

## **Housing and Urban Development's Continuum of Care**

### **Background:**

In 1987, Congress passed the first federal law specifically addressing homelessness. The Stewart B. McKinney Homeless Assistance Act of 1987, later renamed the McKinney-Vento Homeless Assistance Act, provides federal financial support for a variety of programs to meet the many needs of individuals and families who are homeless. The housing programs it authorizes are administered by HUD's Office of Special Needs Assistance Programs.

Initially, HUD did not impose any requirements for systemic planning at the local level. From 1988 to 1993, HUD held national competitions for its homeless assistance funds every year, for which individual organizations throughout the country wrote applications. However, since 1994, HUD has required each community to come together to submit a single comprehensive Continuum of Care (CoC) application rather than allowing applications from individual providers in a community. HUD's intent in creating this structured application process was to stimulate community-wide planning and coordination of programs for individuals and families who are homeless.

The enormous diversity of individuals and families who are homeless and the unique problems and specific needs of each subgroup require highly complex service systems. The need to provide specialized services for different sub-populations means some services or programs are appropriate for some groups of clients but not others. In addition, a single client may need the help of numerous mainstream services beyond housing including health care, cash benefits, food, employment, and substance abuse treatment. Community-wide planning and coordination among homeless service providers and mainstream service providers is important if individuals are to get the help they need and eventually leave homelessness.

While the CoC application process provides communities with an incentive for creating a coordinated homeless services system, planning that is limited to this application process will not result in a comprehensive homeless services system. To achieve these results continuums need to conduct multi-year, comprehensive, strategic planning efforts that encompass mainstream services and multiple funding sources.

### **The McKinney-Vento Homeless Assistance Act**

The McKinney-Vento Homeless Assistance Act As Amended by S.896 HEARTH Act of 2009. Changed the landscape of the continuum of care.

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, consolidates three of the separate homeless assistance programs administered by HUD under the McKinney-Vento Homeless Assistance Act into a single grant program. The HEARTH Act also codifies into law the Continuum of Care planning process, a longstanding part of HUD's application process to assist homeless persons by providing greater coordination in responding to their needs. The amended language:

- Emphasizes Rapid Re-housing and housing first
- Focus on outcomes, where goal=moving into permanent housing
- Emphasizes the system as a whole, not program or projects
- Emphasizes collaboration among a broader range of stakeholders

Links: <https://www.hudexchange.info/resource/1715/mckinney-vento-homeless-assistance-act-amended-by-hearth-act-of-2009>

Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH): CoC Program Interim Rule  
Date Published: July 2012

### **Description of Interim rule**

This interim rule focuses on regulatory implementation of the new Continuum of Care (CoC) Program, including the Continuum of Care planning process. The existing homeless assistance programs that comprise the Continuum of Care program are the following: the Supportive Housing program, the Shelter Plus Care program, and the Moderate Rehabilitation/Single Room Occupancy (SRO) program. This rule establishes the regulations for the Continuum of Care program, and, through the establishment of such regulations, the funding made available for the Continuum of Care program in the statute appropriating Fiscal Year (FY) 2012 funding for HUD can more quickly be disbursed, consistent with the HEARTH Act requirements, and avoid any disruption in current Continuum of Care activities.

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, consolidated three of the separate homeless assistance programs administered by HUD under the McKinney-Vento Homeless Assistance Act into a single grant program, and revises the Emergency Shelter Grants program and renames it the Emergency Solutions Grants program. The HEARTH Act also codifies into law the Continuum of Care planning process, a longstanding part of HUD's application process to assist homeless persons by providing greater coordination in responding to their needs. The HEARTH Act also directs HUD to promulgate regulations for these new programs and processes. The interim regulation was published in the Federal Register on July 31, 2012 and became effective August 30, 2012.

Although the Hearth Act has been around for six years it took off in Florida during the past three years.

<https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>

### **Purpose -Continuum of Care**

As an entity, a CoC serves two main purposes:

- To develop a long-term strategic plan and manage a year-round planning effort that addresses the identified needs of homeless individuals and households; the availability and accessibility of

existing housing and services; and the opportunities for linkages with mainstream housing and services resources.

Ultimately, continuums should engage in multi-year, strategic planning for homeless programs and services that are well integrated with planning for mainstream services. This process will likely involve periodically rethinking goals and altering the planning process to meet the changing needs of homeless subpopulations and evaluating and improving the quality of programs and services offered.

- To prepare an application for McKinney-Vento Homeless Assistance Act (McKinney-Vento) competitive grants.

These resources are invaluable in providing housing and supportive services for people who are homeless. These funds are made available through a national competition announced each year in HUD's Notice of Funding Availability (known as the HUD SuperNOFA). Applications should demonstrate broad community participation and identify resources and gaps in the community's approach to providing outreach, emergency shelter, and transitional and permanent housing, as well as related services for addressing homelessness. An application also includes action steps to end homelessness, prevent a return to homelessness, and establishes local funding priorities.

- To designate and operate a Homeless Management System. HMIS is a local information technology system used to collect client level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management and reporting standards.

### **Why is Continuum of Care Important?**

**Assess capacity and identify gaps:** Continuum of Care planning provides communities with an opportunity to step back, critically assess capacity, and develop solutions to move homeless people toward permanent housing and self-sufficiency.

**Proactive rather than reactive:** Continuum of Care planning helps communities look comprehensively at needs and to anticipate policy or demographic changes and develop the capacity to respond to these changes (e.g., new drug therapies for people living with HIV/AIDS which change the models of supportive housing most appropriate for this population).

**Common goals for which to advocate:** Continuum of Care planning helps communities develop a common vision and a set of common goals.

**Coordination and linkages:** Historically, homeless services have been fragmented at best.

Continuum of Care planning helps providers identify ways of coordinating and linking resources to avoid duplication and facilitate movement toward permanent housing and self-sufficiency

### **Continuum of Care Membership**

The Continuum of Care membership should be comprised of Non-profit organizations (including those representing persons with disabilities); State and local government agencies; Public housing agencies; Community and faith-based organizations; Housing developers; Hospitals and medical representatives or other private health care associations; Advocacy groups; Law enforcement and corrections agencies; School systems; Private funding providers; Persons who are/have been homeless; Veteran service organizations; Local workforce investment act boards; Businesses; and Other homeless providers and service providers.

### **Managing an effective Continuum of care**

The Continuum of Care (CoC) is first and foremost a planning process. The goal is to understand the size and scope of the problem of homelessness in a community, and to design strategies and solutions to address the problem. It is locally driven, although the process must meet federally set objectives and follow a federally mandated process.

The year round planning process is focused on the community's approach to ending homelessness. In order to formulate an approach, each CoC needs a comprehensive understanding of the number, type and needs of people who are homeless in the community, with a special focus on identifying and tracking people who are chronically homeless. Each Continuum also needs a comprehensive picture of what resources and services are already available to meet the needs of people who are homeless.

### **Best Practices in Continuum of Care**

In October Staff attended a Webinar sponsored by the Florida Coalition for Homelessness presented by Dr. Susan Pourcaiu, titled Best Practices for Homelessness Continuum of Care Governance. According to Dr. Pourcaiu, there has been a major paradigm shift in HUD's approach to homelessness as mentioned in previous paragraphs. The 2009 Hearth Act changed the federal landscape and shifted to:

- Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH)
- Emphasizes rapid re-housing and housing first
- Focus on outcomes, where goal=moving into permanent housing
- Emphasizes the system as a whole, not programs or projects
- Emphasizes collaboration among a broad range of stakeholders

She stressed that in the not so distant past COC's seem to be fighting against each other for resources and the Hearth Act was established to include that the COC be comprised of relevant organizations within a geographic area. There are 27 COC's some are one county and others are up to 8 or 10 counties. The geographic designation was made by locals back in the day prior to the Hearth Act. She encouraged the COC's to actively recruit and explain to members of the community why they should participate in the COC. It is critical to have these stakeholders present because HUD will ask the question of participation when grants applications are made. The COC Board of Directors should serve as the backbone agency. In some communities the Homeless Coalition serves as the lead agency and the backbone agency. The role of the COC Board is to .... She also recommended that the COC Board Must have a member w

## Best/Good Practices

- CoC Board should have a member who has been or is homeless (this is the one inviolable rule)
- No constituency, including homeless service providers, has more than 35% of CoC Board seats
- Chair of CoC Board should not be a homeless assistance provider
- Lead agency and collaborative applicant should not be a homeless assistance provider
- In all votes by the CoC Board, “conflicted members should recuse themselves
- Clarity about authority and roles, especially vis a vis CoC Board
- Lead agency and CoC board should have different members to avoid the appearance of improprieties
- Have written documents
  - ✓ Governance Charter
  - ✓ Code of conduct
  - ✓ CoC standards (e.g. coordinated entry, ESG assistance, prioritization for housing)
  - ✓ Priorities
  - ✓ MOU between backbone agency and CoC
  - ✓ MOU between CoC and HMIS Lead
  - ✓ Processes for funding that flows through the backbone agency and the CoC

## Barriers to a good CoC Governance

- CoC isn't broad enough
- CoC Board is dominated by a specific interest group (e.g. homeless providers, local government)
- Concerns about liability
- Resistance to change
- Too many people wanting to be involved in decisions micromanaging
- Weak committees
- Lack of transparency
- Too much or too little influence of the backbone agency
- Insufficient administrative capacity and funding
- Too many meetings not enough leadership

<https://vimeo.com/145315840>

## Summary

The term Continuum of Care is used many different ways and can refer to the planning process, the collection of stakeholders involved in the planning process, the geographic area covered by the CoC, or the actual grant received from HUD.

The CoC planning process is typically organized by either a local government agency or a large community-based nonprofit. *Locally it is organized by the Alachua County for the Homeless and Hungry DBA the North Central Florida for the Homeless and Hungry.* The geography covered by a CoC can vary,

covering an entire city, state, or a collection of counties. The goal of the CoC process is to create an annual plan to address homelessness. The CoC process involves compiling information about homelessness in the community, including information about homeless populations and inventories of homeless assistance resources. This information is used to develop a list of priorities for funding, which helps determine how much funding a community will receive and for what projects. Currently the local COC is in the process of expanding its membership .

In recent years, HUD has required coordination between CoCs and local planning bodies that are preparing ten-year plans to end homelessness. Ten-year plans are intended to provide community-wide strategies for ending homelessness, including use of McKinney-Vento funding, but also including use of funding from other HUD programs such as Section 8, the Community Development Block Grant (CDBG) program, or the HOME Investment Partnerships program, as well as other federal, state, and local funding.

The HEARTH Act reauthorized the housing title of the McKinney-Vento Act. HUD began issuing regulations in 2011, with the release of interim regulations on the Emergency Solutions Grant (ESG) and the Homeless.