

# Salt Lake/Tooele Counties Continuum of Care Governance Charter

## **HEARTH Act 2009**

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) amended the McKinney-Vento Homeless Assistance Act. Among other changes, the HEARTH Act consolidated the three separate McKinney-Vento homeless assistance programs (Supportive Housing Program, Shelter Plus Care program, and Section 8 Moderate Rehabilitation SRO program) into a single grant program known as the Continuum of Care (CoC) Program.

The U.S. Department of Housing and Urban Development (HUD) published the Continuum of Care Program interim rule in the *Federal Register* on July 31, 2012. The rule was posted on HUD's website and now governs the CoC Program.

The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the program is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its program to the particular strengths and challenges within that community. Each year, HUD awards CoC Program funding competitively to nonprofit organizations, States, units of local governments, and/or instrumentalities of State or local government collectively known as **recipients**. In turn, recipients may contract or subgrant with other organizations or government entities, known as **subrecipients**, to carry out the grant's day-to-day program operations.

## **Purpose of the Governance Charter**

The CoC is ultimately responsible for all duties assigned in the CoC Program interim rule. The Governance Charter defines roles, responsibilities, and committee structures as we collaborate in separate but aligned activities and responsibilities. This charter provides at a minimum the basics required for operation of the CoC. The CoC recognizes that this is a living document and may be revised as the Continuum matures to further define roles and responsibilities of stakeholders within the Continuum. Additional documents may be drafted to address specific details required to execute the operations of the CoC.

This document serves as the Salt Lake and Tooele Counties' Continuum of Care Governance Charter.

## **Background of the Salt Lake Tooele Continuum of Care**

A Continuum of Care is a collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional, and permanent housing and other service resources to address the various needs of homeless persons. HUD also refers to the group of service providers involved in the decision making processes as the "Continuum of Care." Funding comes through HUD. In Salt Lake and Tooele counties, the CoC is evolving through participation in a Collective Impact model where stakeholders in the community meet on a periodic basis to provide input regarding homeless system issues. This Collective Impact Steering Committee provides a vision for the community, establishes desired outcomes and, through community consensus, partners with key funders to meet the homeless needs of the Salt Lake and Tooele communities. The CoC recognizes the value that the Collective Impact model brings to the Salt Lake/Tooele community and works with them to achieve outcomes for the overall community. The CoC recognizes and works with the Collective

Impact Steering Committee to contribute to achieving outcomes and results identified by the Collective Impact Steering Committee.

### **Key Stakeholders**

Key stakeholders identified by the CoC include the Membership, Board, Collaborative Applicant (Backbone Agency), and the HMIS Lead. Listed below in general terms are the functions these stakeholders provide. Listed later in the charter are specific duties required by HUD and how these stakeholders fulfill those responsibilities.

### **Membership**

In order to meet the vision of the CoC it will take a broad membership to achieve community wide commitment to ending and preventing homelessness. The CoC strives to have as many relevant organizations of the following represented on the full membership:

- Nonprofit homeless assistance providers
- Homeless and formerly homeless persons
- Victim service providers
- Faith-based organizations
- Local, State and federal governments
- Businesses
- Advocates
- Public housing agencies
- School districts
- Social service providers
- Mental health agencies
- Hospitals
- Universities
- Affordable housing developers
- Law enforcement
- Organizations that serve homeless and formerly homeless veterans

The CoC recognizes that the authority rests with the Membership to delegate authority to key stakeholders to ensure the operational efficiency and reporting of the CoC. The Membership is responsible for adopting, maintaining and updating by-laws that will govern the committees, membership and their leadership. The Membership will meet at least semiannually and publish their agenda and minutes on a website accessible to the public.

In the June 18, 2015 Membership meeting, the Membership voted and approved the following to fulfill the following Key Stakeholder roles:

1. Salt Lake County Homeless Coordinating Council Executive Committee as the Board
2. Salt Lake County Government as the Collaborative Applicant
3. Housing and Community Development Division of the State of Utah Department of Workforce Services (DWS) as the HMIS Lead

### **Board**

The Board is elected by the Membership. The Board will be representative of the membership of the CoC and will include: representatives of organizations providing housing or services for persons experiencing homelessness; at least one homeless or formerly homeless individual; and, members from the public and private sectors. Geographically, board membership will include members representing both Salt Lake and Tooele Counties.

The primary responsibilities of the board are to represent the membership and ensure that all other stakeholders fulfill responsibilities delegated by the CoC Membership. The Board will ensure that all other stakeholders fulfill responsibilities delegated by the CoC Membership by creating and maintaining memorandums of understanding that outline how stakeholders and the Board will be accountable to each other to achieve results required of the CoC. The Board represents the CoC Membership through participation on the Collective Impact Steering Committee and the State Homeless Coordinating Committee. The chair and vice chair of the Board have positions on the Collective Impact Steering Committee and the chair has a position on the State Homeless Coordinating Committee. In turn, the Board represents the Collective Impact Steering Committee to the membership of the CoC. The Board also has a formal responsibility to align CoC vision and outcomes with the Collective Impact Steering Committee.

### **Collaborative Applicant (Backbone Agency)**

The Collaborative Applicant (CA, fulfilling the role of “backbone agency” under the collective impact model of change), who is Salt Lake County, is responsible for facilitating the community response to the annual Continuum of Care (CoC) Notice of Funding Availability (NOFA) issued by the U.S. Department of Housing and Urban Development (HUD) and providing all other operational, staffing and administrative support for the CoC. This includes managing communications, general oversight and monitoring of CoC programs, and coordinating planning activities, including identifying gaps and needs and ensuring plans are created to meet those identified needs. The CA also works with other ESG funders to coordinate activities according to ESG and CoC requirements. Finally, the CA is responsible to communicate agreed performance metrics to homeless provider agencies and track progress. The Collaborative Applicant is funded through CoC planning dollars and may be supplemented through State funds, County funds and other sources of income. The Collaborative Applicant may simultaneously be asked to fulfill responsibilities as a backbone agency for the Collective Impact Steering Committee. Such roles and responsibilities will be clarified and monitored through a memorandum of understanding that is updated annually.

### **HMIS Lead**

The three Utah CoCs designate the Housing and Community Development Division of the State of Utah Department of Workforce Services (DWS) to manage the HMIS operations on its behalf and to provide HMIS project administration functions, including staffing with State employees and managing budget and grant requirements. UHMIS works with the Utah Homeless Management Information System (HMIS) Steering Committee, which includes representation from all three CoCs, to create and approve policies and procedures for the UHMIS database. The HMIS Steering Committee will also act as an approval/advisory body that supports and enhances the overall mission of the Utah HMIS Project by advising HMIS Project staff. Together the Utah Homeless Management Information System and the HMIS Steering Committee provide analysis of trends and report performance.

Membership recognizes that the preferred Homeless Management Information System Software is ClientTrack, as developed in the Utah HMIS database.

**Board Member Nominations and Elections.** The Board will be comprised of 7 to 11 members. Directors of the board are elected to two year terms by a simple majority of the voting Membership attending an annual Membership meeting. The Board will solicit nominations from CoC members and develop a slate of candidates for election to the Board giving preference to candidates who:

- a. Help satisfy the Board composition requirements defined above;
- b. Bring valuable experience and expertise to the Board (including one member being a homeless or formerly homeless individual); and

- c. Have demonstrated interest, diligence and effectiveness in working toward the CoC's mission.

Each director shall hold office until her/his successor is duly elected or recognized. Directors may serve a maximum of three (3) successive terms. Any current officers are exempt from this rule of three successive terms while serving in an Officer role.

This Charter of the CoC will be reviewed, updated, and approved by the CoC Membership annually along with the approval of the CoC Policies and Procedures that are in the appendix of this document at the Membership annual meeting in the third / fourth quarter.

**Code of Conduct, Conflicts of Interest and Recusal Process.** CoC Board members must exercise care when acting on behalf of the CoC as do Prioritization Committee Members when prioritizing grant funds. These individuals must complete the work they have agreed to undertake in a timely manner. In addition, they must attend respective Board and Prioritization meetings and be prepared to discuss matters presented for their deliberation. Absence without notice or explanation for three meetings within a calendar year or repeated failure to complete work assignments will be grounds for removal from the Board. Repeated failure to participate thoughtfully and respectfully in discussions or persistent disruptive or obstructive conduct during meetings will be grounds for removal.

CoC Board and Prioritization Committee members must abide by the following rules in order to avoid conflicts of interest and promote public confidence in the integrity of the CoC and its processes. Failure to honor these rules will be grounds for removal from the Board and any of its committees.

1. Members may not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefit to:
  - a. Any organization that they or a member of their immediate family represents; or
  - b. Any organization from which they or a member of their immediate family derives income or anything of value.
2. Whenever CoC Board members or any of their immediate family members have a financial interest or any other personal interest in a matter coming before the Board or one of its committees, they must:
  - a. Fully disclose the nature of the interest; and
  - b. Withdraw from discussing, lobbying and voting on the matter.

At the beginning of every Board meeting, the Chair must ask if there are any conflicts of interest or potential conflicts of interest that need to be disclosed before the business included in the meeting's agenda is discussed. At the beginning of the Prioritization Process, the Chair will ask Committee Members to disclose any potential or actual conflicts of interest.

Any matter in which CoC Board members or Prioritization Committee members have an actual or potential conflict of interest will be decided only by a vote of disinterested individuals. The minutes of any meeting at which such a vote is conducted must reflect the disclosure of interested directors' actual or potential conflicts of interest and their recusal from participation in the decision.

CoC Board members and Prioritization Committee members must sign a conflict of interest form annually, affirming that they have reviewed the conflict of interest policy and disclosing any conflicts of interest they face or are likely to face in fulfilling their duties as Board members and/or Prioritization Committee members.

**Oversight of Regulatory Responsibilities of the Continuum of Care (CFR 578.7)**

Responsibility:	Required Activities:	Responsible Stakeholder(s):
(a) Operate the Continuum of Care	(1) Hold meetings of the full membership, with published agendas, at least semi-annually	Board; Collaborative Applicant
	(2) Make an invitation for new members to join publicly available within the geographic area at least annually;	Collaborative Applicant
	(3) Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years;	Board
	(4) Appoint additional committees, subcommittees, or workgroups;	Board
	(5) In consultation with the Collaborative Applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with subpart B of this part and with HMIS requirements as prescribed by HUD; and a code of conduct and recusal process for the board, its chair(s), the Prioritization Committee and any person acting on behalf of the Board;	Board; requires formal Membership approval
	(6) Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and take action against poor performers;	Collaborative Applicant
	(7) Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD;	Collaborative Applicant
	(8) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non victim service providers. This system must comply with any requirements established by HUD by Notice.	Collaborative Applicant
	(9) In consultation with recipients of Emergency Solutions	Collaborative Applicant

	Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance	
	(1) Designate a single Homeless Management Information System (HMIS) for the geographic area;	Board; requires formal Membership approval
(b) Designating and operating an HMIS. The Continuum of Care must:	(2) Designate an eligible applicant to manage the Continuum’s HMIS, which will be known as the HMIS Lead;	Board; requires formal Membership approval
	(3) Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.	HMIS Lead
	(4) Ensure consistent participation of recipients and subrecipients in the HMIS; and	HMIS Lead
	(5) Ensure the HMIS is administered in compliance with requirements prescribed by HUD.	HMIS Lead
	(1) Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:  (i) Outreach, engagement, and assessment;  (ii) Shelter, housing, and supportive services;  (iii) Prevention strategies.	Collaborative Applicant
(c) Continuum of Care planning. The Continuum must develop a plan that includes:	(2) Planning for and conducting, at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements:	Collaborative Applicant
	(3) Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;	Collaborative Applicant
	(4) Providing information required to complete the Consolidated Plan(s) within the Continuum’s geographic area;	Collaborative Applicant
	(5) Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum’s geographic area on the plan for allocating Emergency Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.	Collaborative Applicant

## Grievance

### Pre-Complaint Process

Ideally, disputes and problems should be resolved between parties on a one-to-one basis. The issues should be clearly stated and understood by both parties. If this process does not resolve the matter, the aggrieved party may seek resolution through the process outlined below, which can lead to binding arbitration or alternative means such as mediation or facilitation. The scope of this grievance process is CoC membership.

### Formal Complaint Process

Member notifies his/her immediate supervisor/ Executive Director to discuss complaint, put complaint in writing, and discusses possible solutions.	If dispute is not resolved, then...	Supervisor/Executive Director discusses matter with Board Chair who replies in writing to member's complaint within 10 working days.
Member appeals to Board Chair within 5 working days. Board Chair must meet with parties within 5 working days of receiving appeal.	If dispute is not resolved, then...	Board Chair will discuss grievance with parties and within 5 working days, make a decision on the grievance and take any necessary action.
If decision is unfavorable to member, then member may submit to binding arbitration before an independent and qualified arbitrator.	If dispute is not resolved, then...	Arbitrator will make decision within a timeframe to be determined. Arbitrator will determine how the costs of arbitration are to be divided.

### Nondiscrimination

The Continuum of Care is a non-discriminatory organization and does not discriminate on the basis of age, sex, race, color, ethnicity, religion, creed, disability, sexual orientation, familial status, or national origin in accordance with all state and federal regulations.

### Approval History

Approvals	Summary of Changes
Salt Lake County Homeless Coordinating Council – September 10, 2015 CoC Membership Meeting	N/A