed to fulfill all HUD HMIS requirements.
- Provide technical support for the CoC and all participating agencies, including assisting participating agencies with technical issues related to the HMIS project.
- Work with the vendor to ensure that data is collected, stored and reported in compliance with all HUD regulations; and determine if a different vendor should be selected to provide the regional HMIS if the current vendor fails to conform to HUD regulations.
- Provide training to all HMIS end users within the participating agencies through general training meetings held during the monthly CoC participating agencies meeting, and through individual training in a classroom setting, in a one-on-one setting, or through a web-based training platform. Introductory trainings will be offered at the discretion of the Regional HMIS Lead System Administrator, while general training will be offered during monthly HMIS User meetings, and through any additional training sessions offered by the Regional HMIS Lead Agency.
- Promote use of the HMIS through regular contact with users, participating agencies and similar organizations whose participation would benefit the NHC CoC and/or the HMIS Lead Agency itself.
- Execute a written HMIS Participation Agreement with each participating agency, delineating the obligations and authority of the Regional HMIS Lead Agency, the LSND C state-wide system and the participating agency. This agreement will include, directly or referenced, the requirements of the LSND C Standard Operating Procedures and any future regulatory documents set forth by HUD and the LSND C; and discuss possible sanctions for violating the agreement. This agreement will also require that the HMIS Lead Agency, LSND C and the participating agency will process protected identifying information in a manner consistent with this agreement.
- Monitor and verify data collection from all recipients of CoC Program and Emergency Solutions Grant Program grants through the chosen HMIS platform, ensuring that data is being entered by all such agencies in a manner that is compliant with data standard requirements. Where needed, the Regional HMIS Lead System Administrator shall work with the CoC and the participating agencies to address any deficiencies in data collection and recording.
- Develop policies and procedures for all participating agencies in accordance with applicable HUD legislation. The HMIS Lead Agency will assist all participating agencies that have access to protected identifying information to implement procedures and policies that ensure compliance with applicable agreements, and will monitor compliance and work with the CoC to enforce sanctions for non-compliance.
- Collaborate with the CoC in all appropriate ways to ensure that the policy goals developed by the CoC are met. In particular, the President of the CoC and the HMIS Lead System Administrator will work together closely to share information, develop goals and address issues with ServicePoint™, data quality and participating agencies as they occur.



- Collaborate with the LSND C to annually review and, as necessary, revise statewide Standard Operating Procedures and any future regulatory documents set forth by HUD and the LSND C to ensure compliance with all HUD regulations, notices and other communications related to these topics. The HMIS Lead Agency must work with the LSND C to create such documents for presentation to the CoC within 6 months after the effective date of any HUD final rule establishing requirements for them. The HMIS Lead Agency will also seek and provide feedback from the CoC and the participating agencies to the LSND C on these topics.
- Communicate these regulatory documents to all participating agencies and ensure that those agencies comply with them. The HMIS Lead Agency will submit such documents to the CoC for approval within 6 months after the effective date of any HUD final rule establishing requirements for them and/or any change is made to the local HMIS. The HMIS Lead Agency must implement such documents within 6 months of the date of approval by the CoC.
- Monitor and verify the quality of the data entered into the HMIS system, ensuring that the data is accurate, complete and conforms to federal HMIS requirements. The HMIS Lead Agency shall analyze the data to identify areas of concern and/or weakness and make recommendations to the participating agency for corrections. As well, the Regional HMIS Lead Agency will monitor the participating agencies for compliance with all appropriate security, privacy and data quality policies, regulations and procedures.
- Generate appropriate reports that reflect the cumulative data for the CoC as needed and/or upon request from the CoC, HUD, participating agencies, and other entities seeking this information as deemed appropriate by the HMIS Lead Agency and/or the CoC. The HMIS Lead Agency shall also be responsible for creating and developing new reports as requested and/or required by the CoC, HUD, and participating agencies. These reports shall document collective data from the entire CoC in such a way as to provide the requested information for such purposes as the CoC Program grant applications, PIT, HIC and AHAR reports, along with any other continuum-wide programs.


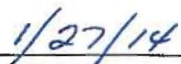
#### RESPONSIBILITIES OF PARTICIPATING AGENCIES:

The participating agencies are responsible for:


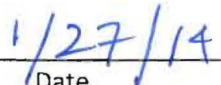
- Complying with all HMIS Policies and Procedures approved by the NHC CoC, and all appropriate federal regulations regarding HMIS.
- Complying with all federal, state and local laws regarding client and data privacy, security and confidentiality concerns. Should there be a conflict between such standards and other federal, state or local laws which the participating agency is required to obey, the participating agency must contact the HMIS Lead System Administrator for direction and to appropriately revise/adjust the impacted LSND C regulatory document.
- Providing reports to the CoC Standards Committee for measurement against established benchmarks.
- Working with the HMIS Lead Agency staff to maintain complete and correct data in the ServicePoint™ system.

IN WITNESS THEREOF, the parties hereto have acknowledged their responsibilities and have caused this agreement to be executed and delivered by their duly authorized representatives as of the date of last signature.

**Continuum of Care Lead Organization: Northlake Homeless Coalition**

Dee Wild	Co-Chair
_____ Name of Authorized Representative	_____ Title
	
_____ Signature of Authorized Representative	_____ Date

**HMIS Lead Agency : Northlake HMIS Data Project, Southeastern Louisiana University**

Erin Matheny	Director
_____ Name of Authorized Representative	_____ Title
	
_____ Signature of Authorized Representative	_____ Date

LA-506 CoC PROJECTS ORDERED BY COMPOSITE SCORE (Highest to Lowest)						
Code	Grantee Name	Project Name	Composite Score	Project Type	GIW ARD	Adjusted Budget
J	Volunteers of America of Greater New Orleans	Gimme Shelta-Scattered Permanent Housing (6040)	93.67%	PSH	\$203,774.00	\$196,471.00
P	Volunteers of America of Greater New Orleans	Project CH TWSH (7190)	92.00%	PSH	\$88,148.00	\$88,148.00
Q	Volunteers of America of Greater New Orleans	Supportive Housing Program, Supportive Services (7720)	87.00%	SSO	\$50,952.00	\$50,952.00
N	Volunteers of America of Greater New Orleans	Northshore Permanent Housing for Disabled Individuals (7150)	86.67%	PSH	\$333,375.00	\$333,375.00
D	NAMI St. Tammany	Supportive Housing - Permanent Housing (HBApts)	83.67%	PSH	\$82,292.00	\$78,880.00
K	Volunteers of America of Greater New Orleans	Project ROK (6070)	83.67%	SSO	\$45,188.00	\$45,188.00
L	Volunteers of America of Greater New Orleans	Permanent Supportive Housing for Homeless Persons with Disabilities (7000)	81.67%	PSH	\$115,653.00	\$115,653.00
G	Southeast Spouse Abuse Program	Transitional Housing & Services for Domestic Violence Survivors	81.25%	TH	\$150,818.00	\$150,818.00
M	Volunteers of America of Greater New Orleans	Permanent Housing for the Homeless with Disabilities (7050)	79.67%	PSH	\$166,369.00	\$166,369.00
H	Southeast Spouse Abuse Program	Transitional Housing Expanded	77.91%	TH	\$89,655.00	\$87,977.00
O	Volunteers of America of Greater New Orleans, Inc	Project PHVA (7170)	76.67%	PSH	\$42,871.00	\$42,871.00
C	NAMI St. Tammany	Supportive Housing-Permanent Group Home (HBGH)	76.00%	PSH	\$170,342.00	\$170,342.00
E	NAMI St. Tammany	Supportive Housing-Transitional Housing (WWGH)	64.67%	TH	\$166,522.00	\$166,522.00
A	St. Tammany Parish Government	Supportive Housing Transitional Housing Program	61.00%	TH	\$96,205.00	\$95,533.00
I	Southeastern Louisiana University	Northlake HMIS Data Project	60.41%	HMIS	\$150,930.00	\$149,877.00
F	NAMI St. Tammany	supportive Housing Transitional Expansion (WWGH-Exp)	59.67%	TH	\$69,734.00	\$69,734.00
B	Hammond Housing Authority	Successful Transitions Program	51.00%	TH	\$184,325.00	\$183,038.00
N/A	Northlake Homeless Coalition	NHC Planning Grant	N/A	CoC	\$28,641.00	\$28,642.00
MEAN SCORE			68.24%		\$2,235,794.00	\$2,220,390.00

Rank
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GIW ARD for CoC	\$2,337,252.00
ARD less 5% for CoC	\$2,220,389.00

Funds available in Tier 1	\$2,220,389.00
Funds available in Tier 2	\$116,863.00

**Louisiana Services Network Data Consortium  
Policies and Standard Operating Procedures  
Version 1.2**

Louisiana Services Network Data Consortium

Effective Date  
May 3, 2013

**Louisiana Services Network Data Consortium  
Policies and Standard Operating Procedures  
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## **Louisiana Services Network Data Consortium Policies and Standard Operating Procedures**

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This document details the policies and standard operating procedures that govern the operation of the Louisiana Services Network Data Consortium Management Information System (LSNDC System). It defines the roles and responsibilities of the LSNDC System Administrators, agencies and individuals accessing LSNDC System data. It includes important information on the way the LSNDC System data is secured and protected. All individuals accessing the LSNDC System must read and understand these Standard Operating Procedures.

## **INTRODUCTION**

This document details the policies and standard operating procedures that govern the operation of the Louisiana Services Network Data Consortium Management Information System (LSNDC System). It defines the roles and responsibilities of the LSNDC System Administrators, agencies and individuals accessing LSNDC System data. It includes important information on the way the LSNDC System data is secured and protected. All individuals accessing the LSNDC System must read and understand these Standard Operating Procedures.

LSNDC System is administered by the Louisiana Services Network Data Consortium, a non-profit corporation acting in the behalf of the LSNDC Board. The LSNDC Board is comprised of regional Homeless Management Information System administrative agencies and nine regional Continua of Care that are under contract with the U.S Department of Housing and Urban Development (HUD) to provide homeless services. The central server is administered by the contracted HMIS software vendor, and the LSNDC administers licensing, training, and compliance.

The primary purpose of the LSNDC System is to provide a client and service data management tool to aid the regional Continua of Care to end homelessness in Louisiana and meet HUD requirements for CoCs to provide an unduplicated demographic report of the number and characteristics of clients served as well as program outcomes. This tool is Internet-based technology to assist homeless service organizations across Louisiana in capturing information about the clients that they serve.

The LSNDC System provides a standardized assessment of consumer needs creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating agencies, identify gaps in the local service continuum, and develop outcome measurements.



## Benefits of LSNDC System

### **LSNDC System benefits homeless men, women, and children:**

Improvements in service delivery for clients as case managers assess the client's needs, inform the client about available services on site or through referral, help the client find and keep permanent housing, and improve service coordination when information is shared between programs within one agency that are serving the same client.

### **LSNDC System benefits agencies, program managers and case managers:**

Aggregate program-level and agency-level information and reports should be accessible to agencies and program managers to provide a more complete understanding of clients' needs and outcomes, advocate for additional resources, complete grant applications, conduct evaluations of program services and staff performance, and report to funders. Minimally, the software should be able to generate the program portions of the HUD Annual Progress Report (APR).

### **LSNDC System benefits the regional Continuum of Care:**

Unduplicated, de-identified, system-wide information should be readily accessible to provide a more complete understanding of homelessness, clients' needs and outcomes, and program and system-level performance to inform policy decisions aimed at addressing and ending homelessness at local, state and federal levels. The software should also be able to generate data and/or reports to fulfill Federal Annual Homeless Assessment Report (AHAR), Continuum application requirements, and city-wide and system-level funding reports.

## Definitions

**Many of the terms used in this Policies and Standard Operating Procedures Manual may be new to many users. Definitions of some of these terms are as follows:**

**Agency Administrator:** The person responsible for system administration at the agency level. This person is responsible for adding and deleting users, basic troubleshooting, and organizational contact with the Regional LSNDC System Administrator.

**Authentication:** The process of identifying a user in order to grant access to a system or resource; usually based on a username and password.

**Authorized Agency:** Any agency, organization or group who has an LSNDC Agency Agreement with the Regional LSNDC System Administrator and that is allowed access to the LSNDC database.

**Bowman Systems:** Also known as Bowman. The company that wrote the software used for the LSNDC, Bowman Systems, also houses and maintains the server owned by the LSNDC that holds our HMIS database.

**Client:** Any recipient of services offered by a Provider or Authorized Agency.

**Client-level Data:** Data collected or maintained about a specific person. This type of data can be de-identified for purposes of data analysis, which means that personally identifying information is removed from the record.

**Database:** An electronic system for organizing data so it can easily be searched and retrieved; usually organized by fields and records.

**De-identified Data:** Data that has been stripped of personally identifying information.

**Encryption:** Translation of data from plain text to a coded format. Only those with the “key” have the ability to correctly read the data. Encryption is used to protect data as it moves over the internet and at the database level through the use of special software.

**Fiscal Agency:** The agency chosen by the LSNDC governing board to manage the financial aspects of the corporation, including the general ledger, accounts payable, and accounts receivable. The Agency shall follow fiscal policies established by general accounting principles.

**Firewall:** A method of controlling access to a private network, to provide security of data. Firewalls can use software, hardware, or a combination of both to control access.

**HMIS:** Homeless Management Information System. This is a generic term for any system used to manage data about homelessness and housing. The HMIS used in Louisiana is called the LSNDC System.

**HUD HMIS Data and Technical Standards (the Standards):** The most recent HUD Standards published for Continuum of Care to systematically collect and report data for projects funded under Title IV of the McKinney-Vento Homeless Assistance Act. The current Standards were published in the July 30, 2004 Federal Register, Vol. 69, No. 146, pp. 45888 through 45934, with revisions released by HUD in March 2010. These standards fall into three categories: a) data elements required to be collected by HMIS users including “universal” and “program specific” data elements; b) Privacy and Security Standards for data confidentiality; and c) Technical Standards for the creation of HMIS data systems. Whenever the Standards are revised, this definition will reflect the most recently adopted revisions, and a change to the LSNDC policies is not required.

**Identifying Information:** Information that is unique to an individual and that may be used to identify a specific person. Examples of identifying information are name and social security number.

**LSNDC:** The non-profit 501c3 that operates the LSNDC System.

**LSNDC System:** The software system as well as the information input, generated or acquired in print or machine readable format.

**Module:** The ServicePoint software has several sections that focus on different types of functions related to HMIS. These sections, known as “modules,” include ClientPoint (for entering client data), ResourcePoint (for looking up homeless services), and ShelterPoint (for checking clients in and out of beds). Modules may be added to the LSNDC as needed in the future.

**Provider:** ANY organization providing outreach, shelter, housing, employment and/or social services.

**Regional LSNDC Lead Agency:** Manages the LSNDC for their respective regional Continua of Care

**Regional LSNDC System Administrator:** The job title of the person at the regional HMIS administrating agency who provides technical support and training to Users. This person has the second highest level of user access in *ServicePoint* and has full access to all user and administrative functions within the respective region.

**Server:** A computer on a network that manages resources for use by other computers in the network. For example, a file server stores files that other computers (with appropriate permissions) can access. One file server can “serve” many files to many client computers. A database server stores a data file and performs database queries for client computers.

***ServicePoint*™:** A web-based software package developed by Bowman Systems which tracks data about people in housing crisis in order to determine individual needs and provide aggregate data for reporting and planning.

**State LSNDC System Administrator:** The job title of the person who is responsible for the coordination and administration of the LSNDC System. This person has the highest level of user access in *ServicePoint* and has full access to all user and administrative functions across the State.

**User:** An individual who uses a particular software package; in the case of the LSNDC, the *ServicePoint* software.

**User License:** An agreement with a software company that allows an individual to use the product. In the case of *ServicePoint*, user licenses are agreements between the Fiscal Agency and Bowman Systems that govern the distribution of regional licenses for individual connections to the LSNDC. User licenses cannot be shared.

**Policy 1.0 Organization and Management of the LSNDC System**

Responsible: LSNDC Board  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

**Scope**

This policy establishes requirements for the LSNDC Board regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

**Policy Statement**

The LSNDC Board is comprised of regional HMIS administrative agencies and nine regional Continua of Care that are under contract with the U.S Department of Housing and Urban Development (HUD) and shall establish guidelines and operating policies for the LSNDC System to comply with federal regulation and guidance provided through the Department of Housing and Urban Development. These Policies and Standard Operating Procedures will be made available to all participating agencies, and a system of review will be established to ensure ongoing viability and responsiveness of policies to the project's environment.

**Policy 1.1 LSNDC Board**

Responsible: LSNDC Board  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

**Scope**

This policy establishes requirements for the LSNDC Board regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

**Policy Statement**

The LSNDC Board is the governing body in control of the statewide HMIS system and has sole responsibility for the following programmatic areas: fundraising and resource development; consumer involvement; and quality assurance/accountability. The Board meets at least bi-monthly with one annual meeting. The Board is the final decision making authority of the LSNDC.

Membership of the LSNDC Board will be established according to the following guidelines:

- Target for membership will be 18 persons, with two designated representatives each from Regions II – IX and two representatives for Region I and X combined; advisory seats will be named as needed;
- There will be a concerted effort to find replacement representatives when participation has been inactive or inconsistent from the organizations involved in the project.

Roles and responsibilities of the Board include, but are not limited to:

- Determining the guiding principles that should underlie the implementation activities of the LSNDC, participating organizations and service programs;
- Selecting the minimal data elements to be collected by all programs participating in the LSNDC and adopting the Data Quality Plan for ensuring participation compliance;
- Defining criteria, standards, and parameters for the release of aggregate data;
- Ensuring adequate privacy protection provisions in project implementation;
- Administer fees for usage of the statewide HMIS system;
- Selecting state administrators of the HMIS System; and

- Selecting and contracting with an HMIS software vendor

### **Policy 1.2 Fiscal Management**

Responsible: LSND Board

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: May 3, 2013

#### **Scope**

This policy establishes requirements for the Governing Board regarding financial management of the corporation.

#### **Policy Statement**

The LSND Board has fiduciary responsibility for the corporation. All financial activities will be documented through General Accounting Principles and comply with financial regulatory requirements as applicable. In relation to fiscal management, the Board is the final decision making authority of the LSND.

The LSND Board shall adopt a budget; continuously review the operation of that budget and recommend appropriate changes therein during the fiscal year; supervise the financial operations of the corporation; make investment decisions; have the power to authorize the investment from time to time of the monies or other liquid assets of the Corporation and to authorize the sale of any such investments; and examine the report of the independent public accountants auditing the Corporation's accounts or the Fiscal Agency's accounts.

The LSND Board has the authority to contract with a fiscal agency to perform the day to day financial activities of the corporation. The Fiscal Agency will be required to follow the equivalent financial guidelines as the corporation and must be audited annually by an independent public accountant.

The Treasurer of the Board will ensure compliance of all financial policy and procedures and has the following responsibilities:

- have custody of the funds and securities of the Corporation;
- shall see to the deposit of all monies and securities to the credit of the Corporation in such depositories as may be designated by the Board of Directors and shall keep full and accurate accounts thereof and of all other financial matters of the Corporation;
- shall render a full report of transactions conducted as Treasurer whenever required by the Board of Directors and the books and accounts of the Treasurer shall at all times be open to the Board of Directors and to such persons as such Board may designate to inspect the same.

### **Policy 1.3 State LSND System Administrator**

Responsible: Fiscal Agency

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: May 3, 2013

#### **Scope**

This policy establishes requirements for the State LSND System Administrator regarding access and usage of the LSND System as well as the responsibilities for stewardship of the LSND System.

#### **Policy Statement**

The LSND Board will contract to provide for State LSND System Administrator services. The State Administrator(s) will be responsible for the management and supervision of the LSND HMIS Statewide System. In the absence of the State LSND

System Administrator(s), the LSND C Board President and/or the Executive Committee will designate a back-up staff person, until a new State Administrator is determined. The State LSND C System Administrator(s) is governed by these Policies and Standard Operating Procedures.

The State LSND C System Administrator is responsible for the following:

- Manage the day-to-day operations of the LSND C System.
- Respond to all system-wide questions and issues;
- Provide quality assurance reports to the LSND C Board;
- Build Agency Assessments upon written request from Regional LSND C System Administrators;
- Issue Regional User Licenses to Regional LSND C System Administrator;
- Provide support to Regional LSND C System Administrators upon request;
- Manage version controls;
- Report regional data quality issues to Regional LSND C System Administrator to ensure timely correction and support; and
- Manage password recovery to Regional LSND C System Administrator.

<b>Policy 1.4 Regional Lead Agency Operating LSND C Locally</b>	
Responsible: Regional Continua of Care	Effective Date: April 17, 2008
Authorized: LSND C Board	Last Revision: May 3, 2013

**Scope**

This policy establishes requirements for the Lead Agency regarding administration and management of the LSND C System locally.

**Policy Statement**

The Lead Agencies will be designated by the local Continuum of Care and will designate a Regional LSND C System Administrator to manage and operate the LSND C System locally. The Lead Agency will enter into a contractual agreement (Agency Agreement) with each Participating Agency.

Lead Agency is responsible for the following:

- Act as the fiduciary for the operation of LSND C System locally.
- House the System Administration.
- Guide the HMIS process locally.
- Convene/coordinate Community User Meetings and local group trainings upon request.
- Report database problems/successes to State LSND C System Administrator.
- Attend System Administration User Meetings to share and benefit from the lessons learned across the State.
- With the help of the State LSND C System Administrator, mine the database for continuum-wide numbers. The degree to which this activity occurs at a local level will be determined at the local level.

**Policy 1.5 Regional LSND System Administrator**

Responsible: Regional Continuum of Care

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: May 3, 2013

**Scope**

This policy establishes requirements for the Regional LSND System Administrator regarding access and usage of the LSND System as well as the responsibilities for stewardship of the LSND System.

**Policy Statement**

Each Continuum of Care must identify a Lead Agency to administer the LSND System locally and will designate a staff member as the local HMIS administrator to manage the LSND system locally. The local administrator will be the Regional LSND System Administrator and will have regional administrative access. All Regional LSND System Administrators have full access to all agency records within their Continuum, and may have access to other Continua when appropriate. Regional administrators have access levels as dictated by the user agreement

The Regional LSND System Administrator is responsible for the following:

- Manage the day-to-day operations of the LSND System in the respective region
- Train and support Participating Agencies in the use of LSND System
- Communicate all statewide and regional news to Agency Administrators
- Respond to all Agency Administrator questions and issues
- Provide quality assurance reports to the State LSND System Administrator
- Submit requests of building Agency Assessments in writing to the State LSND System Administrator
- Issue End User Licenses
- Provide support to HMIS End Users upon request
- Manage notification of upgrades and updates to Agency Administrators
- Monitor data quality
- Manage password recovery for LSND End Users
- Prepare formal reports for the local Continuum of Care
- Mine database to respond to authorized requests of information
- Sign Participating Agency Confidentiality Oaths as requested
- Sign and Understand the LSND EndUser Agreement
- Complete required trainings with regard to Privacy and System Use.
- Respond to questions from the assigned Agency Administers and provide on-site help as needed.

**Policy 1.6 Participating Agency**

Responsible: Regional LSND System Administrator

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for the Participating Agency regarding access and usage of the LSND System as well as the responsibilities for stewardship of the LSND System.

**Policy Statement**

Each Regional Continuum of Care shall identify and solicit the participation of human service providers who are necessary contributors to the LSNDC system. These are to include: emergency shelters, transitional housing programs, homeless outreach programs, permanent supportive housing providers, and homeless prevention programs.

In addition, each region may discretionally identify other service providers that could benefit from inclusion in the LSNDC system. Each Participating Agency will be accountable for adherence to the minimum data collection and technical standards set by the LSNDC System and the Regional Continuum of Care, where applicable, as detailed in the Standard Operating Procedures.

Before an agency can join the LSNDC System, an Agency Agreement with the Regional Continuum of Care must be signed and all policies and accompanying documentation must be adopted. The Participating Agency will be responsible for oversight of its own related confidentiality requirements and bears primary responsibility for oversight for all sharing of data it has collected via the LSNDC System.

<b>Policy 1.7 Agency Administrator</b>	
Responsible: Regional LSNDC System Administrator	Effective Date: April 17, 2008
Authorized: LSNDC Board	Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for the Agency Administrator regarding access and usage of the LSNDC System as well as the responsibilities for stewardship of the LSNDC System.

**Policy Statement**

Each Participating Agency must identify a staff member to be the LSNDC Agency Administrator. The LSNDC Agency Administrator is the single point of contact for communication purposes and is responsible for enforcing the data and security requirements under the Policy and Procedures. The Executive Director must submit in writing the name and contact information of the LSNDC Agency Administrator to the Regional LSNDC System Administrator. The Executive Director must notify the Regional LSNDC System Administrator of changes in personal in writing within one business day. If the LSNDC Agency Administrator does not have the capacity to fulfill the technical obligations of this role, arrangement can be made with the Regional LSNDC System Administrator prior to executing an Agency Agreement to ensure the Participating Agency is compliant with the data and security requirements of the LSNDC System.

The Agency Administrator is responsible for the following:

- Primary contact between the Participating Agency and the Regional LSNDC System Administrator
- Must have email, internet access, and a LSNDC User License
- Manages agency user licenses; adding and removing licensed users for their agency, at the discretion of the Regional CoC
- LSNDC System access must be revoked immediately upon termination from agency, placement on disciplinary probation, or upon any change in duties not necessitating access to LSNDC System information. All changes must be relayed in writing to the Regional LSNDC System Administrator
- Must be technically proficient with a web-based MIS since he/she will be responsible for maintaining the Authorized Agency's LSNDC System site



- Has access to all client data, user data and agency administration information for the Authorized Agency; thus is responsible for the quality and accuracy of these data
- Ensures the stability of the agency connection to the Internet and *ServicePoint*, either directly or in communication with other technical professionals
- Provides support for the generation of agency reports
- Monitors and enforces compliance with standards of client confidentiality and ethical data collection, entry, and retrieval at the agency level

#### **Policy 1.8 LSND User**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements for the LSND User regarding access and usage of the LSND System as well as the responsibilities for stewardship of the LSND System.

##### **Policy Statement**

All LSND Users will have access to LSND data that is appropriate to the duties of their position so that client and service information can be recorded and accessed on a “need to know” basis. Multiple access levels are available allowing for more or less restrictive access to client data. Each Agency Administrator and/or Executive Director shall select an appropriate level of access for each LSND User licensed issue. LSND User Licenses are described in the User Level Attachment. Each User will complete a training course and sign the User Agreement prior to gaining access to the LSND System through the issuance of a license.

The User is responsible for the following:

- Adhering to all LSND policies as detailed in the User Agreement
- Securing his/her log-in information so that it will not be shared with another, including administrators or other staff
- Disclosing LSND participation and data usage to all clients prior to collection and entry
- Entering and updating client data in a “timely” manner

#### **Policy 1.9 System Availability**

Responsible: State LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements for providing availability of database server and notification in advance of any disruption of server availability.

##### **Policy Statement**

All LSND Users will retain uninterrupted access to the LSND System, with the exception of scheduled system maintenance. Notification of database unavailability will be posted to the “Newsflash” of the LSND System and sent to all users via e-mail no less than one week prior to the disruption.

#### **Policy 1.10 Ethical Data Usage**

Responsible: Participating Agency  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes the baseline ethics for LSNDNC data usage by anyone accessing the LSNDNC System.

**Policy Statement**

Data contained in the LSNDNC System is intended to be used to support or report on the delivery of homeless and housing services in the State of Louisiana. Each LSNDNC User will affirm the principles of ethical data use and client confidentiality contained in the LSNDNC Policies and Standard Operating Procedures Manual and the LSNDNC User Agreement. Each Authorized Agency must have a written privacy policy that includes policies related to employee misconduct or violation of client confidentiality. All LSNDNC Users must understand their Agency's privacy policy, and a LSNDNC User Agreement must become a permanent part of the employee's personnel file.

The data collected in the LSNDNC System is primarily the personal information of people in Louisiana who are experiencing a housing crisis. It is the user's responsibility as the guardian of that data to ensure that it is only used to the ends to which it was collected and in and the manner to which the individual client has given consent.

All users will sign an LSNDNC User Agreement before being given access to the LSNDNC System. Any individual or Authorized Agency misusing, or attempting to misuse LSNDNC data will be denied access to the database, and his/her/its relationship to the LSNDNC System may be terminated.

**Policy 1.11 Inter-Agency Data Sharing**

Responsible: Participating Agency  
Authorized: LSNDNC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for any client data sharing from the Participating Agency inputting and releasing data to any other Participating Agency accessing the LSNDNC System.

**Policy Statement**

Electronic data sharing varies between regions. The need for client confidentiality and the benefit of integrated case management should be balanced when discussing inter-agency data sharing. During the development of the statewide HMIS, the nine regions decided independently on the data sharing standards. Eight of the nine regions favor electronic data sharing within the LSNDNC for the benefit of interagency case management. One region favors client confidentiality at the Participating Agency level. The inter-agency data sharing policy for the nine regions are as follows:

Regions II-IX share first name, last name, social security number and social security data quality fields of all clients entered into the LSNDNC System with exception to domestic violence service agency and clients that explicitly refuse to be entered into the LSNDNC System. All client data beyond these four fields may be shared if and only if the client signs a Release of Information with the exception of medical information and domestic violence information.

Regions I and X do NOT share any client data between Participating Agencies, although data sharing may occur across different programs operated within and by a single Participating Agency (depending on how each agency has chosen to set up their security settings). The data included in the Profile section of a client record will remain CLOSED.

**Policy 1.12 Support**

Responsible: Regional LSNDC System Administrator

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements of technical support for the LSNDC software application.

**Policy Statement**

The Regional LSNDC System Administrator shall provide ongoing support to the Participating Agency through training on the system and ongoing telephone Help Desk functions. Support will be established regionally at the Continuum of Care level. The Regional LSNDC System Administrator will acknowledge the receipt of inquiries in a timely manner. The Regional LSNDC System Administrator will provide electronic access to documentation and manuals regarding the use of the LSNDC System. The LSNDC System also contains an on-line Help file for user support.

Support will include the Regional LSNDC System Administrator verification that the network server and the LSNDC System are functioning correctly. Participating agencies are responsible for maintenance of their computer hardware and internet connectivity. The Regional LSNDC System Administrator will assist agency staff with questions that arise during the use of the LSNDC System. Participating agencies should contact the Regional LSNDC System Administrator with questions or problems that appear to be related to errors in the LSNDC System. The Regional LSNDC System Administrator may pass a description of the problem and an agency contact name to the Bowman Systems Technical Support. At the written request of participating agencies, the Regional LSNDC System Administrator will assist in the consolidation and deletion of duplicate client records.

**Policy 2.0 Requirements for Agency Participation**

Responsible: Regional LSNDC System Administrator

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for the Participating Agency and User to obtain authorization to access and use the LSNDC System.

**Policy Statement**

The Regional LSNDC System Administrator will ensure that anyone accessing the LSNDC System has met the following standards:

- The agency requesting to participate in the LSNDC has signed a Participating Agency Agreement and the agreement will be on file at the Regional LSNDC System Administrator agency. The agency accessing the LSNDC system shall ensure that measures have been taken to secure the physical location used for data entry. A computer that has the LSNDC System "open and running" shall never be arranged so that unauthorized individuals may see the information on the screen.
- The User requesting access to the system has been given written permission from the Agency Administrator to access the system.
- The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.

- The User will be assigned a user name and password once they have successfully participated in HMIS Training.

#### **Policy 2.1 Participating Agency Agreement**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements for the Participating Agency Agreement.

##### **Policy Statement**

Only authorized Participating Agencies will be granted licenses to gain access to the LSND System. The Regional LSND System Administrator will make the sole determination to identify Participating Agencies. Participating Agencies ensure that all aspects of the Participating Agency Agreement are followed as specified.

- The agency requesting to participate in the LSND has signed a Participating Agency Agreement and the agreement will be on file at the Regional LSND System Administrator agency.
- The Participating Agency Agreement outlines responsibilities and duties of the LSND and the Participating Agency including requirements for all aspects of system access and use.
- The Participating Agency Agreements will include terms and duration of access, an acknowledgement of receipt of the Policies and Standard Operating Procedures Manual, and an agreement to abide by all provisions contained therein.

#### **Policy 2.2 User Licenses**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements for the Participating Agency and end user to obtain and utilize user licenses to gain access and use the LSND System.

##### **Policy Statement**

1. Regional LSND System Administrators determine the number of licenses required and available for each Participating Agency. If necessary, the Participating Agency may incur any additional costs for licenses through the LSND based upon the current quote from the system provider.
2. In order to obtain a license, a User must successfully complete an approved training program by the Regional LSND System Administrator.
3. Participating Agency licenses will be assigned by the Regional LSND System Administrator.
4. Sharing of licenses, User IDs or passwords is strictly prohibited.

#### **Policy 2.3 User Cost**

Responsible: Participating Agency  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes cost requirements by Participating Agencies to gain access and use the LSND System.

##### **Policy Statement**

1. Should it become necessary to incur shared costs by participating agencies, the Regional LSND System Administrator shall determine the per agency cost, in consultation with and after advance approval of *-Name of local Continuum of Care-* and participating agencies.
2. Costs shall be documented and itemized with an invoice sent to the Participating Agency directly from the Regional LSND System Administrator.
3. Payments shall be made payable to the *-Name of local Continuum of Care-* and due *-insert payment schedule-*.
4. Costs shall be designated as follows: \_\_\_\_\_ per month totaling \_\_\_\_\_ per year.

#### **Policy 2.4 User Activation**

Responsible: Regional LSND System Administrator

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: Jan. 22, 2010

#### **Scope**

This policy establishes requirements for the User activation to access and use the LSND System.

#### **Policy Statement**

1. The User requesting access to the system has been given written permission from the Agency Administrator to access the system through the submission of a LSND Account Request form to the Regional LSND System Administrator.
2. The User given access to the system will have read, understood, and provided a signed acknowledgment of receipt of Policies and Standard Operating Procedures Manual.
3. The User will be assigned a user name and password once they have successfully participated in Regional System Training.
4. Regional LSND System Administrators, or designated participating Agency Administrators, will distribute User licenses, adding and deleting Users as necessary.
5. Regional LSND System Administrators, or designated Participating Agency Administrators, will be responsible for training all new Users.
6. Regional LSND System Administrators may supplement training schedules through onsite visits.

#### **Policy 2.5 User Agreement**

Responsible: Participating Agency and User

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: Jan. 22, 2010

#### **Scope**

This policy establishes requirements for the User to obtain authorization to access and use the LSND.

#### **Policy Statement**

Users must sign a User Agreement with the LSND acknowledging full understanding and acceptance of the responsibilities and the proper use of the User ID and password of the LSND System. Only individuals who can view information in the LSND System are authorized users along with the Client to whom the information pertains

Failure to uphold the standards set forth in the User Agreement items listed below are grounds for immediate termination of User privileges.

1. User ID and Passwords must be physically secure and cannot be shared with anyone, including other staff members, supervisors or Executive Director.
2. Access to the LSND System is limited to User designated work and their location must meet all HUD HMIS Data and Technical Standards.
3. Users of the LSND System, whatever their work role, position, or location, may view, obtain, disclose, or use client data from the LSND System only as is necessary to perform their specific job.
4. Failure to log off the LSND System appropriately may result in a breach in client confidentiality and system security. Users must log-off of the LSND System before leaving the work area for any reason.
5. A computer that has the LSND System “open and running” shall never be arranged so that unauthorized individuals may see the information on the screen.
6. Users must not change the closed security on any Client’s signed LSND Client Release of Information. The LSND System security settings must always reflect the Client’s expressed wishes as documented through the LSND Client Release of Information.
7. User access is revoked immediately upon employment termination
8. Users are responsible to immediately notify the Regional LSND System Administrator at [enter contact number] in the event that any breach of confidentiality is witnessed.

<b>Policy 2.6 Hardware and Software Requirements and Maintenance</b>	
Responsible: Participating Agency	Effective Date: April 17, 2008
Authorized: LSND Board	Last Revision: May 3, 2013

**Scope**

This policy establishes hardware and software requirements for the Participating Agency to access and use the LSND.

**Policy Statement**

The Participating Agency shall maintain and secure the minimum required hardware, software and internet connectivity required in the Data Standards released by the Department of Housing and Urban Development. These minimum requirements include the following:

- Microsoft Operating System: Windows XP Professional
- Virus Protection Software: must automatically update and upgrade
- Anti-spy ware Software: must automatically update and upgrade
- Firewall: Can be software or hardware
- Internet Connectivity: must be DSL or higher
- PC: Pentium IV or higher
- PC Access: PC must be password protected with each user having a unique Login ID and Password

**Bandwidth Recommendations:**

The average user will need to sustain a 30-50 Kilobytes/Sec of download throughput to comfortably browse the LSND System. Internet Bandwidth Comparisons

- 56K Modem – Most users will achieve a connection between 26.4K – 46K depending upon the phone line quality. This will provide at least a 5.0 KB/S transfer rate which is low and not recommended for a single user.
- SDSL – 512Kbps/62.5KB/s. Allows eight users to concurrently browse LSND System or use the Internet.
- ADSL – 1.5-8Mbps/187.5KB/s-1MB/s. Allows 23 – 125 users concurrently to use LSND System or use the Internet. Distance limited to 18,000 feet.
- Cable – 1Mbps/122.1KB/s. Allows 15 users to concurrently use LSND System or the Internet.
- T1 – 1.544Mbps/188.5KB/s. Allows 23 users to concurrently use LSND System or the Internet.
- T3 – 44.763Mbps/5.461MB/s. Allows 682 users to concurrently use LSND System or the Internet.

#### **Policy 2.7 Training**

Responsible: Regional LSND System Administrator

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: May 3, 2013

##### **Scope**

This policy establishes requirements to train all authorized personnel gaining access and use of the LSND.

##### **Policy Statement**

1. The Regional LSND System Administrator shall provide training to authorized Participating Agency personnel on use of the LSND.
2. Where applicable, training may occur across Regional Continua of Care to allow for greater training capacity for Participating Agencies.
3. The Regional LSND System Administrator shall utilize standardized training materials and curriculum as defined by the LSND Board in order to ensure that training is consistent across all regions.
4. Upon completion of training, the Participating Agency personnel should reasonably understand how each module works.
5. Tests and certifications may be required by the Regional LSND System Administrator.

#### **Policy 2.8 Contract Termination**

Responsible: Regional LSND System Administrator

Effective Date: April 17, 2008

Authorized: LSND Board

Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements for the LSND to terminate a Participating Agency Agreement.

##### **Policy Statement**

The LSND may terminate the Participating Agency Agreement for non-compliance with the terms of the agreement or with the LSND Policies and Standard Operating Procedures with written notice to the Participating Agency. The LSND may also terminate the Participating Agency Agreement with or without cause with 15 days written notice to the Participating Agency and according to the terms specified in the Participating Agency Agreement. The termination of the Participating Agency Agreement may affect other contractual relationships with the local Continuum of Care or with funding agencies (HUD).

While the LSND C may terminate the Participating Agency Agreement with the Participating Agency, all data entered into the LSND C System will remain a part of the LSND C System. This is necessary for the database to provide accurate information over time and information that can be used to guide planning for community services in Louisiana. The termination of the Participating Agency Agreement may affect other contractual relationships with Continuum of Care or with funding agencies (HUD).

Many Participating Agencies are required to participate in the LSND C System as a condition of specific funding. When terminating the Agency Agreement, the Executive Director of the regional continuum of care will notify the person from the Participating Agency who signed the Agency Agreement (or a person in the same position within the agency) 15 days or more prior the date of termination of contract, unless the termination is due to non-compliance with the LSND C Policies and Standard Operating Procedures. Willful neglect or disregard of the LSND C Policies and Standard Operating Procedures may result in immediate termination of a Participating Agency from the LSND C System. The CoC Executive Director will also notify the Regional LSND C System Administrator. In all cases of termination of Participating Agency Agreements, the Regional LSND C System Administrator will inactivate all users from that Participating Agency on the date of termination of contract.

### **Policy 3.0 Security and Access**

Responsible: Regional LSND C System Administrator	Effective Date: April 17, 2008
Authorized: LSND C Board	Last Revision: Jan. 22, 2010

#### **Scope**

This policy establishes requirements for implementing and maintaining security and access to the LSND C.

#### **Policy Statement**

The State LSND C System Administrator, Regional LSND C System Administrators, and LSND C Participating Agencies will apply the user access privilege conventions set forth in the LSND C Policies and Standard Operating Procedures, Policy 2.5 Users Agreement and 3.8 User ID and Password.

### **Policy 3.1 Security of Data on File Server**

Responsible: Regional LSND C System Administrator	Effective Date: April 17, 2008
Authorized: LSND C Board	Last Revision: May 3, 2013

#### **Scope**

This policy establishes requirements to secure access to data on the Network Server and Bowman Systems.

#### **Policy Statement**

LSND C Board shall establish and maintain controls to keep secure all client data in the LSND C System. This shall prohibit access by individuals who are not registered with a Regional LSND C System Administrator, and therefore, are unauthorized to receive Participating Agency and client data information through any and all means, including telephone, mail, and computer. All registration and addition of Participating Agency staff to the LSND C System will be handled solely through the Regional LSND C System Administrator. The Regional LSND C System Administrator is responsible for assigning security codes and providing accessibility to the LSND C System to only those authorized individuals designated by the Executive Director of the Participating Agency. Regional LSND C System Administrator shall not be held liable for any breach in security related to any changes in authorized Participating Agency personnel if the Participating Agency has not notified the Regional LSND C System Administrator; notification must be



documented through e-mail, or postmarked through postal mail, within one business day of the personnel changes.

**Policy 3.2 Back Up of Data on File Server.**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

**Scope**

This policy establishes requirements to back up data to ensure continuity of access to data.

**Policy Statement**

The LSND Board shall contract with the software vendor to provide for the back-up of all information housed on the network server. Back up will be made each business day. The Fiscal Agency and Bowman Systems will provide documentation regarding back up procedures and disaster recovery.

**Policy 3.3 Updates/Upgrades to LSND**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements to update/upgrade the LSND System.

**Policy Statement**

The Regional LSND System Administrator shall notify the Participating Agency of all updates and/or upgrades to the LSND System through email to the Executive Director and posting notice in the "System Wide News" of the LSND System homepage. All updates and/or upgrades to will occur no sooner than one business day after the notice.

**Policy 3.4 Data on File Server**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements of data access upon termination of the Participating Agency entering data into the LSND System.

**Policy Statement**

Upon termination of the Agency Partner Agreement, and at the Participating Agency's request, the Regional LSND System Administrator may assist the Participating Agency with generating a final global report of their data within a reasonable time frame. Notwithstanding anything in the agreement to the contrary, the Regional LSND Lead Agency and agencies using the Louisiana Services Network Data Consortium System shall have the continuing right after the termination of this agreement to retain and use a copy of the Participating Agency's data which was shared during the course of this agreement in furtherance of the Louisiana Services Network Data Consortium System programs and subject to any restrictions on use imposed by the clients to whom such data pertains and/or set forth in the provision hereof which, by their terms, survive termination of the agreement.

**Policy 3.5 Data Collection**

Responsible: Participating Agency  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

**Scope**

This policy establishes the LSNDC adherence to data collection and data integrity requirements.

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**Policy Statement**

The Participating Agency shall enforce with their staff the importance, quality, and accuracy of entering all data into the LSNDC System, as required in the Department of Housing and Urban Development Data Standards. After training of agency staff by the Regional LSNDC System Administrator, the Participating Agency has the responsibility to implement and manage a system for entering client data; the Regional LSNDC System Administrator will provide assistance with project management if requested by the Participating Agency. The Participating Agency must ensure that all selected personnel are trained on these procedures and adhere to the regulations as stated in the LSNDC Data Quality Plan, Appendix B.

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**Policy 3.6 User Access**

Responsible: Regional LSNDC System Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

**Scope**

This policy establishes requirements to appropriately add users of the LSNDC System as well as designate system use restrictions.

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**Policy Statement**

User Access levels will be deemed by the Executive Director of the Partner Agency in consultation with the Regional LSNDC System Administrator. These levels should be reflective of the access a user has to client-level paper records and should be need-based. The Regional LSNDC System Administrator will generate usernames and passwords within the administrative function of the LSNDC System. User ID and Passwords are to be assigned to individuals who have passed the Regional LSNDC System training and who have understood and signed all appropriate LSNDC user agreements and related document.

Access to the software system will only be allowed from computers and networks meeting HUD Technical Standards and specifically identified by the Executive Director and Site Administrator of the Participating Agency. Access to the LSNDC System from unauthorized locations will be grounds for termination of the LSNDC user rights.

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**Policy 3.7 User Changes**

Responsible: Participating Site Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements to appropriately modify or delete users of the LSNDC System.

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**Policy Statement**

The Agency's Executive Director, or the employee's immediate supervisor, must notify the Regional LSNDC System Administrator of a user's termination from the agency, placement on disciplinary probation, or upon any change in duties not necessitating access to LSNDC System information within one business day of the occurrence. If a staff person is to go on leave for a period of longer than 45 days, their password should be inactivated within 24 hours of the start of their leave.

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**Policy 3.8 User ID and Passwords**

Responsible: Regional LSNDC System Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements to create and disseminate User IDs and passwords.

**Policy Statement**

Authorized users will be granted a unique user ID and password. Each user will be required to enter a User ID with a Password in order to logon to the system. User ID and Passwords are to be assigned to individuals. The User ID will be the first initial and full last name of the user. If a user has a first initial and last name that is identical to a user already in the system, the User ID will be the first initial and last name plus the numbers "01".

The initial, temporary password will be automatically generated by the LSND C System and will be issued to the User by the Regional LSND C System Administrator. These passwords may be communicated in written or verbal form only. After logging in to the system for the first time with the temporary password, the new password the User selects must be no less than eight and no more than sixteen characters in length and must include at least two numbers.

Forced Password Change will occur every forty-five days once a user account is issued. Passwords will expire and users will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.

**Policy 3.9 Password Recovery**

Responsible: Participating Agency Administrator

Effective Date: April 17, 2008

Authorized: LSND C Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements to reset create and communicate a new user password.

**Policy Statement**

If a User unsuccessfully attempts to log onto the system four times, the User ID will be "locked out," access permission will be revoked, and the User will be unable to gain access until their password is reset.

The reset password will be automatically generated by the LSND C System and will be issued to the User by the Regional LSND C System Administrator or Agency Administrator. These passwords will be communicated in written or verbal form.

**Policy 3.10 Use and Disposal of Exported Data**

Responsible: Participating Agency

Effective Date: February 3, 2012

Authorized: LSND C Board

Last Revision: February 3, 2012

**Scope**

This policy establishes requirements for the exported and disposal of exported LSND C System data.

**Policy Statement**

Users who have been granted access to the LSND C Report Writer or Advanced Reporting Tool (ART) have the ability to download and save client level data onto their local computer. Once this information has been downloaded from the LSND C server in raw format to an agency's computer, the data then become the responsibility of the agency. A participating Agency must develop a protocol regarding the handling of data downloaded from the Report Writer or ART tool.

The Participating Agencies shall establish internal extracted data protocols. Issues to be addressed include storage, transmission and disposal of the data.

**Policy 4.0 Data Collection, Quality Assurance and Reporting**

Responsible: Participating Agency  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes Participating Agency requirements for data collection, quality assurance and reporting in the LSNDC System.

**Policy Statement**

The State LSNDC System Administrator, Regional LSNDC System Administrators, and LSNDC Participating Agencies will apply the data collection, quality assurance and reporting standards set forth in the LSNDC Policies and Standard Operating Procedures.

**Policy 4.1 Appropriate Data Collection**

Responsible: Participating Agency  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes Participating Agency requirements for inputting data into the LSNDC System.

**Policy Statement**

The purpose of the LSNDC is to support the delivery of homeless and housing services in Louisiana. The database should only be used to collect or track information related to meeting the client's needs, the delivery of services and for policy development and planning purposes.

LSNDC users will only collect client data that is

- relevant to the delivery of services,
- required by funders, or
- mandated by law.

**Procedure**

Agency Administrators will ask the Regional LSNDC System Administrator for any necessary clarification of appropriate data collection. The State LSNDC System Administrator, in consultation with the Board of Directors, will make decisions about the appropriateness of data being entered into the database. LSNDC will periodically audit picklists and agency-specific fields to ensure the database is being used appropriately. This concern targets data elements that can be consistently tracked and reported, and does not specifically target the contents of case management notes or other fields not to be aggregated.

**Policy 4.2 Client Grievances**

Responsible: Participating Agency  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Dec. 15, 2011

**Scope**

This policy establishes Participating Agency requirements for managing client grievances related to the LSNDC System.

**Policy Statement**

Clients shall have the right to an independent, impartial review of any complaints they may have regarding LSNDC data collection, explanations offered for that collection, and policies surrounding the collection. They also have a right to know about this opportunity.

Agencies must make every good faith effort to assure that homeless clients are apprised of our obligation and their right. To that end each agency must adhere to the process for filing a formal grievance with the Regional LSNDC System Administrator should a client determine his LSNDC data privacy rights have been compromised by the Participating Agency.

### **Procedure**

Each Agency shall inform their clients of their LSNDC data privacy rights by prominently displaying the LSNDC Public Notice of Privacy wherever LSNDC data is collected, as well as making the LSNDC Privacy Notice available. In the event a client believes his LSNDC data privacy rights have been compromised by the Participating Agency, he should file a formal complaint by submitting a completed LSNDC Grievance Form with the Regional LSNDC System Administrator. It is the responsibility of the Agency to ensure that the grievance form is readily accessible to clients. The Regional LSNDC System Administrator will research the written grievance and determine if there was a violation of LSNDC data privacy rights. Should the Regional Administrator conclude that a breach has been made, he shall provide the Participating Agency with a timely plan of action for

### **Policy 4.3 Required Data Collection**

Responsible: Participating Agency  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: May 3, 2013

### **Scope**

This policy establishes Participating Agency data collection requirements to be entered into the LSNDC System.

### **Policy Statement**

Providers funded by HUD are required to participate in the LSNDC system to meet the HUD HMIS Data and Technical Standards. Other providers may choose to participate in the LSNDC. All Authorized Agencies that participate in the LSNDC are required to comply with HUD's HMIS Data and Technical Standards unless those standards are in conflict with local laws. This includes the collection of required data elements.

If client refuses or is unable to provide basic information, providers shall, at a minimum, enter each client as an Anonymous Entry into the LSNDC System. Authorized Agencies may choose to collect more client information for their own case management and planning purposes.

Timeliness of Data Entry: Quality assurance of timeliness is described in the LSNDC Data Quality Plane, Appendix B. All HMIS Participating programs will ensure entry/exits, services, and Universal Data Elements are completed within 5 business days of program entry/exits, with exceptions for emergency Shelters, outreach programs, and legacy data. LSNDC timeliness of data entry policy will not supersede more stringent CoC timeliness of data entry policies. Exceptions to these data collection policies are in place for organizations serving persons fleeing domestic violence; these organizations should request additional instruction from the Regional LSNDC System Administrator.

In order for the data contained within the LSNDC System to be useful for data analysis and reporting to funders, certain minimum data must be consistently collected throughout the system. In addition to the HUD required Data Elements, client level data is expected as well.

#### **Procedure**

All parties are subject to the LSNDC Data Quality Plan, Appendix B, for determining procedural applications of the data collection policies and monitoring practices.

#### **Policy 4.4 Client Informed Consent**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes Participating Agency requirement to obtain client informed consent prior to inputting data into the LSNDC System.

##### **Policy Statement**

Each agency must post a sign at each intake or comparable location and on its web site (if applicable) explaining the reasons for data collection for those seeking services. Consent for entering of data into the LSNDC System may be inferred when the proper privacy notice is posted and if the client accepts the services offered. The client has the option to opt out of allowing his or her identifying information to be added to the database. In that case, the client's data should be added to the LSNDC System without identifiers as described above, although the record should be tracked internally by the agency to minimize the number of duplicate records for one client. Electronic client data will be shared between agencies in accordance to the policies adopted by the LSNDC Board of Directors and negotiated between the regions. Client data may be shared through other means with written client consent or according to the privacy policy developed by the agency.

Privacy Policies should be in effect for each agency to both inform clients about the uses and disclosures of their personal data and to protect the agency by establishing standard practices for the use and disclosure of data. Each client must give permission for the disclosure and/or use of any client data outside of the privacy policy developed and posted by the agency. Client consent notices must contain enough detail so that the client may make an informed decision. Clients may withdraw permission to have their personal protected information in the LSNDC System, or may make a request to see copies of his or her client record.

#### **Procedure**

The Regions represented in the LSNDC System shall assume responsibility for monitoring their Agencies' compliance. The results and the means of determining them will be shared between Regions.

#### **Policy 4.5 Client Release of Information to Share Data**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes Participating Agency requirement to obtain client informed consent prior to sharing data in the LSNDC System.

##### **Policy Statement**

Each agency should include in its privacy policy that data collected by the agency is included in the LSNDC System as part of its administrative responsibility to its Continuum of Care and that aggregate, de-identified data may be used for analysis and reporting purposes. LSNDC will only report aggregate and/or de-identified data as part of its responsibilities, and agrees to maintain the data with the highest level of confidentiality and within the security guidelines set forth in this document.

**Policy 4.6 Data Ownership**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes the requirement and responsibilities connected to data ownership of data within the LSNDC System.

**Policy Statement**

The LSNDC System, and any and all data stored in the system, is the property of the LSNDC System. The LSNDC Board of Directors has authority over the creation, maintenance, and security of the LSNDC System. Violations of the LSNDC Agency Agreement, the LSNDC Policies and Standard Operating Procedures, the Privacy Policies, or other applicable laws may subject the Authorized Agency to discipline and/or termination of access to the LSNDC System.

In order to ensure the integrity and security of sensitive client confidential information and other data maintained in the database, LSNDC will be responsible for data ownership.

**Policy 4.7 Data Entry Shared Information**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes the requirement and responsibilities connected to sharing client profile information within the LSNDC System.

**Policy Statement**

From CoC to CoC, there are different policies about sharing information maintained in client records. The LSNDC System has a policy to allow First Name, Last Name, Social Security Number and Social Security Data Quality fields to be shared across providers and regions. Regional CoC may designate profile information as "CLOSED" in accordance to the policy set by the Regional CoC. In any case, a Release of Information form, signed by the client, must be kept on file and indicated in the LSNDC system.

In order to continue building our LSNDC System and the collaboration between CoC's, the Board is open to the differing needs and sensitivities of each CoC; however, we are supporting an OPEN system.

**Policy 4.8 Data Element Customization**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes the requirement for customization of data fields within the LSNDC System.

**Policy Statement**

Authorized Agencies may have fields available for agency-specific customization.

LSNDC System may include fields that can be customized on the Authorized Agency level to reflect the program-specific data collection needs of its programs. These fields are part of the LSNDC Software and are available at no additional cost. The State LSNDC System Administrator will have the ability to customize these fields.

Agency Administrators may request that their Regional LSNDC System Administrator customize the agency-specific fields.

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**Policy 4.9 Data Integrity**

Responsible: Participating Agency

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: May 3, 2013

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**Scope**

This policy establishes the requirement to ensure data integrity of the LSNDC System.

**Policy Statement**

LSNDC users will be responsible for the accuracy of their data entry. Authorized Agency leadership will be responsible for ensuring that data entry by users is being conducted in a timely manner and will also develop procedures to evaluate and increase the accuracy of the data entered.

The quality of LSNDC data is dependent on individual users to take responsibility for the accuracy and quality of their own data entry. The Regional LSNDC System Administrators shall work with Agency Executive Directors and/or Agency Administrators in assuming responsibility for and in the monitoring of data quality for their own region or agency. It is in the interest of agencies and the CoC's that all data collected have integrity since that data may be used for evaluation, reporting, monitoring, or funding purposes. In particular the data will impact funding opportunities during competitive SHP process. LSNDC emphasizes, analyzes, and reports on data quality as a service to member agencies. All parties are subject to standards as determined in the LSNDC Data Quality Plan, Appendix B.

**Procedure**

In order to test the integrity of the data contained in the LSNDC System, the State LSNDC System Administrator, in consultation with Regional LSNDC System Administrators, will devise regular data integrity checks for the LSNDC.

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**Policy 4.10 Monitoring and Evaluation**

Responsible: Regional LSNDC System Administrator

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

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**Scope**

This policy establishes the requirement for monitoring and evaluating the LSNDC System.

**Policy Statement**

Accurate and consistent data entry is essential to ensuring the usefulness of the LSNDC. Agencies will provide acceptable levels of timeliness and accuracy. Agencies without acceptable levels of data quality or timeliness may incur any sanctions permissible under the By-laws or negotiated by the Board and Regional CoCs until problems are addressed.



Data quality is an important aspect of the LSND System, and must be maintained at the agency level and by users of the system. The Regional LSND System Administrators will monitor data quality as part of their management functions.

#### **Procedure**

The State LSND System Administrator will work with Regional LSND System Administrators to develop and perform regular data integrity checks and will be required to report on a regular basis.

#### **Policy 4.11 On-Site Review**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

#### **Scope**

This policy establishes the requirement for an on-site review of the LSND System.

#### **Policy Statement**

Since the LSND is a statewide collaborative, annual review of each contracted agency will be the responsibility of the Regional LSND System Administrator, however the LSND Board of Directors will develop consistent procedures for the entire state.

Regular reviews enable the LSND to monitor compliance with the Standard Operating Procedures Manual and the LSND Agency Agreements. However, in the main, this review is more easily facilitated on the regional level with proper oversight.

#### **Procedure**

The exact procedures for on-site reviews will be determined by the LSND Board of Directors on an annual basis.

#### **Policy 4.12 Client Request for Data**

Responsible: Participating Agency  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

#### **Scope**

This policy establishes the requirement for managing a client's request for their LSND System data.

#### **Policy Statement**

Any client may request to view, or obtain a printed copy of his or her own records contained in the LSND System. The client will also have access to a logged audit trail of changes to those records. No client shall have access to another client's records in the LSND System.

The data in the LSND System is the personal information of the individual client. Each client has a right to know what information about him or her exists in the database, and to know who has added, changed or viewed this information, and when these events have occurred. This information should be made available to clients within a reasonable time frame of the request.

#### **Procedure**

A client may ask his/her case manager or other agency staff to see his or her own record. The case manager, or any available staff person with the LSND System access, will verify the client's identity and print all requested information. The case manager can also request a logged audit trail of the client's record from the Agency Administrator. The Agency Administrator will print this audit trail; give it to the case

manager, who will give it to the client. The client may request changes to the record, although the agency can follow applicable law regarding whether to change information based on the client's request. A log of all such requests and their outcomes should be kept on file in the client's record.

**Policy 4.13 Release of Data for Public Use**

Responsible: Participating Agency  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Oct 5, 2009

**Scope**

This policy establishes the requirement for managing public requests for LSNDC System data.

**Policy Statement**

Any requests for statewide reports or information from an individual or group who has not been explicitly granted access to the LSNDC System will be directed to the LSNDC Reporting Committee. The LSNDC will only address requests for statewide or cross-regional, where it is not otherwise available, data from entities other than Authorized Agencies or clients. Requests for regional data at the Continuum of Care level will be directed to the Regional LSNDC System Administrator. No individual client data will be provided to any group or individual that is neither the Authorized Agency that entered the data or the client him or herself without proper authorization or consent.

LSNDC will release routine aggregate reports for the larger community, which will address, but are not limited to, statewide descriptive and demographical statistics. In instances where the LSNDC is mandated contractually to provide HMIS data, reports will be provided for purposes of monitoring services delivery and/or program evaluation. The content of these reports will reflect a commitment to client confidentiality and ethical data use. No individual client data will be provided to meet these requests without proper authorization or consent as stated in the LSNDC's Privacy Policy

**Procedure**

As part of the mission to end homelessness in Louisiana, it is the LSNDC's policy to provide aggregate data on homelessness and housing issues in this area. LSNDC will also issue periodic routine public reports, which will be published and posted on the LSN's website, upon final approval of the LSNDC Board. No individually identifiable client data will be reported in any of these documents. Wherein the LSNDC is contractually obligated to provide de-identified data to funders for program monitoring and evaluation, the State LSNDC System Administrator shall prepare and submit reports to the appropriate bodies.

All requests for data from anyone other than an Agency or Regional LSNDC System Administrator or a client, which cannot be satisfied by either of the aforementioned conditions, will be directed to the LSNDC Reporting Committee for a recommendation to the Board. The Executive Committee may act on behalf of the Board to expedite urgent requests.

**Policy 5.0 Disaster/Emergency Policy**

Responsible: Regional LSNDC System Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for the use and response of the LSNDC Systems in the event of a disaster/emergency.

**Policy Statement**

The State LSND System Administrator, Regional LSND System Administrators, and LSND Participating Agencies will apply the Disaster/Emergency Policy set forth in the LSND Policies and Standard Operating Procedures in the event of a disaster/emergency.

**Policy 5.1 Emergency Procedures**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements for each Region to develop and maintain detailed procedures which will be activated in the event of a disaster/emergency.

**Policy Statement**

Every Regional LSND Lead Agency shall develop and maintain a Disaster/Emergency Procedures Manual which shall be activated when a disaster significant enough to cause widespread damage occurs or when an emergency significantly impacts the Regional LSND Lead Agency's services or client population. These procedures will include the following:

1. A detailed evacuation plan and checklist
2. A list of tasks to be taken before, during, or immediately following a disaster/emergency
3. a matrix of functional responsibilities in the acute phase of a disaster
4. An emergency operations roster
5. A list of key external contact phone numbers/email addresses (see Policy 5.3)
6. Staff report-in policies and procedures
7. A list of local, state, and federal emergency numbers
8. Contingency plan for moving agency operations to a non-affected location (see Policy 5.4)
9. A detailed Chain of Command/checklist of key duties which will be assigned to Regional staff following an disaster/emergency (see Policy 5.2)
10. An overall agency task list broken down by phases of a disaster (warning, response, relief, recovery, and mitigation)

The Manual shall contain detailed instructions for coordinating with other Regional LSND Lead Agencies and where, when and how to communicate with local, state, and federal emergency entities. Each Regional LSND System Administrator will share her/his Manual with the other Regional LSND Lead Agencies and will encourage Participating Agencies to develop a similar Disaster/Emergency Procedures Manual.

**Policy 5.2 Chain of Command**

Responsible: Regional LSND System Administrator  
Authorized: LSND Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements to plan and maintain a Chain of Command in the event of a disaster/emergency.

**Policy Statement**

Every Regional LSND Lead Agency shall develop and maintain a detailed Chain of Command (to be implemented within their Emergency Procedures Manual), which will

follow standard Incident Command System (ICS) language during the acute phase of a disaster. The Chain of Command will include the following Disaster/Emergency positions which will be assigned to Agency staff (and their alternates):

1. Emergency Manager
2. Planning Team Chief
3. Operations Team Chief
4. Logistics Team Chief
5. Finance Team Chief

A detailed checklist and duties description of each Disaster/Emergency position shall be maintained and implemented in the event of a disaster/emergency. All Regional Administrators' updated Chain of Command list should be submitted to the System Administrator.

#### **Policy 5.3 Communication**

Responsible: Regional LSNDC System Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements to plan and maintain a detailed communication flow in the event of a disaster/emergency.

##### **Policy Statement**

Every Regional LSNDC Lead Agency shall develop a detailed communication plan (to be implemented within their Emergency Procedures Manual). This plan will include an updated contact list of every Regional LSNDC Lead Agency staff member (including cell phone, alternate land line, and easily accessible email address). The communication plan may include a toll-free land line phone number which staff members could call to report in to their supervisor. Communication methods shall include alternate methods of communication, such as text messaging and website news/check-in. All Regional Administrators' updated contact information (relevant to the LA Statewide HMIS) shall be submitted to the State LSNDC System Administrator.

#### **Policy 5.4 System Continuity**

Responsible: Regional LSNDC System Administrator  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements of maintaining system-wide continuity of service before, during and following a disaster/emergency.

##### **Policy Statement**

Every Regional LSNDC Lead Agency shall develop and maintain an agency continuity plan (to be implemented within their Emergency Procedures Manual) in the event of a disaster/emergency. This plan may include signed MOUs with agencies in other Regions and should include specific details about when, how, and where the Regional office should move. All Regional Administrators' updated System Continuity Plans should be shared with the System Administrator.

#### **Policy 5.5 Privacy Policy within the LSNDC**

Responsible: Regional CoC Director  
Authorized: LSNDC Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

##### **Scope**

This policy establishes requirements of maintaining existing privacy standards and defines the procedure for sharing specific client data within the LSNDC in the event of a disaster/emergency.

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**Policy Statement**

All Regional LSNDC Lead Agency privacy policies concerning client information entered into the LSNDC shall remain enforced before, during and after an emergency/disaster. The regional Director (or Acting Director) of the affected CoC will make decisions regarding the appropriateness of regional client data shared during a disaster/emergency, strictly honoring all existing client confidentiality and Release of Information policies and documents but reserving the right to share specific confidential client data with another Regional LSNDC member agency if it is deemed that the sharing of such data is critical to the safety or health of the client. Any sharing of data outside of normal procedures must be signed off by the regional Director (or Acting Director) of the affected CoC, and the specific data sharing (specifically what data is shared and with whom) must be documented both electronically and physically.

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**Policy 5.6 Public Privacy Policy (Data Sharing with a Third Party)**

Responsible: Regional CoC Director

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements of maintaining existing privacy standards and defines the procedure for sharing specific client data with a Third Party in the event of a disaster/emergency.

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**Policy Statement**

All Regional LSNDC Lead Agency privacy policies concerning client information entered into the LSNDC shall remain enforced before, during and after an emergency/disaster. The regional Director (or acting Director) of the affected CoC will make decisions regarding the appropriateness of regional client data shared during a disaster/emergency, strictly honoring all existing client confidentiality and Release of Information policies and documents but reserving the right to extract and share disaster/emergency client data on an individual basis for life or death circumstances (e.g. information such as “where are they now, what is their mental/medical condition, what services are needed”). Any sharing of data outside of normal procedures must be signed off by the regional Director (or acting Director) of the affected CoC, and the specific data extraction must be documented both electronically and physically.

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**Policy 5.7 Data Entry**

Responsible: Regional LSNDC System Administrator

Effective Date: April 17, 2008

Authorized: LSNDC Board

Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements of data entry into the LSNDC in the event of a disaster/emergency.

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**Policy Statement**

In the event of a disaster/emergency that affects one or more Regions in the state, the LSNDC could potentially be utilized as a data interface/receptacle for relief and recovery Information & Referral services in addition to its standard roles. The Regional LSNDC System Administrator, in consultation with the Board of Directors and DTAP staff, will make decisions regarding the appropriateness of data being entered into the database during a disaster/emergency. The State LSNDC System Administrator or a Regional LSNDC System Administrator will ensure that all new users entering in such data will be

given appropriate security access so that no existing confidentiality policies are breached.

**Policy 5.8 Training**

Responsible: Regional LSND C System Administrator  
Authorized: LSND C Board

Effective Date: April 17, 2008  
Last Revision: Jan. 22, 2010

**Scope**

This policy establishes requirements of training new LSND C users in the event of a disaster/emergency.

**Policy Statement**

If the LSND C is temporarily utilized as a data interface/receptacle for Relief and Recovery Information & Referral during a disaster/emergency, a Regional LSND C System Administrator shall provide training to disaster/emergency personnel on the use of the LSND C. Upon completion of training, the new user should reasonably understand how each module works. All existing LSND C rules, procedures, policies and agreements still apply to the disaster/emergency user. The State LSND C System Administrator or a Regional LSND C System Administrator will ensure that all new users entering in disaster/emergency data will be given appropriate security access so that no existing confidentiality policies are breached.

## **Appendix A**

### **Louisiana Services Network Data Consortium (LSNDC) Board Membership**

Effective Date: May 3, 2013

#### REGION I AND X - New Orleans/Jefferson Parish CoC

Parishes: Orleans and Jefferson

Ms. Vicki Judice  
UNITY of Greater New Orleans  
2475 Canal Street, Suite 300  
New Orleans, LA 70119  
Phone: (504) 821-4496

Mr. Clifton Harris  
VIA LINK  
2820 Napoleon Avenue  
New Orleans, LA 70115  
Phone: (504) 897-4877

#### REGION II - Baton Rouge CoC

Parishes: Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, West Feliciana

Mr. Randy Nichols  
Capital Area Alliance for the Homeless  
5850 Florida Boulevard  
Baton Rouge, LA 70806  
Phone: (225) 201-0696

Mr. Corey Dyer  
Capital Area Alliance for the Homeless  
5850 Florida Boulevard  
Baton Rouge, LA 70806  
Phone: (225) 201-0696

#### REGION III - Houma-Terrebonne CoC

Parishes: Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, Terrebonne

Mr. Willie Green  
Gulf Coast Social Services, Inc.  
320 Progressive Boulevard  
Houma, LA 70360  
Phone: (985) 851-4488

Mr. Brooke Guidry  
Start Corporation  
420 Magnolia Street  
Houma, LA 70360  
Phone: (985) 879-3966

#### REGION IV - Lafayette/Acadiana CoC

Parishes: Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, St. Mary, Vermillion

Mr. Eric Gammons  
Acadiana Regional Coalition on  
Homelessness & Housing, Inc.  
P.O. Box 3936  
Lafayette, LA 70502  
Phone: (337) 235-4972

Mr. Andrew Zegura  
Acadiana Regional Coalition on  
Homelessness & Housing, Inc.  
P.O. Box 3936  
Lafayette, LA 70502  
Phone: (337) 235-4972

REGION V - Lake Charles/Southwestern Louisiana CoC

Parishes: Allen, Beauregard, Calcasieu, Cameron, Jefferson Davis

Tarek Polite  
Lake Charles/Southwest Louisiana Continuum of  
Care  
1011 Lakeshore Drive Suite #606  
Lake Charles, LA 70601  
Phone: (337)721-3550  
Fax: (337)437-3202

Mr. Randall Hebert  
Volunteer Center of Southwest Louisiana  
1023 Common Street  
Lake Charles, LA 70601  
Phone: (337) 439-6109

REGION VI - Alexandria/Central Louisiana CoC

Parishes: Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Vernon, Winn

Ms. Renee Brannon  
Vernon Community Action Council, Inc.  
1307 South Fifth Street  
Leesville, LA 71446  
Phone: (318) 443-0500

Ms. Kendra Gauthier  
Central Louisiana Homeless Coalition  
Post Office Box 1303  
Alexandria, LA 71309  
Phone: (318) 443-0500

REGION VII - Shreveport/Bossier/Northwest CoC

Parishes: Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River, Sabine, Webster

Ms. Christa Pazzaglia  
HOPE for the Homeless  
762 Austin Street  
Shreveport, LA 71101  
Phone: (318) 670-4591

Ms. Tosha Stamps  
HOPE for the Homeless  
762 Austin Street  
Shreveport, LA 71101  
Phone: (318) 670-4591

REGION VIII - Monroe/Northeast Louisiana CoC

Parishes: Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union,  
West Carroll

Ms. Lawana Brown  
The Wellspring Alliance  
1515 Jackson Street  
Monroe, LA 71202  
Phone: (318) 807-6200

Ms. Kattina Brittan  
The Wellspring Alliance  
1515 Jackson Street  
Monroe, LA 71202  
Phone: (318) 807-6200

REGION IX - Slidell/Livingston/Southeast Louisiana CoC

Parishes: Livingston, St. Helena, St. Tammany, Tangipahoa, Washington

Ms. Dee Wild  
Volunteers of America, GNO  
823 Carroll Street, Suite B  
Mandeville, LA 70448  
Phone: (985) 674-0488

Ms. Erin Matheny  
Northlake HMIS Data Project  
Southeastern Louisiana University  
SLU Box 10509  
Hammond, LA 70402  
Phone: (985) 549-5373



**Appendix B**

**Data Quality Plan**

Louisiana Service Network Data Consortium

November 2nd, 2012

Developed by:  
LSNDC Data Quality Committee

**Data Quality 1.0 Definition: Data Quality Plan**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDP Board

Last Revision: November 2<sup>nd</sup>, 2012

A data quality plan is a document that facilitates the ability of LSNDP to achieve statistically valid reliable data.

**Note:** This plan is subject to change to accommodate new standards released by HUD

The plan will:

- Identify the responsibilities of all parties within LSNDP that affect data quality
- Establish specific data quality benchmarks for timeliness, completeness, and accuracy
- Describe the procedures that the LSNDP will take to implement the plan and monitor progress to meet data quality benchmarks.

**Data Quality 1.1 Timeliness**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDP Board

Last Revision: November 2<sup>nd</sup>, 2012

All data shall be entered into the HMIS in a timely manner to ensure access to data when it is needed for reporting purposes. To that end, the following timeliness benchmark is set forth:

**General Standard:**

All HMIS participating programs will ensure entry/exits, services, and Universal Data Elements are completed within 5 business days of program entry/exit.

**Exceptions:**

1. *Emergency Shelters:* All HMIS Participating Emergency Shelter programs will ensure entry/exits, services, and Universal Data Elements are completed within 2 business days of initial contact.
2. *Outreach Programs:* All HMIS Participating Outreach Programs will ensure entry of limited basic demographics as provided by client and services within 5 business days of initial contact.
3. *Legacy Data:* There will be a grace period determined on a case by case basis for how quickly the data should be entered into the HMIS. Legacy Data is information stored in an old or obsolete format or computer system that is, therefore, difficult to access or process. This includes implementations running a previous version of ServicePoint.

**Data Quality 1.2 Completeness**

Responsible: Data Quality Committee  
Authorized: LSNDC Board

Effective Date: November 2<sup>nd</sup>, 2012  
Last Revision: November 2<sup>nd</sup>, 2012

Complete HMIS data is necessary to fully understand the demographic characteristics and service use of persons in the system. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness, such as:

- Unduplicated counts of clients served at the local level
- Patterns of use of people entering and exiting the homeless assistance system
- Evaluation of the effectiveness of homeless systems

**Data Quality 1.2.1 Completeness: Program Descriptor Data Elements**

Responsible: Data Quality Committee  
Authorized: LSNDC Board

Effective Date: November 2<sup>nd</sup>, 2012  
Last Revision: November 2<sup>nd</sup>, 2012

Program Descriptors include information about programs that are required for reporting purposes and enhance the HMIS as a tool for supporting information and referral services.

**General Standard:**

All Program Descriptor Data Elements are required as part of basic administrative setup of programs utilizing the LSNDC, no null/missing Program Descriptor Data Elements are allowed. The PDDE's should be entered no later than 5 days from the time the Provider is created in the LSNDC. They should also be reviewed annually and any changes should be recorded.

**Program Descriptor Data Elements:**

1. Organization Identifier
2. Organization Name
3. Program Identifier
4. Program Name
5. Direct Service Code
6. Site Information
7. Continuum of Care Number
8. Program Type Code
9. Bed and Unit Inventory Information (Residential Programs Only)
10. Target Population A(Optional)
11. Target Population B (Residential Programs Only)
12. Method for Tracking Residential Program Occupancy (Residential Programs Only)

### 13. Grantee Identifier (Required for HPRP Programs)

<b>Data Quality 1.2.2 Completeness: All Clients Served</b>
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Responsible: Data Quality Committee
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Effective Date: November 2 <sup>nd</sup> , 2012
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Authorized: LSND Board
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Last Revision: November 2 <sup>nd</sup> , 2012
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It is a HUD expectation that all clients receiving homeless assistance will have their service delivery documented in the HMIS.

#### **General Standard:**

All programs using the HMIS shall enter data on all clients in accordance with the newest relevant HMIS Data and Technical Standards.

Anonymous entry is not encouraged but allowed when necessary.

#### **Exceptions:**

1. Non-HUD Funded Programs are required to have a minimum of 80% of each Universal Data Element on all clients.
2. Homeless Service Providers whose primary target population is victims of domestic violence are currently collecting the data and providing non-identifiable data to the local CoC and are statutorily disallowed from entering client data into the HMIS.
3. If a client refuses to have information input into the HMIS the Homeless Service Provider is not held responsible.
4. When agencies host special events (For Example: Christmas Baskets, Christmas Tree Programs, Easter Baskets, etc.) they are not required to record information on all clients who participate in the event.

**Data Quality 1.2.3 Completeness: Universal Data Elements**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSND Board

Last Revision: November 2<sup>nd</sup>, 2012

Universal Data Elements are necessary to produce an unduplicated count of clients served, to provide accurate counts for various reporting requirements, including HUD CoC APR, QPR/APR, the AHAR, and other reporting requirements.

**General Standard:**

The acceptable percentage of Universal Data Elements with “null/missing” and “unknown/don’t know/refused” for all clients served in Supportive Housing Programs, Emergency Solutions Grant, and HOPWA is less than 5 percent. Please refer to the HMIS Revised Data Standards March 2010 for more detailed information on the UDE’s listed below.

**Exceptions:**

1. *Outreach Programs*: Capture and record initial contact and any other contacts along with UDE’s they are able to obtain.

**Universal Data Elements:**

1. Name
2. Social Security Number
3. Date of Birth
4. Race
5. Ethnicity
6. Gender
7. Veteran Status
8. Disabling Condition
9. Residence Prior to Program Entry/Length of Stay
10. Zip Code of Last Permanent Address
11. Housing Status
12. Program Entry Date
13. Program Exit Date
14. Personal Identification Number (System Generated)
15. Household Identification Number (System Generated)

**Data Quality 1.2.4 Completeness: Program Specific Data Elements**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDC Board

Last Revision: November 2<sup>nd</sup>, 2012

Program specific Data Elements are necessary to produce the HUD CoC APR, ESG QPR/APR, and to ensure the LSNDC has sufficient client data to conduct analysis on the extent and characteristics of the population they serve.

**General Standard:**

The acceptable percentage of Program Specific Data Elements with “null/missing” and “unknown/don’t know/refused” for all clients served by a Supportive Housing Program, Emergency Solutions Grant, and HOPWA is less than 5 percent. Please refer to the HMIS Revised Data Standards March 2010 for more detailed information on the PSDE’s listed below.

**Program-Specific Data Elements:**

1. Income and Sources
2. Non-Cash Benefits
3. Physical Disability
4. Developmental Disability
5. Chronic Health Condition
6. HIV/AIDS
7. Mental Health
8. Substance Abuse
9. Domestic Violence (Adult and Unaccompanied Youth)
10. Destination
11. Date of Contact(required for street outreach programs only; optional for other programs)
12. Date of Engagement(required for street outreach programs only; optional for other programs)
13. Financial Assistance Provided(required for HPRP-funded programs only; optional for all other programs)
14. Housing Relocation & Stabilization Services Provided (required for HPRP-funded programs only; optional for all other programs)

**Data Quality 1.2.5 Completeness: Optional Program Specific Data Elements**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDP Board

Last Revision: November 2<sup>nd</sup>, 2012

Optional Program Specific Data Elements are recommended by HMIS data research groups and are based on best practices being implemented at the local level. **They are optional.** Please refer to the HMIS Revised Data Standards March 2010 for more detailed information for the Optional PSDE's listed below.

**General Standard:**

These are optional data elements unless recommended by the Local CoC.

Optional Program Specific Data Elements:

1. Employment
2. Education
3. General Health Status
4. Pregnancy Status
5. Veteran's Information
6. Children's Education
7. Reason for Leaving
8. Services Provided

**Data Quality 1.3 Accuracy**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDP Board

Last Revision: November 2<sup>nd</sup>, 2012

The purpose of accuracy is to ensure that the data in the LSNDP HMIS is the best possible representation as it relates to clients and the programs that serve them.

**General Standard:**

All data entered into the LSNDP HMIS shall be a reflection of information provided by the client, as documented by the intake worker or otherwise updated by the client and documented for reference. Deliberately recording inaccurate information is strictly prohibited.

**Data Quality 1.3.1 Accuracy: Consistency**

Responsible: Data Quality Committee

Effective Date: November 2<sup>nd</sup>, 2012

Authorized: LSNDP Board

Last Revision: November 2<sup>nd</sup>, 2012

The purpose is to ensure that data is understood, collected, and entered consistently across all programs in the HMIS. Consistency directly affects the accuracy of data.

**General Standard:**

All data elements in the LSND C HMIS shall be collected and entered in a common and consistent manner across all programs.

**Data Quality 1.4 Monitoring**

Responsible: Data Quality Committee  
Authorized: LSND C Board

Effective Date: November 2<sup>nd</sup>, 2012  
Last Revision: November 2<sup>nd</sup>, 2012

The purpose of monitoring is to ensure that agencies are following the data quality standards agreed upon by LSND C and are meeting expected benchmarks as described by the data quality plan.

**General Standard:**

Data Elements will be monitored on a monthly basis to quickly identify and resolve issues that affect the timeliness, completeness, and accuracy of the client record.

**Data Quality 1.5 Incentives**

Responsible: Data Quality Committee  
Authorized: LSND C Board

Effective Date: November 2<sup>nd</sup>, 2012  
Last Revision: November 2<sup>nd</sup>, 2012

CoC's are encouraged to develop an incentive program to entice CoC Organizations to adhere to the data quality plan.

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**Acronyms**

- APR – Annual Performance Report
- CoC – Continuum of Care
- HMIS – Homeless Management Information System
- HOPWA – Housing Opportunities for Persons with AIDS
- HPRP – Homeless Prevention and Rapid Re-housing Program
- HUD – Housing and Urban Development
- LSND C – Louisiana Services Network Data Consortium
- PDDE – Program Descriptor Data Elements
- PSDE – Program Specific Data Element
- QPR – Quarterly Performance Report
- SRO – Single Room Occupancy
- UDE – Universal Data Element



Summary of Program Descriptor Data Elements				
Data Standards	Program Applicability	When collected		
		Assigned once	Assigned once; reviewed annually	At least annually or more frequently if inventory or coverage changes
1. Organization Identifier	All CoC Programs	x		
2. Organization Name	All CoC Programs		x	
3. Program Identifier	All CoC Programs	x		
4. Program Name	All CoC Programs		x	
5. Direct Service Code	All CoC Programs	x		
6. Site Information	All CoC Programs		x	
7. Continuum of Care Number	All CoC Programs		x	
8. Program Type Code	All CoC Programs		x	
9. Bed and Unit Inventory Information	Residential CoC Programs Only			x
10. Target Population A (Optional for all programs)	All CoC Programs		x	
11. Target Population B	Residential CoC Programs Only		x	
12. Method for Tracking Residential Program Occupancy	Residential CoC Programs Only		x	
13. Grantee Identifier	HPRP Programs Only		x	

Summary of Universal Data Elements							
Data Standards	Program Applicability	Subjects			When Collected		
		All Clients	All Adults	All Adults& Unaccompanied Youth	Initial Program Entry Only	Every Program Entry	Every Program Exit
1. Name <sup>1</sup>	All CoC Programs	x			x		
2. Social Security Number <sup>1</sup>	All CoC Programs	x			x		
3. Date of Birth <sup>1</sup>	All CoC Programs	x			x		
4. Race <sup>1</sup>	All CoC Programs	x			x		
5. Ethnicity <sup>1</sup>	All CoC Programs	x			x		
6. Gender <sup>1</sup>	All CoC Programs	x			x		
7. Veteran Status	All CoC Programs		x			x	
8. Disabling Condition	All CoC Programs	x				x	
9. Residence Prior to Program Entry and Length of Stay	All CoC Programs			x		x	
10. Zip Code of Last Permanent Address	All CoC Programs			x		x	
11. Housing Status	All CoC Programs	x				x	x (Optional for Emergency Shelter)
12. Program Entry Date	All CoC Programs	x				x	
13. Program Exit Date	All CoC Programs	x					x
14. Personal Identification Number	All CoC Programs	x			x		
15. Household Identification Number	All CoC Programs	x				x	
<sup>1</sup> Note that one or more of these personal identifiers may need to be asked on subsequent visits to find and retrieve the client's record. However, this information only needs to be recorded in HMIS on an initial program entry.							

Summary of Program-Specific Data Elements								
Data Standards	Program applicability	Subjects	When Collected					
			During Client Assessment Near Entry	At Least Once Every three Months During Program Enrollment <sup>2</sup>	At Least Once Annually During Program Enrollment <sup>3</sup>	Every Exit	Every Contact	Each Instance of Financial Assistance
<b>1. Income and Sources</b>	CoC/HUD Competitive Programs <sup>1</sup> HPRP Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>2. Non-Cash Benefits</b>	CoC/HUD Competitive Programs HPRP Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>3. Physical disability</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>4. Developmental Disability</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>5. Chronic Health Condition</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>6. HIV/AIDS</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>7. Mental Health</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>8. Substance Abuse</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	All Clients	x		x	x		
<b>9. Domestic Violence</b>	CoC/HUD Competitive Programs HOPWA Homeless Programs	Adults and Unaccompanied Youth	x					
<b>10. Destination</b>	CoC/HUD Competitive Programs <sup>1</sup> HPRP Programs HOPWA Homeless Programs	All Clients				x		
<b>11. Date of Contact</b>	CoC/HUD Street Outreach Programs	All Clients					x	
<b>12. Date of Engagement</b>	CoC/HUD Street Outreach Programs	All Clients	x					
<b>13. Financial Assistance provider</b>	HPRP Programs	All Clients		x				x
<b>14. Housing Relocation and Stabilization Services Provided</b>	HPRP Programs	All Clients		x		x		
<sup>1</sup> CoC/HUD Competitive Programs include the Supportive Housing Program (SHP), Shelter Plus Care, and the Section 8 Moderate Rehabilitation for Single Room Occupancy Dwellings (SRO) Program. <sup>2</sup> Only collected at least once every three months if the period between program entry and exit exceeds three months. <sup>3</sup> Only collected at least once annually if the period between program entry and exit exceeds one year.								

Additional Program-Specific Data Elements: Optional Data Elements										
Data Standards	Program Applicability	Subjects					When Collected			
	Optional for ALL CoC Programs	All Clients	All Clients or All Adults and Unaccompanied Youth	All Females of Child-bearing Age	All Veterans	All Children	Every Entry	At Least Once Annually during Program Enrollment <sup>1</sup>	When Services Provided	Every Exit
15A. Employment	x		x				x	x		x
15B. Education	x		x				x	x		x
15C. General Health Status	x		x				x	x		x
15D. Pregnancy Status	x			x			x			
15E. Veteran's Information	x				x		x			
15F. Children's Education	x					x	x	x		x
15G. Reasons for Leaving	x	x								x
15H. Services Provided	x								x	
<sup>1</sup> Only collected at least once annually if the period between program entry and exit exceeds one year.										