MS-503 Gulfport/ Gulf Coast Region Continuum of Care

Policies and Procedures

Geography: Harrison County, Hancock County, Jackson County, Stone County, Pearl River County, and George County, Mississippi
Contents
Introduction to these Policies and Procedures ................................................................. 5
Roles and Responsibilities ................................................................................................ 6
   Overview ......................................................................................................................... 6
   Purpose .......................................................................................................................... 6
Homeless Management Information System .................................................................... 9
Activities of the Continuum of Care ................................................................................ 12
Membership of the Continuum of Care ........................................................................... 14
Responsibilities of and Benefits to Continuum of Care Members ................................. 17
Continuum of Care Code of Conduct ............................................................................. 19
Conflict of Interest Policy and Annual Statement ......................................................... 20
Statement of Ethics .......................................................................................................... 25
PROVIDING ASSISTANCE UNDER THE CONTINUUM OF CARE ................................ 26
Grievance Policy and Procedure for Written and Verbal Complaints ............................ 31
Continuum of Care Diversity Policy Statement ............................................................. 35
Continuum of Care Leadership ....................................................................................... 36
Protection of Records – Federal Matters ......................................................................... 37
Drug Free Workplace Policy .......................................................................................... 38
Whistleblower Policy ....................................................................................................... 39
2016 Continuum of Care Committees ............................................................................ 40
CoC Governing Council Committees .............................................................................. 41
Continuum of Care Communication .............................................................................. 41
Collecting Needs Data and Inventorying System Capacity ............................................ 42
Determining Unmet Need and Prioritizing Gaps in the Continuum of Care Homeless System ... 47
Election of Ranking and Review Committee Members ................................................ 50
Ranking and Review Process for New and Renewal Applications ................................ 50
New Projects as a Result of Bonus, Reallocation, or Pro-Rata Availability and Renewal Projects 51
Reviewing and Prioritizing Projects for Funding ............................................................ 52
Ranking of Projects for the Collaborative Application Project Listing .......................... 55
Reallocation Policy: Updated June 16, 2016 ................................................................. 55
APPEALS ......................................................................................................................... 56
HUD Application Reporting Requirements: Annual Performance Reports ................. 59
Annual Homeless Assessment Report (AHAR) .............................................................. 61
BY-LAWS of MS-503 COC Continuum of Care: Gulfport/ Gulf Coast Region ............ 63
Introduction to these Policies and Procedures

The Continuum of Care (CoC) is a regional, year-round planning body of representative stakeholders in the community’s work toward ending homelessness, which coordinates the community’s policies, strategies and activities toward ending homelessness. Its work includes gathering and analyzing information in order to determine the local needs of people experiencing homelessness, implement strategic responses and measure results. The CoC also sets the local process for applying, reviewing and prioritizing project applications for funding each year in the Homeless Assistance Grants competition.

This document outlines key operational components of the CoC, including policies and procedures for the CoC.
Roles and Responsibilities

Overview
Open Doors Homeless Coalition is the membership association that serves as the Collaborative Applicant and HMIS lead of the MS-503 Continuum of Care (CoC) for the Mississippi Gulf Coast (Gulfport/ Gulf Coast Region). Members of Open Doors Homeless Coalition are also members of the MS-503 Continuum of Care. As required by the HEARTH Act, the membership is a “geographically based group of representatives that carries out the planning responsibilities of the Continuum of Care program... These representatives come from organizations that provide services to persons experiencing homelessness, or represent the interests of persons experiencing homelessness, at risk of homelessness, or are formerly homeless.” (HEARTH Act Interim Regulations, p. 45423 of the Federal Register.) The MS-503 Continuum of Care officially designated Open Doors Homeless Coalition as its Collaborative Applicant and HMIS lead January 16, 2014, and renews the designation by vote of the MS-503 General Membership each January. The renewals have been January 15, 2015 and January 15, 2016. Open Doors Homeless Coalition, the Collaborative Applicant, is the only entity that can apply for a CoC grant from HUD on behalf of the MS-503 CoC.

The HEARTH Act sets forth that the membership/Continuum of Care is responsible for the following three primary tasks:
1) Operation of the Continuum of Care
2) Designation and operation of a Homeless Management Information System (HMIS); and
3) CoC Planning.

More specifically, the CoC is tasked with: measuring performance both community-wide and program specific as it relates to reducing homelessness; developing and managing a centralized or coordinated assessment that addresses the housing and services needs for all individuals and families who experience homelessness in the County; preparing and overseeing the application for community funding; and establishing funding priorities.

Purpose
The purpose of this document is to specify the planning duties of the CoC and to officially designate Open Doors Homeless Coalition as the Collaborative Applicant for the Continuum of Care and the HMIS lead agency. This document also sets forth the duties and responsibilities of Open Doors Homeless Coalition and the MS-503 Gulfport/ Gulf Coast Region Governing Council and General membership, also known as the Open Doors Homeless Coalition Governing Council and General membership.

Governing Council Duties
The MS-503 Gulfport/ Gulf Coast Region CoC Governing Council (Open Doors Homeless Coalition Governing Council) is the primary decision making body for the CoC General Membership. The Governing Council, among its specified duties, is tasked with designating the Collaborative Application for the CoC, designating the Lead Agency for planning purposes, and designating the administrator/ lead agency of the HMIS. Duties of the Governing Council related to the CoC are
as follows:

a. The Governing Council will provide input year-round into the planning, performance management, HMIS administration, and annual grant submission performed by Open Doors Homeless Coalition, the Collaborative Applicant, lead Agency, and HMIS Lead, as designated by the Governing Council. The Governing Council is also responsible for bringing forward policies and information to the full membership for ratification and/or amendment in order to enable Open Doors Homeless Coalition, the collaborative applicant, and MS-503 Continuum of Care to complete their duties as required by HUD and this agreement.

b. **Code of Conduct**: No member of the Governing Council may participate in or influence discussions or decisions that would result in a financial or other material benefit to the organization that the member represents.

c. The Governing Council will nominate the unbiased Ranking and Review Committee for election by the General membership. The Ranking and Review Committee will be made up of unbiased persons who are not affiliated by employment or board membership of any CoC-funded agency or applicant, who will review and rank new and renewal projects and make recommendations for reallocations to be included in the CoC Application.

d. The Governing Council will hear and act on appeals from providers not in agreement with action by the Ranking and Review Committee as it recommends new projects, renewals and reallocations during the annual CoC grant submittal process.

*Collaborative Applicant/CoC Planning Duties*

Open Doors Homeless Coalition (ODHC), as designated by the MS-503 Governing Council and voted upon by the general membership, will provide year-round planning and support to the general membership, as well as serve as the Collaborative Applicant for the CoC.

a. In order to meet the requirements under the HEARTH Act and for the community funding application to receive the maximum points available, Open Doors Homeless Coalition (ODHC) will provide staff support and assistance/policy guidance to the general membership, its active committees, and the Governing Council.

b. With input and consent from the MS-503 Continuum of Care, ODHC will develop and annually refine a performance assessment process that is aligned with the HEARTH Act.

c. **The unbiased Ranking and Review Committee, nominated by the Governing Council and elected by the general membership**, will conduct an annual performance assessment process that may include agency site visits, random case file reviews, and analysis of HMIS and financial management data along with an objective assessment of performance using the annual progress report and other relevant data to judge performance and coordination with the system as a whole. The unbiased Ranking and Review Committee’s decisions about rankings and reallocations will be final after any
appeals have been finalized and the decision is announced to the Governing Council and General Membership.

e. ODHC will help identify and/or respond to program requests for assistance or program refinement that will result in enhanced performance.

f. ODHC will lead the annual Point in Time count and Housing Inventory, informed by best practice standards and HUD requirements and will report results in the hudhdx portal.

g. ODHC will support implementation of the HEARTH Act by sharing all relevant information, offering assistance and support to all CoC and ESG funded programs, to include but not limited to: training and support around HMIS, system measures, coordinated assessments, rent reasonableness studies, housing habitability assessments, file documentation, homelessness assistance policies, environmental reviews, project quality and efficiency, and other support that may be requested.

h. ODHC will provide annual gaps analysis and performance information and will provide recommendations and support to Mississippi Home Corporation for the Emergency Solutions Grant (ESG).

i. MS-503 Continuum of Care will provide at least annual assessments of the community’s progress in reducing homelessness and systems-level analysis.

j. With input and assistance from the general membership and its Governing Council, ODHC will help develop and manage a coordinated assessment process that helps identify appropriate interventions for all individuals and families experiencing homelessness in South Mississippi.

k. ODHC will develop and submit the community’s application for funding under the Continuum of Care program as the Collaborative Applicant, and will coordinate the submission of project applications by the individual programs.

l. ODHC will apply for HUD CoC Planning grant funding, and if awarded, will enter into an agreement with HUD, perform the required grant activities, as well as work to raise match funds for the Planning Grant.

m. ODHC will consult with the ESG recipient (Mississippi Home Corporation) to ensure that ESG funds that are sub-granted to agencies within the MS-503 CoC utilize coordinated entry and the funds benefit the system in achieving the goals of Opening Doors: The Federal Strategic Plan to Prevent and End Homelessness.

n. ODHC will monitor program effectiveness and performance of ESG funded agencies and CoC funded agencies and provide, or arrange for, training and support as needed.
**HMIS Administration Duties**

Open Doors Homeless Coalition (ODHC), as designated by the Governing Council, will manage a Homeless Management Information System, subject to the membership’s HMIS Policies and Procedures adopted in 2007. These responsibilities are generally as follows:

a. ODHC will ensure the operation of and consistent participation (to the extent possible) by recipients of funds from the ESG and CoC programs.

b. ODHC, with support and input from the Governing Council’s HMIS Committee, will establish the HMIS, initiate and implement HMIS policies and procedures, conduct oversight, and data quality management, as well as ensure execution of appropriate data security standards.

c. ODHC will execute written HMIS Participation Agreements and/or Business Agreements with each HMIS lead for the CoC and ESG funded programs that include the requirements of the security plan by which all users must abide, the penalties associated with violating the security and confidentiality policies, as well as the training requirements for system users.

d. ODHC will conduct at least quarterly training for HMIS users.

e. ODHC will ensure that the HMIS Policies and Procedures will be reviewed and updated annually.

f. ODHC will work with providers that are not CoC or ESG funded to seek inclusion of their data.

g. ODHC will use HMIS to generate data for the Annual Point in Time Count, Emergency Housing Inventory Count, the Annual Homelessness Assessment Report, and community and program performance reports, and will provide this data for the Collaborative Application.

h. ODHC will serve as the applicant for HMIS funding under the Continuum of Care, and if awarded funds, will enter into an agreement(s) with HUD for the grant activities related to administration of the community’s HMIS.

i. ODHC will work to raise funds that will serve as federally-required match for the HMIS CoC and/or ESG grant

---

**Homeless Management Information System**

The primary purpose of a Homeless Management Information System (HMIS) is to aggregate data on homelessness at local and national levels to accurately describe the scope of homelessness and the effectiveness of efforts to ameliorate it. Beyond data collection, HMIS provides significant opportunities to improve access to and delivery of services for people experiencing homelessness and to strengthen community planning and resource allocation.
Participation

All ESG and HUD Continuum of Care funded agencies must participate in HMIS. Non-ESG and HUD Continuum of Care funded agencies are encouraged to participate in HMIS in the following order:

1) Providers of emergency shelter, transitional housing, and homeless outreach services, regardless of whether they receive funding through the McKinney-Vento Act
2) Providers of permanent supportive housing funded by other HUD programs (HOPWA, CDBG, and HOME)
3) Homelessness prevention programs, supportive services only programs, and non-federally funded permanent housing programs.

The CoC will encourage all providers to include all of their homeless-dedicated beds in HMIS. The CoC will work to ensure at least 86% bed coverage for emergency shelter, transitional housing, and permanent supportive housing. The CoC will review and assess its HMIS bed coverage monthly and report annually.

Please see the HMIS Policies and Procedures for detailed information.

Role of the CoC HMIS Committee

The HMIS Committee will create and update separate HMIS Policies and Procedures, which will include the following policies in the HMIS Policies and Procedures manual:

- HMIS access, use, and data dissemination
- Agency participation requirements
- Ensuring security and confidentiality of information within the system
- Ensuring that only trained, designated staff have access to the data
- Monitoring security and confidentiality requirements for participating agencies
- Reviewing the quality of client-level and program-level data
- Assessing compliance with HMIS Data and Technical Standards
- Conducting trainings on privacy/ethics, data security, data quality, and HMIS software
- Developing streamlined, user-friendly means for collecting and inputting data
- Conducting trainings to help agencies implement HMIS policies

The HMIS Committee will also provide ongoing outreach to agency and community leadership to cultivate and maintain support and understanding of the HMIS initiative.

Use of HMIS

The HMIS must:

- Collect unduplicated counts of individuals and families experiencing homelessness
- Analyze patterns of use of applicable assistance provided for the Continuum of Care
- Provide information to project sponsors and applicants for needs analyses and funding priorities
- Be developed in accordance with standards established by HUD, including standards that provide for—
- Encryption of data collected for purposes of HMIS
- Documentation, including keeping an accurate accounting, proper usage, and disclosure, of HMIS data
- Access to HMIS data by staff, contractors, law enforcement, and academic researchers
- Rights of persons receiving services under HUD Homeless Assistance Grant-funded programs
- Criminal and civil penalties for unlawful disclosure of data
- Such other standards as may be determined necessary by HUD

**Role of HMIS Administrator**

The HMIS Administrator, employed by Open Doors Homeless Coalition, the HMIS lead, is responsible for the following:

- Providing operation, security, maintenance, system auditing, and technical support of HMIS central hardware, software, and connectivity
- Setting up and managing user accounts, access levels, and passwords
- Providing technical and user support for HMIS software, including agency account set-up, system monitoring and testing, problem diagnosis and resolution, and routine software and information maintenance
- Providing and coordinating ongoing training and technical support for the system
- Coordinating regular end-user meetings to discuss software updates, data entry, report writing, and system management issues
- Serving as initial point of contact for end-user questions and concerns
- Assessing compliance with the HMIS Policies and Procedures
- Maintaining contact with the software product developer to ensure consistent and uniform communication among product support personnel and the community
- Generating information on the community’s homeless and housing situation for community planning, advocacy, and funder reporting requirements
- Assisting end users in the creation of custom reports and queries
- Monitoring and approving the dissemination of data collected through the HMIS
- Providing regular aggregate data reports to agencies and the greater community
Activities of the Continuum of Care

The Continuum of Care (CoC) is the planning body that provides a forum for discussing plans to end homelessness in the CoC, educating the community on homeless issues, providing advice and input on the operations of homeless services, program operations, and advocating on federal, state, six Coastal counties and city policy issues affecting people who are homeless or at-risk of homelessness.

The MS-503 CoC meets monthly. For each meeting, there is an agenda and written minutes. CoC members may review meeting minutes at any time by contacting Open Doors Homeless Coalition, the collaborative applicant.

Responsibilities of the CoC include the following:

- Orchestrate a vision for ending homelessness in the six Coastal counties of South Mississippi
- Encourage and develop public understanding and education on homeless and housing issues
- Provide advocacy on homeless concerns to elected officials located in the six Coastal counties of South Mississippi
- Make recommendations about long-range planning and policy formulation to elected officials located in the six Coastal counties of South Mississippi
- Assess effectiveness, quality, efficiency, access, and availability of homeless services in South Mississippi
- Collect data on needs of homeless persons through Point in Time counts and housing inventory surveys
- Facilitate on-going coordination and collaboration among all the components of the homeless services system for purposes of service delivery, planning and resource management, fund-raising, and policy and program development
- Strategize to fill gaps in homeless services and housing, avoid duplication, and maximize efficiency in service provision
- Encourage homeless housing and service programs to adopt best practices
- Provide a forum for coordination among public and private agencies on policy, program and fiscal issues related to homelessness and prevention
- Coordinate between the six counties and all entitlement city departments and agencies on policy, program and fiscal issues related to homelessness and prevention
- Create and implement strategies and action steps to reduce and end homelessness
- Coordinate a collaborative process for the development of a Continuum of Care Homeless Assistance Grants application to HUD
- Coordinate a process for evaluating the outcomes of homeless housing and services programs, especially those funded through HUD Homeless Assistance Grants
- Establish priorities for funding HUD Homeless Assistance Grants projects
- Participate in the Consolidated Plans and work to align them with the strategies and goals of the Continuum of Care (State of Mississippi, Gulfport, Biloxi, Pascagoula, Moss Point)
• Ensures operation of, and consistent participation by, HUD Homeless Assistance Grants programs in the homeless management information system (HMIS)
Membership of the Continuum of Care

The CoC is broadly representative of the public and private homeless service sectors, including homeless client/consumer interests. The CoC encourages all members of the community to participate in group discussions and working groups. The CoC works to assure diverse population input to CoC deliberations and decision-making, including consumers and community members, as well as gender, ethnic, cultural and geographical representation. All interested persons are encouraged to attend meetings, provide input, and voice concerns.

Outreach is made to ensure participation from the following groups:

- Homeless service providers and agencies
- Local homeless coalitions and networks
- Community and faith-based organizations
- Nonprofit housing developers
- Local government representatives
- Key civic leaders
- Homeless and formerly homeless people
- Homeless advocates
- Public Housing authorities
- Private health care organizations
- Mental health service providers and funders
- Substance abuse service providers and funders
- Local job councils
- Colleges and universities
- Veteran service agencies
- Representatives of special needs populations such as:
  - Persons experiencing chronic homelessness
  - Veterans
  - Persons with serious mental illnesses
  - Persons with substance abuse issues
  - Persons with HIV/AIDS
  - Persons with co-occurring diagnoses (may include diagnoses of multiple physical disabilities or multiple mental disabilities or a combination of these two types)
  - Victims of domestic violence
  - Youth
- Religious leaders
- Businesses and business associations
- Key members of local planning groups
- Employers
- Political leaders
• Law enforcement and corrections agencies
• School districts

The Membership Committee conducts ongoing efforts to include essential providers and stakeholders (listed above) in the CoC. When a particular gap in membership is identified in the CoC, the Membership Committee will target missing constituencies, brainstorm agencies and names, and contact people to represent missing constituencies. The Membership Committee will develop a recruitment plan with goals, timelines, and assignments. The recruitment plan will prioritize organizations and individuals to be recruited, specifically:
• Organizations or individuals that may help attract other new members
• Organizations or individuals that may help the CoC reach some of its goals

Face-to-face meetings will be the primary method used for targeted recruitment efforts, especially for those organizations that are a high priority. In preparing for these meetings, the Membership Committee will conduct background research on an organization and its staff. The committee will use this information to develop a clear understanding of how an organization may help the CoC, how the CoC may help the organization, how and at what level the organization may participate in the continuum, and possible outcomes of a collaboration. The membership outreach tools in the attachment to this policy provide a framework for conducting these face-to-face meetings.

To recruit Locally Elected Officials (LEO), the Membership Committee will send CoC representatives to LEO forums, explain the CoC’s role and work, need for representation, nature of meetings and time commitment.

The CoC will hold membership outreach meetings at which potential members are provided with background information about the continuum. At a minimum, new members will receive a brief orientation that includes the following:
• Background information on the CoC
• The strategic (or annual) plan
• Organizational structure
• Meeting dates
• Membership contact information
• Other resources to engage new stakeholders

For new members, the CoC will:
• Create a mentoring program, to bring new people in and partner them with an existing member
• Create a “new members” meet and greet event
• Create new members orientation session for 15 minutes before each meeting, to give some background on the agenda topics for the day

The Membership Committee will document their efforts to bring all stakeholders into the CoC.

To facilitate participation by consumers, the CoC will arrange for transportation to and from the CoC meetings for consumers.

For all members, the CoC will clearly define
• The mission of the CoC
• Membership roles and expected level of involvement and time
• Structure of the CoC
• Needed areas of expertise
• Nature of participation
Responsibilities of and Benefits to Continuum of Care Members

All members of the CoC shall demonstrate a professional interest in, or personal commitment to, addressing and alleviating the impact of homelessness on the people of the community.

CoC members have an active role in the CoC. Members are expected to:

- Attend meetings
- Serve on a committee of the CoC
- Collect needs data through the annual Point in Time count and the Housing/Services Inventory
- Review data to ensure accuracy
- Provide input to creating strategies and action steps to reduce and end homelessness
- Participate in advocacy and public education efforts
- Provide outcome data on the successes and challenges of homeless persons in their programs
- Participate in the Continuum of Care Homeless Assistance Grants application process
- Report back to the constituency they represent on key issues and strategies
- Seek input from the constituency they represent on key issues and strategies
- Keep abreast of needs and gaps
- Contribute to informed dialog on all actions the group undertakes
- Review proposals for funding

The CoC will work to ensure that members can see clearly how the CoC benefits their organization and how their input will help the CoC. The CoC will highlight the benefits to being a CoC member, including:

- Enhanced agency effectiveness through collaboration and partnerships with other agencies
- Access to federal funding opportunities
- Ability to influence local homelessness policy
- Ability to achieve goals and objectives that individual member organizations will benefit from but would not be able to achieve on their own
- Access to trainings
- Access to data
- Eligibility to serve on the Ranking Committee for HUD Homeless Assistance Grants
- Ability to help create a more efficient homeless program and service delivery system and maximizing use of limited resources by eliminating duplication in services
- Ability to identify ways to coordinate and link resources to avoid duplication and facilitate movement towards permanent housing and self-sufficiency
- Enhanced understanding of the needs of the homeless in the community
- Ability to take part in new and creative solutions to meet the needs of the homeless in the community
- Expanded networking opportunities and improved access to contacts and relationships formed by other groups
- Strengthened political position in the community and improved access to decision makers
• Increased access to funding opportunities that require community collaboration
• Ability to improve organizational practices and communication
Continuum of Care Code of Conduct

The following Code of Conduct provides a foundation of ethics for the MS-503 Continuum of Care (Continuum).

The Continuum prohibits the solicitation and acceptance of gifts or gratuities (anything of monetary value) by officers, employees and agents for their personal benefit. Ask yourself if the gift would have been offered if you did not have your position. If the answer is “No” then you should decline accepting the gift.

A. The Continuum promotes impartiality in performing official duties, and prohibits any activity representing a conflict of interest. You should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question your fairness.

B. The Continuum prohibits the misuse of position. You cannot use your position with the Continuum for your own personal gain or for the benefit of family or friends.

C. Officers and employees shall put forth honest effort in the performance of their duties.

D. Officers and employees shall not knowingly make unauthorized commitments or promises of any kind purporting to bind the Continuum without previous Board approval.

E. Officers and employees shall disclose waste, fraud, abuse, and corruption to appropriate authorities.

F. Officers and employees shall adhere to all laws and regulations that provide equal opportunity for all Americans regardless of race, color, religion, sex, national origin, age, or handicap.

Violation of this any portion of this code will be subject to disciplinary action which could include immediate termination. The code has been distributed to the Continuum’s Board of Directors, as well as posted on the Continuum’s website. A link to the code has also been distributed to the Continuum’s partner agencies.
Conflict of Interest Policy and Annual Statement

Article I -- Purpose
1. The purpose of this Board conflict of interest policy is to protect the MS-503 Continuum of Care (CoC) interests when it is contemplating entering into a transaction or arrangement that might benefit the private interests of an officer of the CoC or might result in a possible excess benefit transaction.
2. This policy is intended to supplement, but not replace, any applicable state and federal laws governing conflicts of interest applicable to nonprofit and charitable organizations.
3. This policy is also intended to identify “independent” directors.

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.
2. Financial interest -- A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:
   a) An ownership or investment interest in any entity with which the CoC has a transaction or arrangement,
   b) A compensation arrangement with the CoC or with any entity or individual with which the CoC 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 CoC 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. A person who has a financial interest may have a conflict of interest only if the Board decides that a conflict of interest exists, in accordance with this policy.

3. Independent Director -- A director shall be considered “independent” for the purposes of this policy if he or she is “independent” as defined in the instructions for the IRS 990 form or, until such definition is available, the director --
   a) is not, and has not been for a period of at least three years, an employee of the CoC or any entity in which the CoC has a financial interest;
   b) does not directly or indirectly have a significant business relationship with the CoC, which might affect independence in decision-making;
   c) is not employed as an executive of another corporation where any of the CoC’s executive officers or employees serve on that corporation’s compensation committee; and
   d) Does not have an immediate family member who is an executive officer or employee of the CoC or who holds a position that has a significant financial relationship with the CoC.
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 Board.

2. **Recusal of Self** -- Any director may recuse himself or herself at any time from involvement in any decision or discussion in which the director believes he or she has or may have a conflict of interest, without going through the process for determining whether a conflict of interest exists.

3. **Determining Whether a Conflict of Interest Exists** -- After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the Board meeting
while the determination of a conflict of interest is discussed and voted upon. The remaining Board members shall decide if a conflict of interest exists.

4. Procedures for Addressing the Conflict of Interest
   a) An interested person may make a presentation at the Board 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 President of the Board shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.
   c) After exercising due diligence, the Board shall determine whether the CoC 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 Board shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the CoC'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.

5. Violations of the Conflicts of Interest Policy
   a) If the Board 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 Board determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Article IV – Records of Proceedings
The minutes of the Board 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 Board'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 Board who receives compensation, directly or indirectly, from the CoC 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 CoC for services is precluded from voting on matters pertaining to that member's compensation.

c) No voting member of the Board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the CoC, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

**Article VI – Annual Statements**

1. Each director, principal officer and member of a committee with Board delegated powers shall annually sign a statement which affirms such person:
   
a) Has received a copy of the conflict of interest policy,
b) has read and understands the policy,
c) has agreed to comply with the policy, and
d) Understands the CoC is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

2. Each voting member of the Board shall annually sign a statement which declares whether such person is an independent director.

3. If at any time during the year, the information in the annual statement changes materially, the director shall disclose such changes and revise the annual disclosure form.

4. The Board shall regularly and consistently monitor and enforce compliance with this policy by reviewing annual statements and taking such other actions as are necessary for effective oversight.

Article VII – Periodic Reviews
To ensure the CoC 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 (if reasonably available), and the result of arm’s length bargaining.

   b) Whether partnerships, joint ventures, and arrangements with management organizations, if any, conform to the CoC’s written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement or 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 CoC may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the Board of its responsibility for ensuring periodic reviews are conducted.
Statement of Ethics

The Open Doors Homeless Coalition board members, MS-503 CoC Governing Council, and active committees are role models of the organization obliged to demonstrate constructive teamwork and to be exemplary representatives of the organization. We lead by demonstrating, planning, and working with our board colleagues to implement the CoC mission.

In order to fulfill our responsibilities as CoC board members in an ethical and efficacious manner, we pledge to:

- Participate in the development of the values, purpose, goals and planning strategies for CoC;
- Represent the interest of donors and individuals served by this CoC;
- Work diligently to see that policy decisions are made in a timely fashion, emphasizing due process and fairness; and to support final decisions of the board;
- Communicate and support CoC values, mission, goals, policies and strategies to all constituents honoring the diversity in the community;
- Not use this organization or my service on this board for one’s personal advantage or for the individual advantage of friends, supporters, or organization(s);
- Support and encourage pride, diversity, and accountability within the framework of CoC’s mission and goals;
- Maintain and do nothing to violate the trust of those who elected us to the board or committees, or those we serve;
- Recognize that a board member has no authority as an individual and that the power possessed is not individual, but represents the authority delegated under the direction of the board;
- Respect and preserve the confidentiality of discussion and/or privileged information.
PROVIDING ASSISTANCE UNDER THE CONTINUUM OF CARE

PURPOSE: The HEARTH Act requires the MS-503 Continuum of Care to have written policies and procedures that govern the provision of assistance to individuals and families under the Continuum of Care, Permanent Housing (Permanent Supportive Housing or Rapid Rehousing). These policies and procedures provide guidance to local providers in administering CoC-funded assistance in the following areas:

- Eligibility and Documentation standards for PH programs
- Targeting and prioritization for Permanent Supportive Housing (PSH), Transitional Housing (TH), and Rapid Rehousing (RRH);
- Standards for administration of rental assistance; and
- Termination of assistance

More information, including coordinated entry procedures, can be located in the MS-503 CoC Homelessness Assistance Policies and Procedures. The policies and procedures are not intended to be in lieu of or in place of the Interim Regulations for the HEARTH Act, but are intended to clarify local decisions regarding program administration. All HUD funded providers must follow the Interim Regulations in its entirety.

I. PARTICIPANT ELIGIBILITY AND DOCUMENTATION STANDARDS:

The MS-503 Continuum of Care funds the following program types: Permanent Supportive Housing, Transitional Housing, Planning, Coordinated Assessment and HMIS. As set forth in the HEARTH Act, there are four categories of eligibility: 1) Literally Homeless, 2) Imminent Risk of Homelessness, 3) Homeless Under Other Federal Statutes (subject to cap), and (4) Fleeing/Attempting to Flee Domestic Violence. The MS-503 Continuum of Care elects to serve categories 1 and 4 due to the shortage of resources for those priority populations and excessive demand. Category 2 may be served with the Emergency Solutions Grant in Homelessness Prevention.

Documentation must be included in the case file, and/or scanned into the HMIS client record that demonstrates eligibility as follows:

1) Literally Homeless (in order of preference)
   a. Third party verification (HMIS print-out when available, or written referral/certification by another housing or service provider); or
   b. Written observation by an outreach worker; or
   c. Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter;
   d. For individuals exiting an institution who were homeless prior to entering the institution and residing in the institution less than 30 days – one of the forms of evidence above and:
      i. Discharge paperwork or written/oral referral, or
      ii. Written record of intake worker’s due diligence to obtain above evidence and certification by individual that they exited institution
If the provider is using anything other than a Third Party Verification, the case file must include documentation of due diligence to obtain third party verification.

2) Imminent Risk of Homelessness (CoC funds cannot be used for this category at this time)
   a. A court order resulting from an eviction action notifying the individual or family that they must leave within 7 days; or
   b. For individual and families leaving a hotel or motel – evidence that they lack the financial resources to stay; or
   c. A documented and verified written or oral statement that the individual or family will be literally homeless within 7 days; and
   d. Certification that no subsequent residence has been identified; and
   e. Self-certification or other written documentation that the individual lacks the financial resources and support necessary to obtain permanent housing.

3) NOT APPLICABLE – Homeless Under Other Federal Statute

4) Fleeing/Attempting to Flee DV
   For victim service providers:
   a. An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.
   For non-victim service providers:
   b. Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; and
   c. Certification by the individual or head of household that no subsequent residence has been identified; and
   d. Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.

As defined in the HEARTH Act, eligibility for Permanent Supportive Housing is limited to categories 1 and 4. Participants must also:
   a. Enter from the street or shelter, or a transitional housing program to which they originally entered from the street or shelter (NOTE: if the project is designated for chronically homeless, they may only enter from the street or shelter. Individuals could lose their chronically homeless designation after they enter a transitional housing program); and
   b. At least one member of the household must have a disability of long duration, verified either by Social Security or a licensed professional that meets the state criteria for diagnosing and treating that condition.

Documentation of chronic homelessness must include third party documentation, as stated above for literal homelessness, and must include third party verification of 12 months of continuous homelessness or 4 times homeless over the last 3 years for a total of 12 months of
homelessness as well as a properly documented disability. Length of time homeless can only be self-certified for a maximum of 25% of the participants of a program.

II. PRIORITIZING AND TARGETING

MS-503 Continuum of Care follows a coordinated assessment process for people experiencing homelessness in our community.

a. For homeless families with children, a centralized intake is in place that seeks to mediate/prevent homelessness whenever possible, reduce the homeless episode for families through rapid rehousing and shelter/transitional housing focused on moving families from homelessness to permanent housing as soon as possible, and permanently house the most vulnerable families, as resources are available. A uniform application gathers information to determine the “best fit” intervention and is combined with a uniform assessment tool used to prioritize families for more intensive services. Prioritization for family households:
   1. Living outdoors with a child or pregnant—the younger the child, the more "in need;"
   2. Affected by a physical or developmental disability, or serious medical condition that could get worse if living outdoors, especially if a minor child in the household has the disabling or serious medical condition;
   3. Living outdoors;
   4. About to be released from a shelter with no other plans and will likely be homeless;
   5. In a shelter;
   6. In transitional housing.

b. For homeless individuals, the VI-SPDAT identifies the most vulnerable persons experiencing homelessness. The most vulnerable persons are given priority in permanent supportive housing. The tool also assists in determining whether permanent supportive housing, rapid re-housing, or some other housing placement is the most appropriate intervention.

Standards Related to Permanent Supportive Housing in the MS-503 CoC: Priority will be given to persons who demonstrate the highest need for permanent supportive housing.

After completing a VI-SPDAT, the following criteria will be considered for all placements in PSH prioritized or dedicated for chronically homeless individuals and chronically homeless families, as adopted May 21, 2015:

a) First Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and

ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs (VI-SPDAT score of 10 or higher)

(b) Second Priority—Chronically Homeless Individuals and Families with the Longest History of Homelessness. A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

(c) Third Priority—Chronically Homeless Individuals and Families with the Most Severe Service Needs. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

ii. The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

(d) Fourth Priority—All Other Chronically Homeless Individuals and Families. A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:

i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and

ii. The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

As adopted August 19, 2016, the order of priority for CoC Program-funded PSH that is not dedicated or prioritized is:
1. First priority is for individuals or families with a member with a disability and severe service needs, and who were homeless for any length of time, including those who are exiting an institution where they lived for 90 days or less but who were homeless before entering the institution.

2. Second priority is for individuals or families with a member with a disability who were homeless either continuously for six months or on at least three separate occasions that add up to six months over the last three years. This includes those exiting an institution where they lived for 90 days or less, but who were homeless either continuously for six months or on at least three separate occasions that add up to six months over the last three years before entering the institution.

3. Third priority is for individuals or families with a member with a disability who are homeless, including those exiting an institution where they lived for 90 days or less, but who were homeless before entering the institution.

4. Fourth priority is for individuals and families with a member with a disability who are:
   a. Coming from transitional housing, but who were homeless before living in transitional housing.
   b. Fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking who are living in transitional housing, even if they were not homeless before entering transitional housing.

Notice CPD-14-12 is at [http://bit.ly/1B8IyM9](http://bit.ly/1B8IyM9)

**III. COMMON ASSESSMENT TOOL**

The MS-503 CoC has adopted the Vulnerability Index-Service Prioritization Decision Assistance Tool as its common assessment tool. The tool is used to prioritize individuals and families for housing resources through coordinated entry/ coordinated assessment.

**IV. STANDARDS FOR ADMINISTERING ASSISTANCE;**

a. All PSH or RRH funded programs must enter into a lease or occupancy agreement with tenants that must be at least one year in duration. The lease agreement must observe Fair Housing Act regulations. If leasing, the lease must be in the name of the agency administering the funds. If tenant based rental assistance is provided, the lease must be in the tenant’s name.

b. Participants in permanent supportive housing or rapid rehousing are expected to pay a maximum of 30% of their income (monthly, adjusted using HUD’s rental calculations) toward rent (including utilities). If the participant has zero income, the participants are not required to pay rent, but their supportive services partner is expected to work with them to secure income (either earned or unearned) as soon as possible. In no circumstance can a tenant be charged an amount above the Rent Reasonableness standard established by HUD.

c. Participants in leasing programs may be charged an occupancy charge up to 30% of the monthly adjusted income; 10% of the family’s gross income; or the portion of the
family’s public assistance. Each participating agency must have a policy to address occupancy charges and the policy must be equally applied for all tenants.

V. WRITTEN PROCESS FOR TERMINATION OF ASSISTANCE

All programs that offer housing assistance to individuals or families funded by the Continuum of Care must provide a written explanation of a tenant’s rights and responsibilities that includes an explanation of program requirements and the consequences and appeal rights should a violation occur. The violation notification must be provided in writing to the participant with an accompanying right to an independent hearing (where the review officer is not directly involved in the program administration) to review the program’s decision to terminate assistance to the recipient. Written notification of the outcome of the hearing/final decision will be provided within thirty (30) days of the conclusion of the hearing.

VI. HOMELESS/ FORMERLY HOMELESS REPRESENTATION

All programs that offer assistance to individuals or families funded by the Continuum of Care must ensure that a person who is currently experiencing homelessness or a person who is formerly homeless is involved in all decisions related to the program. A person who is homeless or formerly homeless must sit on the Board of the organization and have all voting rights and privileges of any member of the Board of Directors.

VII. HOUSING FIRST

All programs that offer housing assistance to individuals or families funded by the Continuum of Care must ensure that the program is low barrier and the housing first methodology is used. More information about housing first can be found at www.naeh.org. Training materials are available through Open Doors Homeless Coalition.

VIII. SYSTEM MEASURES

All programs that offer assistance to individuals or families funded by the Continuum of Care must ensure that their data entered into HMIS is accurate and timely. The information will be used to measure the performance of the entire system along with client level and program level performance. System measures are reported to HUD on an annual basis and are used to make improvements in the system in order to achieve the goals of Opening Doors: The Federal Strategic Plan to Prevent and End Homelessness.

Grievance Policy and Procedure for Written and Verbal Complaints
Policy Statement

It is the policy of the MS-503 Continuum of Care (CoC) to provide its members with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints about programs, it must be clear that the CoC is not an official oversight entity but does have influence.

Each HUD funded organization shall have a grievance procedure and shall implement the procedure when applicable.

Written Complaints about the CoC

Any written complaint against the CoC will be reviewed by the CoC Governing Council within ten days of its receipt. The Chair of the governing council or the Executive Director of the Collaborative Applicant, under the direction of the Chair of the governing council will respond within 30 days by:

- Assisting the complainant in articulating/identifying issues, if needed.
- Determining what action needs to be taken, if any.
- Responding in writing to complainant with clear identification of issue and specifics about its resolution.

Complaints about a Program Receiving McKinney-Vento Funds

- A first-person written and/or documented complaint will be considered a grievance.
- A verbal, second-hand or hearsay complaint will be considered a complaint.
- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the CoC will recommend that the person do so and document that recommendation. If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the Chair of the governing council or the executive director of the collaborative applicant of the CoC. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the Chair of the governing council or the executive director of the collaborative applicant of the CoC will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.
- Once a complaint or grievance has been submitted, the Chair of the governing council or the executive director of the collaborative applicant of the CoC will approach the alleged problem program’s representative, explain the complaint or grievance, and ask for a response. Responses will be documented. It will be up to the Chair of the governing council or the executive director of the collaborative applicant of the CoC to decide if the matter needs to be discussed
by the CoC Governing Council. A second complaint or grievance will be handled the same.

- If a program receives a third complaint, the CoC Governing Council will review the situation and recommend action. The Executive Director of the program being reviewed will be asked to respond to the CoC Governing Council.
- All complaints or grievances involving **vulnerable adults or children** will be immediately turned over to the appropriate authorities.
Complaints about a Homeless Program Not Involved in or Funded through the CoC

Any complaints received against programs that are components of the Continuum but not participants in the process will be recorded. Information will be shared with CoC Governing Council and/or funders or other stakeholders if and when deemed appropriate.

All complaints or grievances involving vulnerable adults and children will be immediately turned over to the appropriate authorities.

*All complaints and grievances should be submitted to the Chair of the governing council or the executive director of the collaborative applicant of the CoC. However, if there is a conflict apparent with reporting problems to the chair of the governing council or the executive director of the collaborative applicant, reports can be made to the secretary of the CoC.
Continuum of Care Diversity Policy Statement

Diversity transcends race and gender and is different from Equal Opportunity and Affirmative Action. The MS-503 Continuum of Care (CoC) Diversity Policy requires that all CoC members, contractors, and volunteers to respect and value differences, be they age, race, nationality, ethnic group, sexual orientation, physical ability, health status, religion, educational experience, marital or parental status, or geographical location.

CoC members, contractors and volunteers must be sensitive and responsive to the diversity of the people and organizations we serve. We believe that this Diversity Policy relates to ethics, social responsibility and in doing what is right. It also translates directly to improving human performance as well as organizational success.

All decisions at the MS-503 Continuum of Care and its collaborative applicant, Open Doors Homeless Coalition regarding clients or potential clients are made based on eligibility criteria and program requirements. MS-503 Continuum of Care and its collaborative applicant, Open Doors Homeless Coalition, will not discriminate on the basis of race, color, national origin, religion, sex, age, disability, sexual orientation, marital status, or any characteristic protected by law.
Continuum of Care Leadership

The success of the CoC depends in part on strong leadership. The CoC looks for leaders who have the organizational skills needed to maintain the group’s focus on its goals and the process for achieving those goals. A leader must be able to manage the daily tasks of the CoC. The tasks are performed by the Executive Director, staff, CoC Governing Council, membership, and volunteers under the direction of the Board. The wide array of tasks involved in operating the CoC includes the following:

- Organizing and facilitating meetings
- Maintaining communications between stakeholders
- Organizing and leading needs assessment activities, including a point-in-time count
- Arranging technical assistance and training to providers as needed
- Managing and overseeing the preparation of the HUD application
- Completing other funding applications
- Managing the long-range planning process
- Building partnerships
- Overseeing system coordination
- Assessing progress of system change
- Providing support to the board and its key committees
- Establishing organizational plans, policies, and procedures as necessary for effective operation of the CoC
- Managing existing financial resources
- Administering and evaluating fundraising for the CoC
- Acting as spokesperson for the CoC to the press, including preparing and executing advocacy alerts, scheduling presentations to community groups and increasing awareness of homelessness issues
- Maintaining contact with state, six Coastal counties, and federal agencies that work on issues impacting the homeless population.
- Keeping abreast with and participating in legislative issues affecting homelessness
- Keeping the leadership group informed through regular reporting of progress on the CoC’s goals, objectives, and strategic plans, including committee reports and all other relevant matters

In addition to the above tasks, organizing a CoC meeting requires:

- Setting the time, date and location of meetings
- Reserving meeting space
- Sending agendas, minutes and next meeting time/date/location to CoC email list
- Preparing an agenda and providing copies of the agenda to members
- Providing attendance sign-in sheets at meetings
- Planning the meeting
- Providing facilitation
- Taking minutes
- Coordinating with board and committee members
- Compiling background materials
- Locating and preparing the meeting site
Protection of Records – Federal Matters

It is the MS-503 Continuum of Care’s policy to prohibit the knowing destruction, alteration, mutilation, or concealment of any record, document, or tangible object with the intent to obstruct or influence the investigation or proper administration of any matter within the jurisdiction of any department or agency of the United States government, or in relation to or contemplation of any such matter or case.

Violations of this policy will be considered violations of the Continuum’s Code of Ethics and will be subject to disciplinary action which could include immediate termination.
Drug Free Workplace Policy

MS-503 Continuum of Care and its collaborative applicant, Open Doors Homeless Coalition, is a Drug Free Workplace. Reporting for work under the influence of any controlled substance is strictly prohibited. Controlled substances include alcohol, prescribed drugs (if used inappropriately) or illegal drugs. Any employee who reports for work under the influence of any controlled substance will face disciplinary action up to and including termination of employment.

The unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace. Any violation of this policy will result in disciplinary action up to and including termination.

At least annually, a training and awareness meeting will take place that addresses:

1. The dangers of drug abuse in the workplace
2. MS-503’s and ODHC’s policy of maintaining a drug-free workplace
3. Available drug counseling and rehabilitation options
4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

Each employee to be engaged in the performance of any ODHC activity is hereby notified that as a condition of employment by ODHC, the employee will:

1. Abide by the terms of MS-503 and ODHC’s drug-free workplace policy and
2. Notify the MS-503 and ODHC in writing if he or she is convicted for a violation of a criminal drug statute occurring in the workplace no later than 5 days after conviction. ODHC will notify any federal, state, or local entities providing grant funding for any programs the employee worked under, within ten calendar days after receiving notice from an employee or otherwise receiving actual notice of such conviction.

Regarding employees convicted for a violation of a criminal drug statute occurring in the workplace, ODHC will provide notice to the grant officer on whose grant activity the employee was working. Notice shall include applicable grant numbers.

Within 30 calendar days of receiving notice of any employee who is convicted for a criminal drug statute occurring in the workplace will:

1. Take appropriate action against the employee, up to and including termination, or
2. Require the employee to participate satisfactorily in a drug abuse assistance or rehabilitation program, and
3. Make a good faith effort to continue to maintain a drug-free workplace.
Whistleblower Policy

Any reprisal against a reporting individual because of what that individual, in good faith, reporting a suspected act of misconduct in accordance with this policy, or providing to a law enforcement officer any truthful information relating to the commission or possible commission of a Federal offense, is prohibited and will, in turn, be considered an act of misconduct subject to disciplinary action.
2016 Continuum of Care Committees

Much of the work of the CoC is conducted at committee and task force meetings. The CoC committees and task forces may meet monthly or more frequently depending on the tasks to be accomplished.

The CoC works to ensure that all committee meetings are meaningful and action-oriented. To accomplish this:
- Each committee will have a clear purpose
- Each committee will develop an overall timeline for addressing the problem for which it was created
- Committee and Task Force Chairs and members will be prepared for meetings
- Length of meetings will be controlled by following as closely as possible an agenda that specifies time allotments for each topic to be covered
- To ensure that meetings result in action, at each meeting committee members will discuss next steps and assign responsibilities to members
- Complete and concise meeting minutes will be created and distributed
- Committee members will strive to complete their assignments within the allotted time frame
- The committee will periodically self-assess its performance
- In addition to the committees below, the ranking and review committee will be elected annually to review and rank CoC projects for inclusion in the annual application for funds.

<table>
<thead>
<tr>
<th>Name of Group</th>
<th>Role of Group</th>
<th>Meeting Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sustaining and End to Homelessness Among Veterans Committee</td>
<td>Responsibilities include maintaining the by-name list of veterans experiencing homelessness, assertive outreach to all places veterans may reside, including campisites, the beach, shelters... completing a VI-SPDAT assessment, prioritizing the veteran for housing using the most appropriate funding source and array of services, respect the veterans’ choices at all times, case conference at least monthly.</td>
<td>Monthly or more; includes the Biloxi VA, Back bay Mission, Oak Arbor, Voices of Calvary, Hancock Resource Center, Open Doors Homeless Coalition, community members including persons who have experienced homelessness</td>
</tr>
<tr>
<td>Ending homelessness among Chronically Homeless Persons Committee (Chronic homelessness is defined as homeless for one year continuously or 4 times in the last 3 years with 12 months of documented homelessness; only 9 months may be self-certified)</td>
<td>Responsibilities include maintaining the by-name list of persons experiencing chronic homelessness, assertive outreach to all places chronically homeless persons may reside, including campisites, the beach, shelters... completing a VI-SPDAT assessment, prioritizing the chronically homeless person for housing using the most appropriate funding source and array of services, respect the persons’ choices at all times, case conference at least monthly.</td>
<td>Monthly or more; includes Back Bay Mission, Mental Health Association of South Mississippi, Open Doors Homeless Coalition, Power Ministries, Coastal Family Health, Singing River Services, community members including persons who have experienced homelessness</td>
</tr>
<tr>
<td>Ending homelessness among families and youth committee</td>
<td>Responsibilities include developing a comprehensive strategy to identify homeless youth in the annual PIT count, developing a by-name list of families and youth experiencing homelessness prioritized using the VI-SPDAT score, develop policies that coordinate with Child Protective Services (CPS), school districts, domestic violence service providers, the court system, and other community partners, identify gaps in housing and services for families and youth, increase housing and services options for families and youth.</td>
<td>Monthly or more; includes Hancock Resource Center, Climb CDC, Community Care Network; Department of Human Services; school district liaisons, Gulf Coast Women’s Center for Nonviolence, Biloxi Police Department, Open Doors Homeless Coalition, community members including persons who have experienced homelessness</td>
</tr>
<tr>
<td>Substance Abuse and Mental Health</td>
<td>Identify existing services and access points for substance abuse treatment and mental healthcare; increase community based mental health and substance abuse treatment services that are accessible for persons experiencing homelessness; develop linkages to housing resources for persons exiting treatment facilities.</td>
<td>Monthly; South Mississippi Substance Abuse Coalition, Mental Health Association of South Mississippi, Community Care Network, Singing River Services, Open Doors Homeless Coalition</td>
</tr>
<tr>
<td>HMIS and Coordinated Assessment Committee</td>
<td>Develop and implement a coordinated entry and assessment system that cover the CoC-geography that prioritizes individuals and families most in need for appropriate housing resources; promote the use of the VI-SPDAT as the common assessment tool; ensure the HMIS system has the capacity to measure outcomes at the client-level, program-level, and system-level. As a first priority, ensure all CoC housing programs utilize coordinated entry, as a second priority, ensure all ESG programs utilize coordinated entry.</td>
<td>Quarterly: Open Doors Homeless Coalition, Back Bay Mission, Mental Health Association of South Mississippi, Climb CDC, ESG providers</td>
</tr>
</tbody>
</table>

**CoC Governing Council Committees**

The CoC Governing Council Committees include the Nominating Committee, Program and Services Committee and the Ranking and Review Committee. The duties of these committees are described in the MS-503 Governing Council by-laws.

**Continuum of Care Communication**

Between CoC meetings, the CoC leaders will keep members involved by the following methods:

- Establishing working groups to move the work of the CoC forward between meetings
- Encouraging partners with similar interests to join forces, either by sharing information/best practices or working on strategies to collaborate and support each other’s efforts
- Sharing information regularly to maintain a focus on homelessness in general and the continuum in particular

Methods of sharing information between CoC meetings will include:

- Information sent out via email list
- Information added to the CoC website, including:
  - Information on the work of the continuum
  - Resources
  - Plans and implementation
  - Research and data
  - Funding availability
Collecting Needs Data and Inventorizing System Capacity

Annually, the CoC will review the housing and services available to people experiencing homelessness within the community. The methods to undertake this review include:

- Homeless Counts
- Housing Inventory
- Services Inventory

The CoC should determine how to conduct the counts and inventories taking into consideration that these activities are also required by HUD. HUD’s recommendations for conducting homeless counts and housing/services inventories are described below, and should serve as a guide to the CoC in determining the methods to adopt each year.

**HOMELESS COUNTS**

The Continuum of Care Application for McKinney-Vento homeless assistance funding requires CoCs to produce “statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time.” CoCs are also asked to report the number of homeless persons in seven subpopulation categories:

- Chronically homeless
- Severely mentally ill
- Chronic substance abusers
- Veterans
- Persons with HIV/AIDS
- Victims of domestic violence
- Unaccompanied youth (under 18 years of age and 18-24)

HUD encourages CoCs to base population and subpopulation estimates on local data stored in Homeless Management Information Systems (HMIS) and/or collected through shelter and street counts.

Aside from the HUD mandate to collect this information, there are many reasons why the CoC chooses to collect accurate, reliable data on our local homeless populations:

- To identify community-specific service needs and gaps
- To further understand the causes of homelessness and design more effective responses
- To use in planning and program development
- To raise public awareness of the challenges facing people experiencing homelessness
- To accurately measure and identify the needs of populations that are the hardest to serve

The CoC will coordinate a point-in-time count of sheltered and unsheltered homeless people in the last ten days of January (between January 22nd and 31st) at least annually.

**Sheltered Homeless Count**

The sheltered count is an inventory of people accessing shelter on a particular evening. It will include homeless people who are spending the night in:

- Emergency shelters
- Cold weather shelters
- Domestic violence shelters
- Residential programs for runaway/homeless youth
• Transitional housing
• Hotel/motel/apartment voucher arrangements paid by a public/private agency because the person or family is homeless and
• Permanent supportive housing for homeless persons (Information on persons living in permanent supportive housing units will be used to determine the capacity rate of those programs; they will not be included in the total homeless count number)

The following information will be collected in the sheltered count:
• Number of households with dependent children (couples or single parents/guardians with children)
• Number of persons in households with dependent children (adults and children)
• Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
• Number of persons in households without dependent children (adults and unaccompanied youth)

The following populations will not be included in the count number reported to HUD:
• Persons who are living doubled up in conventional housing
• Formerly homeless persons who are residing in Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units
• Children or youth, who because of their own or a parent’s homelessness or abandonment, now reside temporarily and for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, detention facilities and the like
• Adults living in mental health facilities, chemical dependency facilities, or criminal justice facilities

To collect Sheltered Count data, the CoC will:
• Extract the data from HMIS and
• Send surveys to housing providers collecting the required data on the specified night of the sheltered count; for persons who agree to participate, a VI-SPDAT (Vulnerability Index-Service Prioritization Decision Assistance Tool) will be completed.

The CoC will survey housing providers to collect data, and the CoC will:
• Provide written instructions to providers to explain the protocol for completing the sheltered point-in-time count
• Train providers on the protocol and data collection forms used to complete the sheltered point-in-time count
• Remind all agencies of the scheduled count and follow-up with providers to ensure the maximum possible response rate from all programs
• Use HMIS to verify data collected from providers for the sheltered count
• Use strategies to ensure that each sheltered and unsheltered homeless person was not counted more than once during the point in time count

Unsheltered Homeless Count

The unsheltered count is an inventory of people experiencing homelessness that are not accessing shelter either by choice or due to a lack of shelter bed availability. The count will include homeless people found in places not meant for human habitation, including streets, parks, alleys, parking ramps, parts of the highway system, transportation depots and other parts of transportation systems, all-night commercial establishments (e.g. movie theaters, laundromats, restaurants), abandoned buildings, building roofs or stairwells, outbuildings, woods, campgrounds, vehicles, and other similar places.
The following information will be collected in the unsheltered count:

- Number of households with dependent children (couples or single parents/guardians with children)
- Number of persons in households with dependent children (adults and children)
- Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
- Number of persons in households without dependent children (adults and unaccompanied youth)
- For adults who will participate, the VI-SPDAT (Vulnerability Index-Service Prioritization Decision Assistance Tool) will be completed.

To collect Unsheltered Homeless Count data, the CoC will chose one or a combination of the following methods:

- Conduct a public places count (a point-in-time count based on observation of unsheltered persons without interviews)
- Conduct a public places count with interviews (a point-in-time count combined with either interviewing all unsheltered homeless persons encountered during the public places count or a sample of these individuals.)
- Conduct a service-based count (interview people using non-shelter services, such as soup kitchens and drop-in centers, screen for homelessness, and count those that self-identify as unsheltered homeless persons; in order to obtain an unduplicated count, every person interviewed must be asked where they were sleeping on the night of the point-in-time count)
- Extract data from HMIS (use HMIS to collect, analyze or report data on unsheltered persons)

To ensure reliable data from the unsheltered count, the CoC will:

- Conduct trainings for point-in-time enumerators
- Use HMIS to check for duplicate entries or for some other purpose
- Use strategies to ensure that each unsheltered homeless person was not counted more than once during the point-in-time count

**Subpopulations**

The CoC will also coordinate a count of persons who fall into certain subpopulations, using data from a point-in-time count conducted during the last ten days of January (between January 22nd and 31st) at least annually.

Only adults will be included in the subpopulations count, except for the Unaccompanied Youth (those under age 18-24) category. Subpopulation data is required for sheltered persons and unsheltered persons.

Data collected for the subpopulation analysis includes:

- Chronic homeless status
  - Length of time the person has been homeless this time and combined times of homelessness if homeless more than once
  - How many times the person has been homeless in the past 3 years
  - Whether the person has a disability
- Disability status by category
  - Severe mental illness
  - Chronic substance abuse
  - HIV/AIDS
  - Physical Disability
- Victim of domestic violence
- Veterans
- Unaccompanied youth (under 18 or age 18-24)
To collect subpopulation data, the CoC will:

- Extract the data from HMIS OR
- Conduct interviews with a random or stratified sample of sheltered homeless adults and unaccompanied youth, extrapolating the results to the entire sheltered homeless population to provide statistically reliable subpopulation estimates for all sheltered persons OR
- Conduct interviews with every homeless person staying in an emergency shelter or transitional housing program on the night designated for the point-in-time count OR
- Ask providers to use individual client records (e.g., case management files) to provide the CoC with subpopulation data for each adult and unaccompanied youth living in a sheltered program on the night designated for the point-in-time count

If the CoC does not collect this information from HMIS, the CoC will:

- Provide written instructions to providers to explain the protocol for completing the subpopulations count
- Train providers on the protocol and data collection forms used to complete the subpopulations count
- Remind all agencies of the scheduled count and follow-up with providers to ensure the maximum possible response rate from all programs

**Housing Inventory**

Every year the CoC will collect data to complete a housing inventory. This inventory will occur at a single point-in-time in the last ten days in January. The date of the housing inventory will be the same date as the point-in-time sheltered and unsheltered count. If the CoC conducts the homeless count every-other year, the housing inventory must be conducted every year and will occur in the last ten days in January.

For each program that houses persons experiencing homelessness, the CoC will collect data on:

- The number of beds and units currently serving individuals and families
- The number of beds and units created in the past year (“new inventory”)
- The number of beds and units that are fully funded but not yet serving homeless people (“under development”)

Housing inventory data must be obtained from all emergency shelters, transitional housing, and permanent supportive housing programs in the CoC, including those programs that do not receive HUD funding. Data collected from permanent supportive housing programs will be focused only on the beds and units that are dedicated to housing persons who are formerly homeless. The number of vacant emergency shelter, transitional housing, and permanent supportive housing units must be collected for the unmet need determination.

To collect Housing Inventory data, the CoC will annually:

- Use HMIS data to complete the Housing Inventory Chart OR
- Conduct a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless providers, which will include the previous year’s Housing Inventory Chart and instruct providers to review and update housing inventory information on the specified night of the housing inventory

If the CoC decides to collect housing inventory information via a survey, the CoC will:

- Provide written instructions to all homeless providers on how to report an accurate bed inventory
- Systematically train provider-level staff on how to obtain an accurate bed inventory
• Include definitions of key terms used in the inventory chart, such as seasonal and overflow beds (these definitions can be found in the instructions accompanying the CoC Application); for projects serving both individuals and families, it may also be helpful to provide guidance on how to distinguish between family units, family beds, and individual beds.

• Follow-up with providers (e.g., via telephone, email, or in-person) to ensure the maximum possible response rate and accuracy of the housing inventory information.

• After receiving the inventory information, confirm the information with each provider to verify the accuracy of the data.

*Services Inventory*

The CoC will collect information on the services available to homeless people. This service inventory will include:

• **Prevention activities**
  - Mortgage assistance
  - Rental assistance
  - Utilities assistance
  - Counseling/ Advocacy
  - Legal Assistance

• **Outreach**
  - Street Outreach
  - Mobile Clinic
  - Law Enforcement

• **Supportive Services**
  - Case Management
  - Life Skills
  - Alcohol and Drug Abuse
  - Mental Health Counseling
  - Healthcare
  - HIV/AIDS
  - Education
  - Employment
  - Childcare
  - Transportation

The CoC will collect this information by surveying homeless service providers. When possible, the CoC will send providers a chart listing the above services and the agencies that provide the services, and ask providers to update the chart.
Determining Unmet Need and Prioritizing Gaps in the Continuum of Care Homeless System

Annually, the CoC will review the data collected as a result of the homeless counts and housing/services inventories, and determine what housing and services are needed given the homeless populations. The methods to undertake this review include:
- Determining Housing Needs
- Calculating Unmet Needs
- Prioritizing Gaps

There are many methods available to conduct these reviews. The CoC has determined that it will conduct these reviews guided by HUD’s recommendations, which are described below.

Each year the CoC must tell HUD what housing for homeless people we need in our community, including the need of families and individuals for Emergency Shelter beds, Transitional Housing beds, and Permanent Supportive Housing beds. This information is also necessary for the long-term program and strategic planning that we do as a community.

HUD’s standardized methodology for calculating unmet need uses point-in-time data and local provider expertise to calculate an initial estimate of unmet need. Because the estimates from the standardized methodology may not reflect all that is known about the homeless population in our community, the CoC will also convene key community stakeholders to discuss the initial estimates and determine if adjustments are necessary to reflect other local information.

Determining Housing Needs
Unmet need reflects the difference between a CoC’s bed capacity and the number of homeless persons in the CoC at one point-in-time. Thus, most information for the unmet need calculation is collected as part of the point-in-time homeless count and housing inventory process, except the housing needs of the community. To determine the housing needs of homeless persons who are residing in emergency shelter, transitional housing, and persons who are unsheltered, the CoC will gather expert opinions of homeless assistance providers.

The CoC will obtain the housing needs of sheltered homeless persons by asking each emergency shelter and transitional housing provider listed in the Housing Inventory Charts to estimate the percentage of their clients that need emergency shelter, transitional housing, and permanent housing to ultimately resolve their homeless situation.

The CoC will obtain the housing needs of unsheltered homeless persons in one of two ways:
- Individually surveying outreach workers or teams, then averaging the estimated percentages, and applying the average to the total unsheltered population; or
- Convening a group of outreach workers to discuss and arrive at a consensus on the percentage of unsheltered persons in need of each type of housing

When determining housing needs, the CoC will remember that:
- Each person or family should be placed in the one program type that will best assist the household in resolving homelessness as documented by the VI-SPDAT and other individualized assessment tools.
- The calculation of unmet need for each program type (emergency shelter, transitional housing, or permanent supportive housing) should be done separately for unaccompanied individuals and persons in families with children; this is necessary to accurately reflect the bed capacity needs for each group.
Calculating Unmet Need

The CoC will begin by using the following standardized formulas for calculating unmet need by program type (emergency shelter, transitional housing, and permanent supportive housing):

- Unmet need for Emergency Shelter (ES) = (The number of unsheltered homeless persons who need ES + the number of persons currently in ES who will only need ES) – (Total number of ES beds + ES beds under development)
- Unmet need for Transitional Housing (TH) = (The number of unsheltered homeless persons who need TH + the number of persons in ES who need TH + the number of persons in TH who will only need TH) - (Total number of TH beds + TH beds under development)
- Unmet need for Permanent Supportive Housing (PSH) = (The number of unsheltered homeless persons who need PSH + the number of persons in ES who need PSH + the number of persons in TH who need PSH) - (Total number of vacant PSH beds + PSH beds under development)

Adjusting Unmet Need for Local Realities

The CoC will convene local providers and other knowledgeable persons to discuss the initial unmet need calculations. The CoC may then adjust the unmet need numbers in the way that best represents the unmet need in our community. This discussion and unmet need adjustment may include:

- CoC stakeholders meeting and reviewing data to determine the CoC’s unmet need
- The CoC applying results from local studies or other data sources to help determine unmet need
- The CoC using local point-in-time enumeration data and applying national or other local statistics to calculate unmet need
- The CoC using HMIS data (e.g., counts of homeless persons, analysis of subpopulation needs as compared with specialized program beds, or bed inventory) to calculate unmet need
- The CoC applying results from national studies or other national statistical information on homelessness to help determine unmet need

Prioritizing Gaps

In order to develop strategies to address the unmet needs identified above, the CoC will determine and prioritize gaps in the Continuum of Care.

Process for Determining Relative Priorities

Determining gaps and their relative priority are fundamental steps in the CoC strategic planning process. Decisions regarding the relative priority of gaps are the basis for developing strategies to deploy new resources or re-deploy existing resources to best assist people who are homeless to obtain and maintain permanent housing and self-sufficiency.

All CoC members (homeless providers and other stakeholders) will be invited to be involved in the decision-making to determine and prioritize gaps.

To determine and prioritize gaps, the CoC will hold an annual CoC “Prioritizing Unmet Needs” meeting, at which:

- All CoC members will be invited to participate
- Homeless count, housing and service inventories, and unmet need data will be presented
- CoC members will consider and discuss several criteria when prioritizing unmet needs, including:
- Relative need among sub-populations
- Vulnerability of sub-populations (because of age, diagnosis)
- Groups not yet served versus those with some housing resources in place
- Whether a certain need is growing and if so, how rapidly
- Users of high-end services (e.g., hospitalization, detoxification)
- Gaps in each major housing type (transitional, permanent supportive housing, and permanent housing)
- Whether there are sufficient services to serve persons already in emergency shelter, transitional housing programs, or permanent housing
- What services are missing to help people move to permanent housing or permanent supportive housing
- What services are essential to certain subgroups, and whether they are missing
- Are there major gaps in the homeless system or missing linkages among components of the system (i.e. outreach, intake, referral, assessment)

- After discussion, a list of housing, service and system gaps will be created
- CoC members will then vote to prioritize the gaps
- Each CoC member agency will have one vote and will choose their three priority gaps
- The gaps that receive the most votes shall be set as the highest priority
- Low priority does not mean that there is not an unmet need; rather, it means that relative to other unmet needs or gaps, it is less of a priority
Election of Ranking and Review Committee Members

The CoC annually elects the Ranking and Review Committee members who are knowledgeable about homelessness and housing in the area and who are broadly representative of the relevant sectors, subpopulations, and geographic areas. The Ranking and Review Committee will be composed of representatives from a cross-section of groups which might include: Faith-based and non-profit providers of homeless services and housing; housing developers; city representatives; mental health; substance abuse; veteran’s services; and consumers. The members of the committee must be unbiased and not be employed by or sit on the Board of any current recipient of CoC funds or an applicant for CoC funds.

Ranking and Review Process for New and Renewal Applications

The elected and unbiased Ranking and Review Committee will meet annually to review new and renewal projects, recommend reallocations, and rank projects for inclusion in the HUD Continuum of Care Application. The proposal scores and rankings will be based on the current year’s notice of availability of funding and the objective scoring rubric, both of which will be widely distributed and available on the collaborative applicant’s website. Renewal project outcomes for the previous full program year, as indicated by the Annual Progress Report housed in HMIS, will weigh heavily in the scoring. A new project’s proposed outcomes and evidence that the outcomes are achievable through experience will be important. A project’s cost effectiveness, efficiency, participation in CoC activities, participation with HMIS, and participation in coordinated entry are expected. Housing first and other evidence based practices are expected.

- Ranking and Review Committee members (3-5) are trained. The Ranking and Review Committee Training includes:
  - Information regarding homeless activities, needs, services, definitions and other issues that are pertinent to the CoC
  - A background of McKinney Vento and the local process
  - The role of the Ranking & Review Committee
  - Review of the scoring tools, applications, and resources
- Ranking and Review Committee members receive eligible applications and scoring materials
- All Ranking and Review Committee members reviews all applications using a scoring rubric
- Ranking and Review Committee meets to review and discuss each application together and to individually score them; The Collaborative Applicant Executive Director may provide an APR data summary for renewal projects to the committee for their review; The Collaborative Applicant Executive Director is not present at the meeting during deliberations. The Ranking and Review Committee then gives their total score sheet and ranking to the Collaborative Applicant Executive Director to send announcements and post on the Collaborative Applicant’s website.
New Projects as a Result of Bonus, Reallocation, or Pro-Rata Availability and Renewal Projects

The Ranking and Review Committee will review and score projects equally whether they are new projects or renewal projects, per the scoring rubric published on its website. The CoC will advertise in the local newspaper, post on its website, and distribute to its membership a public notice requesting applications for both new and renewal projects. If a bonus project is allowed and has different scoring criteria than other projects, the information will be part of the notice. The CoC’s priorities and details of eligible applications, as defined by the current year’s NOFA, will be posted. The due date for submission to the CoC will be at least 30 days prior to the due date of the CoC Collaborative Application. The Ranking and Review Committee will make available, on the collaborative applicant’s website, the rank order of the projects at least 15 days prior to the submission of the CoC Collaborative Application. All applicants, whether included in the submission or rejected, will be notified of the decision in writing, and outside of esnaps, at least 15 days prior to the submission of the CoC Collaborative Application.
Reviewing and Prioritizing Projects for Funding

The Ranking and Review Committee will review all new and renewal applications for CoC funds to determine eligibility, score, and rank based on the terms of the current year’s NOFA.

General Procedure

HUD CoC Funds are granted based on a national competition following the Notice of Funding Availability (NOFA). Immediately when HUD’s Continuum of Care NOFA is released, the CoC coordinates the following process:

- The Collaborative Applicant considers community priorities, then designs and presents scoring tools and materials to the CoC Governing Council for approval; the CoC Governing Council considers and approves the scoring tools and materials.
- Information regarding the NOFA and the community’s process and requirements are disseminated to all CoC and other interested parties (all homeless service and housing providers in the continuum of care area) via the following open solicitation methods:
  - Letters/emails
  - Responses to public inquiries
  - Announcements at CoC and other public meetings
  - Notice published in the newspaper

- Any agency interested in applying for funds will be required to complete a Letter of Intent/proposal and must be submitted by the posted due date in the notice that is posted on the collaborative applicant’s website and widely distributed
- Applications and additional information are collected and reviewed according to the current year’s notice
- A Ranking and Review Committee is elected annually by the CoC General Membership
- The Ranking and Review Committee reviews, scores, and ranks the projects using the approved scoring rubric that is posted on the collaborative applicant’s website.
Funding Priorities and Local Need

Services and housing for persons experiencing homelessness are needed in all aspects within our community, however, there are specific areas that are of greatest need and will be a funding priority for the CoC. Creating funding priorities is driven by the community’s needs assessment and gaps analysis, which are part of a year-long process. All organizations in the CoC that participate in the gaps analysis process have a voice in determining the community’s priorities for funding. Funding priorities are established through a fair and open process using objective criteria.

Through this gaps analysis process, the following areas have been identified as funding priorities:

- Permanent Supportive Housing serving all target populations
  - In the event that the applications exceed the amount available, priority will be given for projects serving 1) chronically homeless, 2) youth and 3) families
- Renewals and new projects will be scored and rated and ranked by the Ranking and Review Committee. Renewals may be given preference points, as determined by the CoC governing council; however, they are generally scored equally with new projects
- Renewal projects may apply for only one year of funding

Procedures for Application Submissions

- Letters of Intent/ proposals must be mailed or delivered per the instructions on the posted and widely distributed notice
- Proposals must be submitted via e-snap by the identified due date, usually 30 days prior to the submission date of the CoC Collaborative Application
- Proposals will be due by 5:00 pm on the due date

Late and Incomplete Applications Policy

- Late Letters of Intent will not be accepted
- Incomplete Applications: incomplete applications cannot be cured for Ranking and Review Committee scoring, but must be corrected prior to HUD submission; the original application (not the copies) will be examined to determine if all pieces of the application have been submitted

Using All Available Funds

The CoC will do everything possible to ensure that all funds possibly available to the community are applied for. Thus, when all on-time applications have been submitted and it appears that either 1) the community is not requesting as much money as is available from HUD or 2) no eligible bonus projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the continuum of care area) with specifics regarding:
  - How much money is available
  - For what type of programs
- Any additional applications for these funds will be due one week after this email is distributed

Application Eligibility Threshold Review

Projects must pass a threshold review before being submitted to the Ranking & Review Committee. The collaborative applicant will complete the threshold review to verify the eligibility of:
• Applicant
• Project
• Activity
• Completeness of application

This review will take place prior to the applications submission to the Ranking and Review Committee for reading and scoring. Proposals not completely meeting threshold review criteria will not be forwarded to the Ranking and Review Committee for further consideration. Proposals completely meeting eligibility threshold review criteria will be submitted to the Ranking and Review Committee and will be scored according to the scoring criteria.

*Ranking and Review Committee Policies*

Eligible proposals will be prioritized for inclusion in CoC’s coordinated application by the Ranking & Review Committee. Applications not scoring high enough will not be placed on the project funding request in Exhibit 1.

Goals for each application cycle will be based on specific evaluation criteria, and the CoC governing council will establish minimum requirements in order to maximize competitiveness of the CoC’s application. Examples of these application minimums include, but are not limited to, housing/service funding ration requested and amount of leverage.
Scoring Tools

Scoring tools are created by the Ranking and Review Committee and approved by the Governing Council of the CoC. Using these scoring tools, the Ranking and Review Committee will review the following objective rating measures to assess the performance of projects seeking funding:

- Independent audits
- Site visits
- Surveys of program clients
- Project readiness
- Cost effectiveness of the project
- Provider organization experience
- Provider organization capacity
- Project presentation
- CoC membership involvement
- HMIS participation involvement
- Match funds committed to project
- Leverage letters committed to project
- Percentage of housing funds requested
- APR data
- Program Outcomes
- Increases in Income
- Reducing Length of Time Homeless
- Exits to Permanent Housing
- Coordination with the system as a whole
- Other priorities, to be determined by the CoC (based on NOFA priorities)

Ranking of Projects for the Collaborative Application Project Listing

The Ranking and Review Committee will rank both renewal and new projects selected to be included in the CoC Collaborative Application using their total score. The Ranking and Review Committee may apply bonus points based on HUD’s priorities as articulated in the NOFA and/ or local priorities. All points available, including bonus points, will be part of the notice (RFP) and posted on a scoring rubric available on the collaborative applicant’s website. Projects outside of the funding line will not be included in the CoC Collaborative Application.

Reallocation Policy: Updated June 16, 2016

A public request for proposals will be widely distributed as soon as possible after the annual Notification of Funding Availability is released by the United States Department of Housing and Urban Development (HUD). The request for proposals, as approved by the MS-503 CoC, will be distributed to the CoC email distribution list that includes CoC members, local jurisdictions, and the general community. In addition, the availability of the request for proposals will be advertised in the local newspaper available across the Mississippi Gulf Coast. The request for proposals will request both new and renewal proposals for inclusion in the upcoming submission of the Continuum of Care application. The CoC-approved scoring rubric and the request for proposals will be posted on the Open Doors Homeless Coalition’s (Collaborative Applicant’s) website.
Objective criteria for both new and renewal proposals will be considered. For renewals, Annual progress Report (APR) information, fit within the homeless services delivery system, HMIS data quality, and cost efficiency will be critical factors. For new projects, HMIS participation and data quality, proposed outcomes and evidence based practices that improve the homeless services delivery system will be critical factors. Projects that aim to end chronic homelessness by 2017, sustain an end to homelessness among veterans, end homelessness among families, including persons and families fleeing domestic violence, and end homelessness among youth by 2020, and set a course to prevent and end all homelessness in South Mississippi will be given the highest consideration. All projects will be scored by an elected unbiased review committee using the posted scoring rubric. All review committee members’ scores will be added together for each project and the projects, whether new or renewal, will be ranked per the scores. Any new projects that fall below the available funding line (Annual Renewal Amount plus any bonus availability) will be rejected. Any renewal that falls below the funding line will be reduced or completely reallocated in order to include higher scoring new projects in the MS-503 Continuum of Care application.

Any renewal project may elect to voluntarily reallocate funds to create a new project that fits with the system in a better way. For example, a transitional housing project may elect to have its funds reallocated to a new rapid rehousing program or a leasing project may elect to reduce its project by moving from FMR leasing amounts to actual leasing amounts if there is a history of returning leasing funds. In the event that a program voluntarily reallocates funds, the agency will state its intentions by submitting the new project request to be reviewed, scored, and ranked by the unbiased review committee and will not submit a request for renewal.

APPEALS

Policy for Appeals

Eligible Appeals

- The application of any applicant agency which a) is unranked, or b) receives less funding than they applied for may appeal
- Applicants that have been found not to meet the threshold requirements are not eligible for an appeal
- Appeals cannot be based upon the judgment of the Ranking & Review Committee; rather, objective information presented at the time of the proposal.

Applicants may appeal if they can:

- Prove their score is not reflective of the application information provided; or
- Describe bias or unfairness in the process, which warrants the appeal

All notices of appeal must be based on the information submitted by the application due date. No new or additional information will be considered. Omissions to the application cannot be appealed. The decision of the Appeal Committee will be final.

The Appeal Committee
The Appeal Committee will be made up of four (4) members of the Continuum of Care: 3 members are Appeal Committee voting members and one is a non-voting member. 

- The three voting members will not have participated on the original Ranking & Review Committee.
- The one non-voting member must be a member of the original Ranking & Review Committee.
- No member of the Appeal Committee may have a conflict of interest with any of the agencies applying for McKinney funding and must sign a conflict of interest statement.
- The role of the Appeal Committee is to read and review only those areas of the application that are being appealed.

The Appeal Process

- Any and all appeals must be received in writing within three (3) business days of the notification of ranking of projects.
- All notices of appeal (one original and four copies) must be submitted to:
  Open Doors Homeless Coalition- Collaborative Applicant
  MS-503 Continuum of Care
  11975 Seaway Road
  Gulfport, MS 39503
The notice of appeal must include a written statement specifying in detail the grounds asserted for the appeal, must be signed by an individual authorized to represent the sponsor agency (i.e., Executive Director).

The notice of appeal is limited to one single spaced page in 12-point font.

The appeal must include a copy of the application and all accompanying materials submitted to the Ranking & Review Committee; no additional information can be submitted.

All valid appeals will be read, reviewed and evaluated by the Appeal Committee.

The Appeal Committee will meet to deliberate.

- All applicants will be invited to attend any appeal and may make a 10-minute statement regarding the appeal.
- The panel will review the rankings made by the Ranking and Review Committee only on the basis of the submitted project application, the one-page appeal, any statements made during the appeal process, and the material used by the Ranking & Review Committee; no new information can be submitted by the applicant or reviewed by the Appeal Committee.
- The decision of the appellate panel must be supported by a simple majority vote.

The appealing agency will receive, in writing, the decision of the Appeal Committee within 2 business days of the Appeal Committee Meeting; the decision of the Appeal Committee will be final.

Grantee Drops Out

If, after the Ranking and Review Committee has reviewed applications and made priority determinations, an applicant decides not to submit their application to HUD, the CoC will do everything possible to ensure that all funds possibly available to the community are applied for.

- If there were any applications/proposals rejected due to lack of funds, the next highest scoring proposal(s) will be considered for inclusion in the Continuum of Care application.
- If there were no applications/proposals that fell below the funding line, the Executive Director of the collaborative applicant may email all CoC and other interested parties all homeless service and housing providers in the continuum of care area with specifics regarding:
  - How much money is available
  - For what type of programs
- Any additional applications for these funds will be due one week after this email is distributed.
- The Ranking and Review Committee will review applications that are submitted and will meet, either in-person or via conference call, to score and rank these applications.
HUD Application Reporting Requirements: Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD’s Continuum of Care Homeless Assistance Programs. The APR gathers information on how programs assist homeless persons to obtain and remain in permanent housing, increase skills and income, and attain greater self-determination. This information is used by HUD and Congress to assess outcomes from federal funding. The APR is also useful to the CoC, grantees, and sponsors as a planning and management tool to analyze client demographics and service needs; to evaluate project outcomes; to make improvements; and to set future goals for their projects.

1. Grantees and sponsors receiving HUD Continuum of Care Homeless Assistance funding must report their annual progress to HUD through an Annual Performance Report (APR) submitted for each year in which HUD funding is provided.
   - A separate APR must be submitted for each HUD grant received
   - If a project extension is received for a partial year, then an APR must be submitted for the operating year and another APR submitted for the extension period
   - For grants being transferred, the exiting grantee must complete an APR as of the time of transfer

2. Information must be collected and maintained on each participant in the HUD-funded project for the APR. If the project serves more people than those served with the HUD funds, the APR should only include data on those served with the HUD funds.
   - Standard client data collection tools should be used to collect the information for the APR, such as the HUD-developed optional worksheets attached to the APR form or a locally-developed data collection tool (information should be collected through the HMIS or an approved comparable database)
   - Data collection and retention responsibilities should be clearly assigned and included in employee job descriptions, or in Memoranda of Understanding with other agencies, if they are responsible for collecting the data
   - All staff providing services to clients should be trained in how to accurately use the data collection forms
   - Data must be turned in to the Continuum of Care’s HMIS on a periodic basis

3. Grantees and sponsors must respond to all questions in the APR unless a written agreement has been reached with the HUD Field Office identifying questions which can be answered using estimates or skipped. SSO, Safe Haven, Outreach, Hotline, HMIS, Projects Providing Services to Children Only, and Short-Duration Service Projects (e.g. transportation, medical and dental services) should review APR instructions for special guidance before completing the APR.

4. Information to be collected for the APR includes:
   - General project information, including the dates of the operating year and the program type and component
   - Client information, including household type, demographic and special needs information, prior living situation, income, length of stay in the project, supportive services received while in the project, reason for leaving the project and destination upon leaving the project
   - Progress in achieving program goals
   - Financial information, including match and project expenditures for the operating year
     - Grantees and sponsors must track and keep records documenting the match received and utilized
• A Cash Match Documentation file should be kept for each project, including grantee cash expended, matching funds committed in the technical submission and actual match amounts received
• For Supportive Housing Program grant recipients, cash match tracking must be kept by source and by use and activity (e.g. match received and expended on housing operations should be tracked separately from match received and expended on supportive services)
• For Shelter Plus care grants, a standard data collection tool should be developed for collecting service match information from supportive services providers about the supportive services they have provided; data should be collected at regular intervals

5. Files for each project’s APR must be maintained, including at a minimum:
   o The client and financial information used to complete the APR
   o Grantee name and contact information
   o Project sponsor name and contact information
   o Operating start date
   o Date of reminder notice
   o APR due date
   o Date of overdue notice, if applicable
   o Date received
   o Dates of any interim correspondence regarding requests for additional information, if applicable
   o Date of approval letter
   o Date APR was submitted to local HUD office

6. The APR must be submitted within 90 days after the end of each operating year. Two copies must be submitted: one to the CPD Division Director in the local HUD Field Office responsible for managing the grant and one to the APR Data Editor in the Office of Special Needs Assistance Programs at the HUD Office in Washington, DC.
   o The due date for the APR should be part of the grantee/sponsor’s master calendar for tracking grant compliance activities

7. Projects should use the APR data collected to evaluate and improve the project, for needs assessment, trend analysis and future planning.
Annual Homeless Assessment Report (AHAR)

The Annual Homeless Assessment Report (AHAR) is a report by HUD to the U.S. Congress on the extent and nature of homelessness in America. It is based on data from Homeless Management Information Systems and on information from Continuum of Care (CoC) Exhibit 1s. The AHAR provides estimates of the number of homeless persons nationally, a descriptive profile of homeless persons, and an analysis of service use patterns. For CoC’s gathering and submitting this data to HUD, the local AHAR report provides useful information on homelessness and service needs at the local level.

The lead agency for the CoC is responsible for completing the local AHAR. Client level data for the AHAR will be collected through the Homeless Management Information System (HMIS) based on HUD’s universal data elements which all communities receiving HUD Homeless Assistance funding are required to collect and maintain and which are the same data elements used to generate HUD’s Annual Performance Reports (APRs).

- Unduplicated data will be collected for the four standard AHAR reporting categories: Emergency Shelter-Individuals, Emergency Shelter-Families, Transitional Housing-Individuals and Transitional Housing-Families. Data will also be collected for any supplemental reporting categories established by HUD.
- In order to participate in the AHAR, the CoC’s HMIS must be capable of:
  - Producing a one-day point-in-time count, average day count, and longitudinal counts.
  - Identifying clients with multiple program use—e.g., how many people in ES-IND were also served in TH-IND.
  - Counting persons by household type—e.g., individual adult male, adult in household with children, or unaccompanied youth.
  - Generating frequencies by basic demographic characteristics.
  - Cross-tabulating total length of stays within each program-household type, by gender and age.
  - Totaling the number of households with children by program type.

All agencies receiving HEBEARTH or HPRP funding will submit on monthly basis information to the HMIS on each client served, including data needed for the AHAR report.

The CoC has established continuum-wide data quality control procedures to ensure the accuracy and completeness of AHAR data collected and reported. These procedures address data collection as well as running of reports, data review, and obtaining feedback on the data.

The AHAR data review will address at a minimum the following three areas. In areas where problems are identified, concrete steps to address the problem will be identified and carried out.

- HMIS bed coverage (total # of beds in HMIS divided by # of beds in the CoC) must be at least 50% in one or more of the reporting categories. If bed coverage is lower, the CoC will work to increase provider participation.
- Bed utilization data (# of people served on a given night divided by the # of available beds that same night) must be based on accurate entry and exit dates for clients. For utilization rates below 60% or above 105%, the CoC will contact the provider and review raw data.
- Data completeness as evidenced by a low rate of missing data across all questions. If the percentage of missing data is high, the CoC will contact providers to identify and address problems.

The AHAR data will also be reviewed to identify:

- CoC, program or user level problems
- Client level problems records
• Anomalies between data collected between similar programs
• Anomalies between data collected in recent period vs. previous ones
• Other discrepancies

The CoC will work with participating providers regarding the AHAR data collected to confirm accuracy of information collected.

The CoC will provide quarterly HMIS trainings on data collection and quality for front-line staff who are engaged in data entry activities.

On an annual basis (according to HUD’s designated data collection schedule), the CoC will de-duplicate and aggregate the client information collected to produce and submit a local AHAR data report using a standardized template.

• The AHAR data collection period is October 1\(^{st}\) to September 30\(^{th}\) of each year.
• The CoC will submit the aggregated local AHAR report electronically through the AHAR Exchange to the HUD-designated private research firm, responsible for compiling the national AHAR.
• A draft AHAR report will be submitted by the HUD-designated date.
• The CoC will work with the AHAR Research team to correct any data problems, and submit a final AHAR report by the HUD-designated date.
BY-LAWS of MS-503 COC Continuum of Care: Gulfport/ Gulf Coast Region

Mission Statement: In conjunction with its Collaborative Applicant and HMIS lead, Open Doors Homeless Coalition, the MS-503 Continuum of Care is a collaborative initiative in South Mississippi dedicated to building solutions to homelessness through improved service delivery, community outreach, and advocacy that will result in meeting the federal goals of ending homelessness among veterans by the end of 2015, ending chronic homelessness by the end of 2016, ending homelessness among families and youth by 2020 and setting a course to ultimately end homelessness in South Mississippi.

ARTICLE I: NAME

The name of the Continuum of Care is MS-503 Continuum of Care/ Gulfport/ Gulf Coast Region. For the purposes of this document, the MS-503 General Membership will be referred to MS-503 CoC.

ARTICLE II: PURPOSE AND OBJECTIVE

The purpose of the MS-503 CoC is to collaborate with other organizations and individuals in South Mississippi to build solutions to homelessness through improved service delivery, community outreach, and advocacy.

ARTICLE III: MEMBERSHIP

Section 1. Class of Membership:

There shall be three membership categories: Organizational, Affiliate, and Individual. Any individual, affiliate, or organization subscribing to the purposes and objectives of the MS-503 General Membership and located within the defined geographical region of MS-503 CoC may become a member if they meet the criteria defined below. Membership will be a dual membership to the MS-503 CoC and Open Doors Homeless Coalition, the Collaborative Applicant and HMIS lead. All memberships are subject to approval by the Governing Council.

a) Organizational: An organizational member is an entity engaged in service to people who are homeless and/or are eligible to apply for funding through the CoC process. In social services nomenclature, this type of organization is called a service provider.

b) Affiliate: An affiliate member is an MS-503 General Membership that is not a service provider, but supports the objectives of the MS-503 CoC.

c) Individual: A private party who supports the objectives of the MS-503 CoC.

Applications for membership are reviewed for approval by the MS-503 CoC Governing Council

Section 2. Membership Dues:

Applications for all categories of membership require payment of dues as follows for the stated categories of membership:

a) Organizational: Based on the organization’s annual operating budget the following dues will apply on an annual basis: 0-150K = $50, 150–300K = $100, 300-500K = $150, over 500K = $200.
b) Individual: $25 annually  
c) Affiliate: $100 annually

Waivers to the dues as listed in these by-laws can be issued by the Executive Committee on an individual basis.

Section 3. **Membership Benefits:**
Membership in the coalition entitles the organization or individual to the following benefits:

a) One vote per individual, agency, or corporation  
b) Receipt of a newsletter  
c) Program consulting  
d) Networking  
e) HMIS participation/support (reasonable fees may be charged)

In addition, appropriate member organizations will be granted the opportunity to request funding through the Continuum of Care (CoC) process.

Section 4. **Removal of Members from the General Membership:**
Any member can be removed from the membership rolls for acting against the mission of the MS-503 CoC or for failure to observe the obligations of members by two-thirds majority vote of the voting members of the General Membership present at a regular or special meeting, provided a quorum is present.

**ARTICLE IV: GOVERNING COUNCIL**

Section 1. **Powers and Duties of the Governing Council:**
The MS-503 General Membership shall be managed and governed by its Governing Council who shall have the duty and responsibility to serve as guardians of MS-503 CoC’s mission. Without limiting the generality of the foregoing, the Governing Council shall be specifically responsible for:

a) Designating a single HMIS and selecting the HMIS lead to:
   i. Operate a single HMIS;  
   ii. Provide HMIS support to include training and data quality reviews;  
   iii. Report HMIS aggregate data to the community, the state, and to federal partners (HUD, VA, HHS);  
   iv. Apply for HMIS funds from HUD and other sources;  
   v. Make decisions about HMIS fees through the HMIS committee.

b) Monitoring recipient and subrecipient participation in HMIS through the review committee and the HMIS committee;  
c) Reviewing and approving privacy, security, and data quality plans through the HMIS committee;  
d) Conducting all year long Continuum of Care Planning to include:
   i. Coordinating the implementation of a housing and service system within the MS-503 six-county area;  
   ii. Conducting and annual Point in Time Count of homeless persons;  
   iii. Conducting and annual gaps analysis;
iv. Providing information required to complete the Consolidated Plans, in partnership with the Collaborative Applicant, Open Doors Homeless Coalition;

v. Consulting with ESG recipients regarding the allocation of ESG funds and the evaluation of the performance of ESG recipients and subrecipients;

vi. Monitoring the effectiveness of CoC and ESG programs through the Review Committee.

e) Designating a Collaborative Applicant to apply as the lead applicant for CoC funds, apply for planning funds, and provide support for the MS-503 CoC as described in the annual Notifications of Funding Availability, HUD’s CoC Interim Rule, and any other rules and/or regulations associated with the CoC application and the CoC planning funds;

f) Operating the CoC, to include:
   i. Conducting monthly meetings of the full membership with written agendas and minutes;
   ii. Issuing, at least annually, public invitations for new members;
   iii. Adopting and following a written process to select a governing council;
   iv. Appointing community committees, subcommittees, and workgroups;
   v. Developing and following these by-laws and CoC policies and procedures that detail the responsibilities of the Governing Council, CoC committees, general membership, collaborative applicant, HMIS lead, CoC program grantees and ESG program grantees;
   vi. Consulting with CoC recipients and ESG recipients and ESG subrecipients to establish performance targets appropriate for population and program type, monitor the performance of recipients and subrecipients, evaluate outcomes, and take action against poor performers;
   vii. Working in partnership with Open Doors Homeless Coalition, the MS-503 Collaborative Applicant and HMIS lead to evaluate and report to HUD outcomes of ESG and CoC projects;
   viii. Working in partnership with Open Doors Homeless Coalition, the MS-503 Collaborative Applicant and HMIS lead, to establish and operate a centralized/coordinated assessment system;
   ix. Working in partnership with Open Doors Homeless Coalition, the MS-503 Collaborative Applicant, to establish and follow written standards for providing CoC assistance.

Section 2. Number and Qualification of the Governing Council:

a) The Governing Council shall consist of dues paying MS-503 CoC members (dual membership with Open Doors Homeless Coalition, the collaborative applicant), numbering not fewer than seven (7) nor more than seventeen (17) voting members, representing the counties included in the MS-503 CoC region, at least one homeless or formerly homeless person, a representative of an ESG program, and representative of a CoC program, a
representative from the VA, a representative from a public housing authority, representatives for subpopulations of homeless persons, and at least 1/3 of the governing council made up of unbiased community members who do not work for organizations who receive CoC or ESG funds nor sit on Boards of organizations who receive CoC or ESG funds. In addition, committee chairs who are not members of the Governing Council and the MS-503 CoC Executive Governing Council member shall serve in exofficio capacities on the Governing Council, with voice but no vote.

b) Each Governing Council member is expected to serve actively on at least one Governing Council/ Open Doors committee, attend Governing Council and other committee meetings, attend events and activities sponsored by MS-503 CoC whenever possible, sign and agree to comply with MS-503 CoC conflict of interest policies, demonstrate an understanding and commitment to the mission of MS-503 CoC, advocate and support MS-503 CoC in the general community, and otherwise faithfully discharge those responsibilities specified or otherwise implied in these bylaws.

c) Each Governing Council member will agree to keep the process of the Governing Council transparent while keeping the content of discussions confidential when discussing the business of member agencies, monitoring information, complaints or grievances, personnel matters, agency board matters, ratings and rankings of agencies, or any other matter that the Governing Council deems confidential. Once again, the process must at all times be transparent; yet, there will be content that is deemed confidential and must be held in confidence so all Governing Council members feel free to participate in discussions and engage in decision-making responsibilities, presuming that all conflict of interest policies are followed.

Section 3. **Election and Term of Governing Council Members:**

The Governing Council members shall be elected by the General Membership for terms of three (3) years, on a rotating class schedule. Elections shall occur by a majority vote of members present at the annual meeting. The Governing Council members may serve two consecutive terms. At least one year must be taken off before an individual can be asked to serve a new term.

Election to an unexpired term shall not be deemed a complete three (3) year term but said Governing Council member may subsequently serve two full terms. A Governing Council member having remained out of office for (1) full year shall be eligible for further nomination and election.

Section 4. **Resignations and Removal of Governing Council members:**

a) Any Governing Council member may resign at any time by giving notice to the Chair of the Governing Council or to the Secretary of the Governing Council. Such resignation shall take effect at the time specified therein or, if no time is specified, at the time of notice.

b) A Governing Council member may be removed by vote of the Governing Council members, provided there are not less than two thirds of the Governing Council members then in office present at the meeting of the Governing Council at which such action is taken and the motion passes on a majority vote.
c) Unexcused failure to attend three consecutive meetings of the Governing Council shall, except for good cause shown and approved in advance by the Chair, automatically terminate the term of office of any member of the Governing Council. Prior to the conclusion of the meeting at the end of which termination becomes effective, the Governing Council shall be notified thereof by the Chair. After such termination, the Secretary shall notify the member as promptly as feasible.

Section 5. **Action by the Governing Council:**

a) Each Governing Council member shall have one (1) vote.

b) Except as otherwise provided by law or in these bylaws, the act of the Governing Council means action at a meeting of the Governing Council at which a quorum is present, by vote of a majority of the Governing Council members present at the time of the vote.

c) Any action required or permitted to be taken by the Governing Council may be taken without a meeting if a majority of the Governing Council members consent, in writing, to the adoption of a resolution authorizing the action. The resolution and the Governing Council members’ written consents shall be filed with the minutes of the Governing Council.

Section 6. **Quorum:**

One-third of the Governing Council members then in office shall constitute a quorum for the transaction of business.

Section 7. **Meetings of the Governing Council:**

a) The Governing Council shall hold its meetings at such place or places as the Governing Council may determine.

b) The Governing Council shall hold at least four (4) regular meeting per year, one (1) of which shall be the Annual Meeting in October and such other regular meetings as it shall determine are appropriate and necessary. The times and places of such meetings shall be determined in advance by the Governing Council, and individual notice of such meetings need not be given.

c) Special meetings of the Governing Council may be held, following the giving of notice to each Governing Council member, whenever notified by the Chair of the Governing Council or by **one-third of the Governing Council members then in office**.

d) At each meeting of the Governing Council, the Chair of the Governing Council or, in the absence of the Chair of the Governing Council, the Secretary, shall preside. In the absence of such officers, a Governing Council member chosen by a majority of the Governing Council members present shall preside.


Section 8. **Compensation:**

Governing Council members shall receive no compensation for their services as Governing Council members. Reasonable expenses incurred in the course of service may be paid by the MS-503 General Membership.
ARTICLE V: COMMITTEES

Section 1. Committee Responsibilities:
Standing Committees may be established by the Governing Council, which shall determine the duties and composition of said committees. Special “ad hoc” committees may be appointed by the Chair for short-term projects or duties. Each standing committee shall report to the Governing Council at each regular meeting concerning its activities since the last regular meeting. Except for the Nominating Committee, the standing committees will work in conjunction with the committees of Open Doors Homeless Coalition, the Collaborative Applicant for the MS-503 CoC.

Section 2. Nominating Committee:
The Nominating Committee shall be appointed annually by the Chair of the Governing Council. The Nominating Committee shall present to the MS-503 CoC membership at its annual meeting a slate of nominees to fill vacancies on the Governing Council. The Nominating Committee shall recommend to the MS-503 CoC membership the desired Governing Council composition to insure adequate diversity and skills; and nominate Governing Council officers annually. Nominations from the floor of the membership shall be accepted at the annual meeting, provided the person being nominated has offered their assent.

Section 3. CoC HUD Review and Ranking Committee:
The Review and Ranking Committee shall be elected annually by the CoC membership and report to the Governing Council for the purpose of determining which programs within MS-503 CoC will be included in each year’s request to HUD for CoC funding. None of the Review and Ranking Committee members can be employed by or sit on the Board of any agency who has/ will submit an application for new or renewal funding through the Continuum of Care. Due to the unbiased nature of the Review and Ranking Committee, the recommendation from the Review and Ranking Committee shall be announced to the Governing Council and the CoC General membership.

Section 4. Programs and Services/ HMIS Committee:
The goal of programs and services is to ensure effective and dignified service delivery to persons experiencing homelessness and those at risk of becoming homeless.

The Programs and Services Committee will include task groups or subcommittees tasked with:
   a) Discharge planning;
   b) HMIS (Homeless Management Information Systems); and
   c) Mainstream resources.

Functions of the Programs and Services Committee include:
   a) Identifying service gaps;
   b) Enhancing coordination of services through information sharing;
   c) Encouraging municipalities and communities to create affordable housing options; and
   d) Strengthening the MS-503 CoC housing and service support system.

Section 5. Community Outreach Committee:
The goal of community outreach is to raise awareness of homelessness in South Mississippi and to provide education to the general public and policy-makers regarding homelessness and its causes.

The Community Outreach Committee will include task groups or subcommittees charged with:
   a) Community education and
   b) Membership recruitment.
Functions of the Community Outreach Committee include:

a) Engaging a broader constituent base (schools, businesses, municipalities, public housing agencies, law enforcement, and faith-based groups) as participants in MS-503 CoC;

b) Utilizing local media;

c) Producing publications and informational packets for sharing;

d) Convening community forums; and

e) Developing a speaker’s bureau.

Section 6. **Advocacy Committee:**

The goal of advocacy is to broaden support for and actively seek implementation of public policy results on policy issues deemed critical and relevant to those experiencing homelessness and those serving the population of people who are homeless.

Functions of the Advocacy Committee include:

a) Instigating and participating in efforts of local municipalities within the six county regions designed to actively address the issue of homelessness and removal of barriers to persons experiencing homelessness;

b) Holding ongoing and regular meeting with local policy makers;

c) Actively pursuing the recreating of the Governor’s Policy Academy on Homelessness and providing representation to the Academy;

d) Identifying specific advocacy issues requiring attention (e.g. State I.D.’s, National Housing Trust Fund); and

e) Mobilizing persons across a wide community base to seek change that would reduce homelessness or eliminate barriers.

**ARTICLE VI: OFFICERS**

Section 1. **Number**

The officers of the MS-503 Governing Council shall be a Chair of the Governing Council and Secretary.

Section 2. **Term of Office and Qualifications:**

The Nominating Committee shall present a slate of officers to the dues paying membership at its Annual Meeting. Elections shall occur by a majority vote of present members. Unless a shorter term is provided in the resolution of the Governing Council electing such officer, the term of office of each officer shall extend to the next Annual Meeting and until the officer’s successor is elected or appointed.

Section 3. **Removal of Officers:**

Any officer may be removed by the Governing Council with or without cause, at any time by a vote of two-thirds (2/3) of the Governing Council members then in office.

Section 4. **Resignation:**

Any officer may resign at any time by giving notice to the Governing Council, or to the Chair of the Governing Council or to the Secretary. Any such resignation shall take effect at the time specified therein, or, if no time is specified, at the time of notice.

Section 5. **Vacancies:**

A vacancy in any office shall be filled by the Governing Council in a timely fashion.
ARTICLE VII: CONFLICT OF INTEREST

Section 1. Conflict of Interest:

a) A conflict of interest generally refers to any situation in which a decision-maker, such as a member of the Governing Council, Governing Council officer or committee member, is influenced in an MS-503 Continuum of Care decision by personal, financial, business or other concerns that are unrelated to, or in conflict with, the MS-503 General Membership’s best interests. The duty of a Governing Council member to avoid conflicts of interest is an expression of one of the paramount duties of a Governing Council member, the duty of loyalty. The duty of loyalty requires each Governing Council member to be faithful to MS-503 CoC’s best interests and not to use his or her position with respect to MS-503 CoC to advocate a personal agenda at MS-503 CoC’s expense. As such, each Governing Council member has a duty to place the interest of MS-503 CoC foremost in any dealings he or she undertakes with or on behalf of MS-503 CoC.

b) All Governing Council members shall adhere to the following Code of Conduct:

• No MS-503 COC Governing Council member shall use his or her position, or the knowledge gained by virtue of that position, in a manner that conflict with the best interests of MS-503 COC.

• Each Governing Council member has a duty to place the interest of MS-503 CoC first in any dealing with or on behalf of MS-503 CoC.

• The conduct of personal business between any Governing Council member and MS-503 CoC is prohibited, absent the express approval of the Governing Council. Pertaining to the CoC HUD funding process, Governing Council’ members who have an affiliation with a requesting agency shall absent himself or herself from the discussion pertaining to said approval of the recommendation and shall abstain from voting on said issue due to conflict of interest.

• If a Governing Council member has an interest in a proposed transaction in the form of a significant personal financial interest in the transaction or in any entity involved in the transaction, or holds a position of trust, including Governing Council member or officer in any such entity, he or she must make full disclosure of this interest before any discussion or negotiation of the transaction. Thereafter, the Governing Council member shall absent him or herself from the discussion if the Governing Council deems it appropriate.

• Any Governing Council member who is aware of a potential conflict of interest with respect to any matter coming before the Governing Council or a committee of the Governing Council shall disclose the potential conflict of interest before participating in any discussion or negotiation of any matter implicating such conflict.
of interest. Thereafter, the Governing Council member shall absent him or herself from the discussion if the Governing Council deems it appropriate.

- The solicitation and acceptance of gifts or gratuities, for personal benefit, by officers, employees, and agents of the MS-503 CoC is strictly prohibited.
- All officers, employees, and agents of the MS-503 CoC shall read and sign a copy of The Code of Conduct.

c) Violations of the Conflict of Interest Policy or any part of the Code of Conduct shall be grounds for immediate removal from the Governing Council or firing of employees or agents.

**ARTICLE VIII: GENERAL**

**Section 1. Office:**
The principal office of the MS-503 General Membership, which may be the same as its registered office, shall be at such place as the Governing Council may determine.

**Section 2. Books and Records:**
There shall be kept at the office of the MS-503 CoC or the designated Collaborative Applicant:

a) Correct and complete books and records of account;

b) Minutes of the proceedings of the Governing Council and of committees of the Governing Council and of the MS-503 General Membership;

c) A current list of the Governing Council members and officers of the MS-503 General Membership and their residence addresses;

d) Copies of such documents as the Internal Revenue Service or any other relevant authority may require the MS-503 General Membership to make available for public inspection; and

e) A copy of these bylaws and the Policies and Procedures of the MS-503 CoC.

**Section 3. Fiscal Year:**
The fiscal year of the MS-503 General Membership shall commence on January 1st in each calendar year and shall end on December 31st.

**Section 4. Waivers of Notice:**
Whenever notice of a meeting is required to be given under these bylaws, such notice shall be given in a manner reasonably calculated to be received no later than two (2) days prior to the meeting. Notice may be given orally or in writing or by means of electronic communication. The notice shall state the purposes, time and place of the meeting.

**Section 5. Amendments:**
Except as otherwise provided in these bylaws, a two-thirds (2/3) vote of the Governing Council members present and voting at any regular meeting shall be required to amend or repeal any bylaw of the MS-503 General Membership. Notice of the proposed changes must be given at one Governing Council meeting and the proposed amendment voted upon at a succeeding regular meeting.