



# Collective Impact on Homelessness

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*Follow Up Packet from March 18, 2015*

With Prep Reading for Wednesday, April 08, 2015 from 8:30-10:00am at the Salt Lake County Government Center, 2001 S. State Street, Conference Rm N2-800, Salt Lake City, UT 84190

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## COLLECTIVE IMPACT ON HOMELESSNESS

### MINUTES OF THE STEERING COMMITTEE MARCH 18, 2015

#### ACTIONS REQUESTED:

1. If you were in attendance but did not sign the attendance sheets, please contact JaNea Raines at [JRaines@slco.org](mailto:JRaines@slco.org).
2. All meetings are on the 2<sup>nd</sup> Wednesday of each month from 8:30-10:30am Please schedule the following:
  - a. April 8, 2015, 8:30 – 10:30am, North Bldg. N2-800
  - b. May 13, 2015 8:30 – 10:30am, North Bldg. N2-800
  - c. June 10, 2015 8:30 – 10:30am, North Bldg. N2-800
3. Please review the draft outcome and indicators in these minutes. Note that these capture the deliberations of our meeting and have not been compressed.

**Steering Committee members or alternates in attendance:** Mayor Ben McAdams, Caroline Moreno, Erin Trenbeath-Murray, Fraser Nelson, Fred Ross, Glenn Bailey, James Morgese, Jason Mathis, Jennifer Steele, Jim Winder, Mayor JoAnn Seghini, Jonathan Hardy, Josh Romney, Kerry Bate, Laura Michalski, Lori Bays, Matt Minkevitch, Karen Hale for Mayor Ralph Becker, Melissa Jensen, Tara Rollins, David Kelly for Tiffanie Provost and Tony Milner.

**Members of the public in attendance:** Pauline Zvonkovic, Carlton Christensen, Kelly Steadman, Kim Corea, Mel Gardner, Mike Gallegos, Michelle Flynn, Pauline Zvonkovic, Randy Jepperson, Tamera Kohler and Valerie Walton

#### Welcome and introductions

Mayor McAdams welcome everyone and thanked them for their attendance. Fraser introduced and thanked Caroline Moreno, United Way, who is taking the place of Deborah Bayle.

#### Purpose of meeting

The meeting provided a structure to create a common agenda, which is a critical aspect to collective impact. Steering committee members and the public in attendance formed small working groups to respond to the current draft statement. This information was reported back to the body, and will be used to create a common vision as well as draft outcomes. The next step will be to determine which indicators the committee will use to measure progress toward this vision.

#### Comments to the draft common agenda

The committee began by discussing the current draft common agenda (vision) statement.

*We are committed to creating an integrated, efficient, and effective system to end homelessness in Salt Lake County. We will use our collective expertise and data to design systems that provide access to safe, affordable housing and the supportive services that are a pathway from homelessness to success.*

- Need to define what an 'end' to homelessness and 'success' means because we will have to say that we have accomplished these things.

- Success is defined individuals are in safe and affordable housing with the supportive services needed for a permanent pathway out of homelessness.
- Success is defined as self-sufficiency.
- Ending homelessness is defined as a quick response, providing resources needed to either get people into housing or away from the possibility of becoming homeless.
- Strengthen idea of collective impact and continuous improvement
  - The means to use our expertise to add resources and share data to provide access to safe affordable housing and supportive services on a pathway to success.
  - Add idea of aligning new and existing systems in a continuous improvement approach which requires that we are willing to come back and say “we have this data and that did not work here in this neighborhood but it did in that neighborhood.”
- Alternative language suggested
  - “We commit to creating an integrated and efficient system to quickly end homelessness for every individual in Salt Lake County”
  - “We will use collective expertise and data to design and coordinate systems by bringing better coordination to service providers.”
  - “To end homelessness in Salt Lake County and surrounding areas.”

Summary: Add continuous improvement element, recognize that success will focus on self-sufficiency, and the re-alignment of the systems to better serve individuals who are homeless or are at risk of becoming homeless. An end to homelessness be when we move people from a state of homelessness to a state of being housed, quickly, efficiently and collectively.

### Development of Indicators

The participants were asked to imagine what it would *look like, sound like and feel like* if Salt Lake County was able to end homelessness. These responses will help develop the outcomes and indicators the Steering Committee will use to align resources and action. The following are for discussion.

Outcome (What we want)	Indicators (What we can measure to know if achieved)
The homeless service system has universal fidelity to best practices	<ul style="list-style-type: none"> <li>— Number of providers using similar system measures</li> <li>— Number of evidence based practices used by providers</li> <li>— Development of a county wide plan to end homelessness</li> <li>— Shared data across all systems (School Districts, DWS, HIMIS)</li> <li>— Measureable progress on determined indicators</li> </ul>
A ‘No Wrong Door’ system exists (Services are coordinated and easy to access)	<ul style="list-style-type: none"> <li>— Number of points of entry</li> <li>— Number of cross agency referrals</li> <li>— Number of 211 Housing Crises calls</li> <li>— Diagram of all services available</li> <li>— Amount of duplication in system</li> <li>— County wide matrix of affordable housing units</li> <li>— County wide matrix of related services</li> <li>— Number of landlords calling seeking tenants</li> </ul>
Homelessness will be experienced only for short periods. It will be a rare and one-time event	<ul style="list-style-type: none"> <li>— Point In Time study</li> <li>— Number of families entering shelters for second or more time</li> <li>— Number of individuals entering shelters for second or more time</li> <li>— Number of people outside the Road Home</li> </ul>
Individuals who are homeless are known and have a relationship with a case manager/supportive system	<ul style="list-style-type: none"> <li>— Caseloads</li> <li>— Number of 211 housing crises calls</li> </ul>

Housing supply meets the demand and need of our residents	<ul style="list-style-type: none"> <li>— Number of deeply affordable housing units throughout the County (30% AMI or less),</li> <li>— Number of permanent supportive housing units</li> <li>— Number of ‘pockets poverty’ neighborhoods</li> </ul>
Pioneer Park is welcoming and safe for families, the homeless and businesses / Pioneer Park has no public dealing Pioneer Park and other high concentration areas feel like a neighborhood (less desperate crowds on Rio Grande street)	<ul style="list-style-type: none"> <li>— Vacancy rates for commercial real estate in vicinity</li> <li>— Move in / move out rates for businesses in vicinity</li> <li>— Number of events permitted in Pioneer Park</li> <li>— Number of community gardens in vicinity</li> <li>— Number of mixed use developments that include permanent supportive housing</li> <li>— Number of drug related arrests and first time dispositions</li> <li>— Number of building permits in region</li> <li>— Number of new residential units for all income</li> <li>— Number of calls to police</li> <li>— Number of individuals hanging out during the day</li> <li>— Local school</li> <li>— Noise ordinance calls</li> </ul>
People who experienced homelessness in the past or are at high risk of becoming homeless have stable, self-sufficient lives	<ul style="list-style-type: none"> <li>— Number of jobs created for people who have been homeless</li> <li>— Recidivism rates</li> <li>— Percentage of income going toward rent</li> <li>— Percentage of residents earning a living wage</li> <li>— Number of employment partnerships</li> <li>— High school graduation rates</li> <li>— GED rates</li> <li>— Post-secondary educational attainment</li> </ul>
Individuals have the services and supports they need to avoid becoming homeless	<ul style="list-style-type: none"> <li>— Amount of rental assistance dollars</li> <li>— Number of mental health services provided</li> <li>— Mental health emergency interventions</li> <li>— Employment rates</li> </ul>
The public shares concern and support for people who are at risk of or are homeless	<ul style="list-style-type: none"> <li>— Polling data on ‘seeing a person’s worth and value</li> <li>— Visitors to Pioneer park events</li> <li>— New businesses in target areas</li> <li>— Number of local cities providing funding for services</li> <li>— Financial transparency in the system</li> </ul>
There is a ‘rock bottom’ safety net - a safe place to sleep at night and a meal	<ul style="list-style-type: none"> <li>— Emergency shelter nights</li> <li>— Youth homeless numbers</li> <li>— Veterans homeless numbers</li> <li>— Elderly homeless numbers</li> </ul>
No individual spends more than 30 days in emergency shelter	<ul style="list-style-type: none"> <li>— Emergency shelter nights</li> </ul>
No family spends more than 10 days in emergency shelter	<ul style="list-style-type: none"> <li>— Emergency shelter nights</li> <li>— ASQ scores (measures children’s social and emotional well-being)</li> <li>— Number of times a child moves schools</li> <li>— School attendance</li> <li>— Families diverted from shelter to housing</li> <li>— Number of families served by faith based organizations</li> </ul>
Providers have a feedback mechanism for quality of the response system	<ul style="list-style-type: none"> <li>— Customer satisfaction</li> <li>— Donor feedback</li> <li>— Number of new HUD / other grants awarded</li> </ul>

	<ul style="list-style-type: none"> <li>— Effective dashboard that provides relevant data</li> </ul>
Trust exists between participants, providers, funders	<ul style="list-style-type: none"> <li>— Number of referrals</li> <li>— Public / transparent dashboard all can understand</li> <li>— Number of homeless people involved in collective impact work</li> </ul>
If someone returns to homelessness we know why and can prevent it next time	<ul style="list-style-type: none"> <li>— Treatment days</li> <li>— Jail bed days</li> <li>— Emergency calls</li> <li>— ER services</li> </ul>
People have access to the services they need when they need them	<ul style="list-style-type: none"> <li>— Integration of the criminal justice and health care systems</li> <li>— Number of affordable housing units for individuals</li> <li>— Number of permanent supportive housing</li> <li>— Amount of rapid rehousing funds</li> <li>— Length of stay in emergency shelter</li> <li>— Number of individuals receiving a complete assessment</li> <li>— Number of uninsured individuals</li> <li>— Percentage of low birth weight babies in targeted zip codes</li> <li>— Visits to Community Health Centers</li> <li>— Services provided by 4th Street Clinic</li> <li>— Emergency room visits</li> <li>— Behavioral health services</li> <li>— Pre natal visits</li> <li>— Pregnancy rate</li> <li>— Waiting list for detox</li> <li>— Section 8 waiting list</li> <li>— Number of 211 calls related to housing</li> </ul>
Young people do not experience homelessness	<ul style="list-style-type: none"> <li>— Number of foster children in youth shelter</li> <li>— Number of youth in shelter</li> <li>— Employment rate among disaffected youth</li> <li>— GED attainment among disaffected youth</li> <li>— Number of children in emergency shelter</li> <li>— School/Districts family double occupancy</li> </ul>

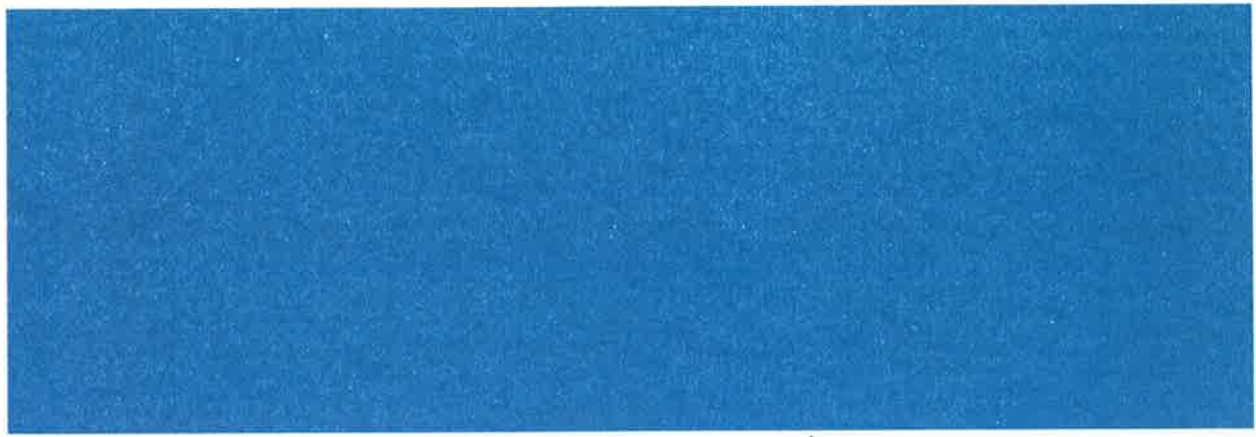
Mayor McAdams expressed his thanks and optimism about this effort. He likes the common agenda expressed in today's meeting and break-out sessions, and the vision of creating an "integrated, efficient and effective" system. The committee's collective knowledge background and experience are critical, and proposed that the Steering Committee be responsible for the Continuum of Care Program.

### **Continuum of Care**

Kerry Steadman presented the Continuum of Care: a funding source and planning process developed by the Federal Department of Housing and Urban Development. Continuum of Care principles are increasingly mirrored by those of the Collective Impact model, including a common vision and agenda, establishing shared measurement practices and outcomes, monitoring progress and making system improvements. Salt Lake County submitted last year's grant request (funding at \$6,000,000. Mayor McAdams would like this body to provide direction and guidance as the annual plan and funding request to HUD is submitted. More discussion is warranted and will take place at the next meeting. This meeting will also dive more deeply into outcomes and indicators.

**The meeting adjourned at 10:35am**





# Collective Impact on Homelessness

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*Prep Reading for Wednesday, April 8, 2015*

Contents:

- [Blog on Collective Impact, National Alliance to End Homelessness](#)
- [Homeless Assistance: Continuum of Care Planning, National Alliance to End Homelessness](#)
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## Field Notes: Collective Impact and Homelessness

written by Norm Suchar

January 15, 2014



More homeless assistance funders and community leaders are looking at the Collective Impact approach as a framework for their efforts to prevent and end homelessness. I'll discuss how communities are using this approach in a moment, but first here's a quick summary of five conditions of collective success, which I'm quoting here from the article, "Collective Impact" in the *Stanford Social Innovation Review*:

**"Common Agenda** Collective impact requires all participants to have a shared vision for change, one that includes a common understanding of the problem and a joint approach to solving it through agreed upon actions...

**"Shared Measurement Systems** ...Collecting data and measuring results consistently on a short list of indicators at the community level and across all participating organizations not only ensures that all efforts remain aligned, it also enables the participants to hold each other accountable and learn from each other's successes and failures...

**"Mutually Reinforcing Activities** Collective impact initiatives depend on a diverse group of stakeholders working together, not by requiring that all participants do the same thing, but by encouraging each participant to undertake the specific set of activities at which it excels in a way that supports and is coordinated with the actions of others...

**"Continuous Communication** Developing trust among [nonprofits, corporations, and government agencies] need several years of regular meetings to build up enough experience with each other to recognize and appreciate the common motivation behind their different efforts...

**"Backbone Support Organizations** Creating and managing collective impact requires a separate organization and staff with a very specific set of skills to serve as the backbone for the entire initiative..."

How could a community use such an approach to end homelessness? Based on our work with many communities around the country, here are some suggestions for adopting a collective impact approach.

### Identify a backbone organization

In communities with an effective homeless assistance system, there is an easily identifiable organization or agency that plans, oversees, and coordinates homeless assistance across the community. A backbone organization will be much more effective if it has control or at least influence over a significant share of homeless assistance funding. Our upcoming conference will have a session devoted to the role of backbone organizations in achieving collective impact.

### Develop shared goals and outcomes

Shared goals and outcomes should drive decision-making in a community. They should inform everything from the Continuum of Care (CoC) project ranking process to the content of job descriptions. My colleague Kim did a nice blog post recently about developing a vision for homeless assistance.

### Invest in system planning

The work of creating, organizing, and overseeing a homeless assistance system requires dedicated staff and resources.

### Invest in data

Some of the most common disagreements in a community—How much should be invested in emergency shelter? Is rapid re-housing working? Who is underserved?—can be answered with data. Unfortunately, many communities either do not trust their data because of data quality problems, or do not have the capacity to analyze their data. Investing in data and analysis is often difficult because there are other pressing needs, but it is essential for making progress.

### Change funding and accountability

The most direct and effective way to create system change is by ensuring that funders, including government agencies, foundations, and large private funders, agree on a common funding strategy that accomplishes the following:

- Funds only programs and activities that are consistent with the design of the new system and its shared goals and outcomes;
- Invests in system infrastructure, including data and system planning; and
- Aligns outcome measures, eligible activities, eligible populations, and reporting requirements with the community's shared goals and outcomes and with other funding sources.

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Philly Vets Home 2015 · a year ago

We are a coalition in Philadelphia dedicated to ending homelessness among veterans by December 2015. Collective Impact is our approach and we are trying our best. We have had amazing success but still have a ways to go. Thank you for this post. There are some gems of amazing insight in here: one year to build trust, funding activities that are consistent with the new system design, and data! data! data! Please keep the conversation going with specific examples of communities, more advice, and examples of structure in the process. Thank you! PhillyVetsHome.org

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# Homeless Assistance: Continuum of Care Planning

*By Norm Suchar, Director of Capacity Building, National Alliance to End Homelessness*

**Administering agency:** HUD's Office of Special Needs Assistance Programs within the Office of Community Planning and Development (CPD)

**Year program started:** 1994

**Population targeted:** Homeless people

**See also:** *McKinney-Vento Homeless Assistance Programs, Ten-Year Plans to End Homelessness, Federal Surplus Property to Address Homelessness, Interagency Council on Homelessness*

The Continuum of Care (CoC) planning process is the process used by communities to apply for funding from HUD's Continuum of Care program. Through the CoC planning process, government agencies, service providers, advocates, and other stakeholders evaluate the needs of homeless people in the community, assess the performance of existing activities, and prioritize activities going forward. The CoC process was introduced by HUD in the mid-1990s. It was codified into law by Congress through the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009.

## HISTORY AND PURPOSE

The CoC process was developed by HUD in 1994 to coordinate the distribution of several competitive homeless assistance programs. Prior to the CoC process, organizations applied individually for funding from several homeless assistance programs. As a result, there was little coordination between these programs or between different organizations receiving funding in the same community. The CoC process was established to promote coordination within communities and between programs. It was also designed to bring together a broader collection of stakeholders such as public agencies, the faith and business communities, and mainstream service providers. Guidelines for the CoC planning process were included in annual Notices of Funding Availability (NOFAs). HUD regularly modified the process.

On May 20, 2009, President Barack Obama signed the HEARTH Act (Public Law 111-22), providing Congressional authorization of the CoC process. Regulations governing the CoC program were published in the summer of 2012. The recently completed CoC application process for FY13 funds was the second competition held under new HEARTH Act rules.

## 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. 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.

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

Management Information Systems (HMIS), along with a final regulation on the definition of homelessness. Regulations on the CoC program were published in the summer of 2012. Key changes made by the HEARTH Act include changes to outcome measures, funding incentives, eligibility for assistance, matching requirements, rural assistance, and administrative funding.

HUD's annual homeless assistance NOFA has typically been issued late in the calendar year, with an application deadline later in winter. For the most recent application, which CoCs submitted in early February 2014, HUD released a joint FY13 and FY14 NOFA that will serve as the application for two years of funding; HUD plans to announce the availability for FY14 funds in late spring 2014. CoCs will only have to submit updated project priority listings and possibly small revisions to their application. HUD will announce FY13 funding in at least two stages, one for the renewal of existing projects, and one for new projects.

In most years, there has been adequate funding so that existing projects almost always received renewal funding. However, because of low funding levels for the FY12 and FY13 funding rounds, applicants had to prioritize projects, including renewal projects, into two tiers. The first tier has been virtually guaranteed to receive funding, while the second tier is at risk of not being funded.

### **FORECAST FOR 2014**

The HEARTH Act placed more of the responsibility for measuring outcomes and overseeing performance on the leaders of local CoCs. The HEARTH Act also authorized funding for these entities. However, Congress has not provided enough funding to enable HUD to fully implement the local administration, planning, and oversight envisioned by the HEARTH Act.

### **TIPS FOR LOCAL SUCCESS**

At the local level, ensuring broad participation among stakeholders and promoting access to mainstream resources are the most critical issues. The CoC planning process is intended to focus on the needs of homeless people in the community and should focus on the most effective strategies for reducing homelessness. Yet the process often ends up serving the needs of incumbent providers, even when they are ineffective, and people who are perceived to be more deserving of assistance, rather than those who are in greatest need. Similarly, accessing mainstream resources, which are supposed to be generally available for low income people, is often difficult for people experiencing homelessness. For example, there are often numerous barriers for homeless people to access employment services, housing assistance, cash assistance, and treatment services.

Advocates play a crucial role in ensuring that the CoC process serves people who most need assistance and expands access to mainstream resources. For CoCs to be most effective, it is important that all key stakeholders have a seat at the table. In many communities, the needs of children, veterans, people with disabilities, youth, and domestic violence survivors are not always adequately represented. Advocates should work to ensure that they are part of the CoC process. By joining their local CoC, advocates can shape a community's priorities in addressing homelessness for current and emerging populations.

The CoC process is becoming more focused on data and outcomes. All stakeholders should participate in data collection efforts whenever appropriate, and ensure that programs are achieving good outcomes. Information about the CoC process and the local CoC coordinator can be found at HUD's Homelessness Resource Exchange website.

### **FOR MORE INFORMATION**

National Alliance to End Homelessness, 202-638-1526, [www.endhomelessness.org](http://www.endhomelessness.org)  
National Coalition for the Homeless, 202-462-4822, [www.nationalhomeless.org](http://www.nationalhomeless.org)  
National Law Center on Homelessness & Poverty, 202-638-2535, [www.nlchp.org](http://www.nlchp.org)  
HUD Homelessness Resource Exchange, [www.hudhre.info](http://www.hudhre.info)



## United States Interagency Council on Homelessness

*No one should experience homelessness. No one should be without a safe, stable place to call home.*

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## HEARTH and Your Community

As providers and stakeholders across the country, we are all aware that the HEARTH Act enacted by Congress in 2009 is, in many ways, a game changer. It gave the federal government the charge to create the first federal strategic plan to prevent and end homelessness, setting forth the vision that no one in this country should be without a safe and stable place to call home. This strong statement by the federal government foregrounds the work of implementing the HEARTH Act in communities across the country. Perhaps most importantly, HEARTH moves governments and local stakeholders from a focus on individual program outcomes



### Related information by...

Department of Housing and Urban Development  
Homeless Crisis Response

to a focus on how all programs work as a system to achieve results for an entire community. Implementation of the HEARTH Act is critically important to all of the goals in Opening Doors: Federal Strategic Plan to Prevent and End Homelessness, especially Objective 10: to re-tool the homeless crisis response system to more effectively prevent homelessness and rapidly return people who experience homelessness back into stable housing.

HUD's recently released Notice of Funding Availability (NOFA) for the Continuum of Care program is a further indication of just how serious the federal government is about reaching the goals in Opening Doors. The Continuum of Care has always been a competitive grants program, and this NOFA essentially highlights the word "competitive" for Continuums this year. The NOFA makes it clear that communities cannot assume funding of all renewals and must therefore prioritize carefully. Because of the tight fiscal environment at all levels of government, all investments in ending homelessness must be smart investments. We cannot afford "business as usual" programming and practices if they are not getting the results needed to meet the goals in Opening Doors. The next step is taking a tough but necessary look at what's working and what could be modified for greater results in your community.

To help aid program changes for CoCs, HUD is providing greater flexibility to be thoughtful and strategic with federal dollars to fit the needs of particular communities. Communities now have more flexibility to reallocate resources to ensure a better system-wide response while being assured (as long as the new project meets threshold criteria) they will not lose their renewal amounts because of reallocations. HUD is awarding points to CoCs that do a thoughtful analysis of their system (see NOFA Section V.A.2.j). Communities are encouraged to repurpose existing programs that are not the most cost-effective to more cost-effective interventions, for example, repurposing a traditional transitional housing program into permanent supportive housing. Communities are also encouraged to reallocate resources away from a program or provider that is underperforming to a more effective program or provider.

The HEARTH Act makes clear that communities are expected to show how they're making progress in ending homelessness. The Act introduced key indicators for communities to show their progress, including reducing the number of people who experience homelessness, the length of time people remain homeless, and the rate at which people who exit homelessness but later experience homelessness and return to shelter. Now is the time for communities to use their data to drive to better results system-wide. An analysis of where your community is now and where your community needs to be is critical to success, not just in this funding cycle but also in the years ahead.

As communities do this thoughtful analysis, there are many questions to consider:

- How can your CoC use HMIS and PIT data to measure system and program performance then use this data to allocate resources? How can your local CoC approach system design strategically?
- Does your system have the right balance of interventions (rapid re-housing, permanent supportive housing) to respond to local needs?