

CoC NOFO applications are scored by HUD, and funds are awarded accordingly. A CoC’s application score can be the catalyst or barrier to system transformation. The higher the score, the more likely a CoC will be awarded funds for bonus and/or expansion projects to enhance their CoC’s homelessness response capacity. **Data and HMIS system performance directly impact CoC scoring – now more than ever.**

**Use this checklist to brainstorm HMIS related improvements to a CoC’s NOFO score, track point values and plan improvements they will work on before next year’s NOFO application.** The checklist highlights Notice of Funding Opportunity (NOFO) scoring factors where HMIS can impact scoring. It also provides potential Clarity Human Services and HMIS related action items to improve NOFO scoring. The checklist does not include all NOFO scoring factors -- only factors with potential HMIS impact are included.

 Checklist Definitions:

* **Scoring Factor:** The corresponding NOFO Factor information
* **Potential Clarity HMIS Action Items:** In this column Bitfocus has provided possible action items for improving scoring through improvements in Clarity HMIS practices. These suggestions can be modified or added depending on a community’s unique needs.
* **Point Value:** This column provides space for communities to input their score alongside the total score that could have been attained in 2023. This allows communities to assess the level of work that must be done to improve their scoring.
* **Planned Improvements:** This column is for communities to plan ideas for improvements to their NOFO score.

| CoC Application Scoring with HMIS Impact |
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| **Scoring Factor** | **Potential Clarity HMIS Action Items** | **2023 Point Value** | **Planned Improvements** |
| **1. CoC Coordination & Engagement** |
| **A1. Has an inclusive membership of a variety of stakeholders within the geographic area.**  | * Invite partners to use HMIS to enhance collaboration/demonstrate partnership.
* Use Clarity as a Victim Service Provider Comparable Database.
* Incentivize HMIS use to build partnership (cover license fees, provide equipment, advertise reporting capabilities).
 | \_\_\_\_ **/ 2** |  |
| **A2. Has an invitation process for new members to join** | * Post CoC/HMIS partner application process on CoC/HMIS Lead website for transparency.
* Create/Utilize reports on diversity of clients served in HMIS to identify gaps to support targeted outreach to service providers
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| **A3. Solicits and considers opinions from knowledgeable individuals and organizations** | * Encourage HMIS partners to provide feedback on their experience using HMIS, and respond accordingly.
* Start an HMIS advisory committee and ensure diversity of membership.
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| **B. Coordinates with Federal, State, Local, Private and Other Organizations** | Consultation with ESG* Provide data, including HIC/PIT data, to ESG recipients to collaborate on resource planning.
* Utilize Inventory Module to track bed/unit allocation based on funding type.

Ensure local homelessness information is communicated and addressed* Create and share community dashboards to showcase community trends and information.
* Seek presentation opportunities to spread awareness through data in other systems of care
 | \_\_\_\_ **/ 2** |  |
| **C. Ensuring families are not separated** | * Consider household and unit sizes in the Coordinated Entry referral processes
* Utilize Inventory Module to track unit sizes and eligibility. Identify whether there are programs or buildings that lead to family separation.
* Create and Utilize dashboards to show denial of service, denial of service reason and compare with overall demographics.
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| **D. Demonstrate CoC Collaboration related to Children and Youth** | * Utilize targeted Clarity access roles for child and youth providers to allow partner participation in HMIS while maintaining client privacy.
* Encourage service providers to participate in Coordinated Entry as a direct access point for families and youth in their system of care.
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| **E. Addresses the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking** | Implements Safety Planning and Confidentiality in Coordinated assessment data & uses de-identified, aggregate data* Use sharing groups and departments utilized to restrict access to client data.
* Privacy settings within Clarity adjusted to protect client data visibility.
* Access roles to place restrictions on what type of data staff can access and change.
* Create policies that allow entry of de-identified client profiles in HMIS.
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| **F. Addresses the needs of LGBTQ+ Individuals** | Demonstrate CoC has a process for evaluating compliance with the CoC’s anti-discrimination policies* Create equity centered reports/dashboards in Clarity Data Analysis.
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| **G. Coordinates with Public Housing Authorities (PHAs)** | Demonstrate how CoCs work with PHAs* PHA participation in HMIS and Coordinated Entry (Community queue, referrals, housing criteria)
* PHA participation in Clarity Inventory; use of inventory with housing vouchers
 | \_\_\_\_ **/ 10** |  |
| **H. Discharge Planning. Coordinates with and assists in state or local discharge planning efforts** | * Create specific data sharing agreements and/or access roles for Jail and Hospital staff
* Involve jail/hospital staff in Coordinated Entry and case conferencing
* Track Prior Residence HUD field to target partnerships that will reduce inflow
 | \_\_\_\_ **/ 2** |  |
| **I. Project in the CoC use a Housing First approach** | * Use reports to track denied referral reasons and reasons for clients exiting programs
* Re-evaluate eligibility criteria in project referrals
* Create and utilize a dashboard to monitor housing first practices
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| **J. Street Outreach. Implements outreach procedures covering the CoC Geographic Area** | * Utilize Clarity Outreach Module to manage outreach jurisdictions and ensure complete coverage.
* Add geolocation to Current Living Situation to map outreach locations and strategically improve coverage.
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| **L. Demonstrate an increase in the number of RRH beds available** | * Review Housing Move-in Date data quality to ensure accurate bed count for HIC submission.
* Utilize dashboards/reports (APR, HIC, PIT, Inventory) to show increase in housed RRH participants, OR that additional capacity is not needed.
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| **N. Demonstrate increase in providing non-congregate shelter** | * Utilize Clarity Inventory Module to demonstrate shelter structure/accommodations
* Review program set up and Housing Type to ensure non-congregate shelters are accurately represented in HMIS.
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| **O. Demonstrate Partnership with Public Health Agencies to respond to infectious disease outbreaks**  | * Create a Public Health provider limited access role in Clarity or schedule reports from Data Analysis to support responsible data sharing.
* Use custom assessments and a consistent HMIS workflow to document outbreaks and vaccine campaigns.
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| **P. Centralized or Coordinated Assessment System Affirmatively furthers Fair Housing** | * Utilize Coordinated Entry and/or Community Queue in Clarity
* Utilize Coordinated Entry Reports
* Utilize Clarity Outreach Module
* Utilize Clarity Inventory Module
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| **Q. CoC has assessed racial disparities and taken steps to address the disparities** | * Create and utilize equity dashboard in Clarity to analyze racial data in Clarity
* Track program funding tied to racial equity in Clarity
 | \_\_\_\_ **/ 7** |  |
| **2. Project Capacity, Review and Ranking** |
| **A. Objective Criteria. Demonstrate the use of objective criteria to review a project application requesting CoC Program Funding** | * Utilize standard HMIS data for objective scoring criteria
* Utilize the Program Performance Dashboard
* Review a consistent date range for consistency and to support SPM improvement (we recommend 10/1 to 9/30 annually)
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| **B. Using System Performance Measures. Demonstrate use of CoC Program required system performance measures to review applications requesting CoC Program Funding** | * Use project performance measures that support SPM improvement, for example: length of time in shelter projects, income growth, and percent of exits to permanent destinations.
* Review key SPM performance in Clarity Data Analysis to weigh rank and review scoring with CoC priorities.
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| **C. Compatible Database to Evaluate DV Providers. Demonstrate DV Survivor serving organizations submit performance data** | * Use standard reports, like the APR, and require DV providers to submit the same data as other providers as part of rank and review.
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| **D. CoC Collects and analyzes data on program participants in permanent housing and uses data on the severity of barriers experienced when ranking project performance** | * Utilize standard reports (such as APR, CAPER) to assist with quantifying data for written narrative.
* Incentivize programs that serve participants facing multiple complex barriers, for example no income at entry (Q16 on the APR) or multiple disabling conditions (Q13 on the APR).
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| **E. Advance racial equity in the local CoC Process** | * Compare demographics data in HMIS (or PIT) with census demographics for the CoC’s geographic area.
* Review project outcomes by race/ethnicity to identify disparities as part of rank and review.
* Create and Utilize Equity Dashboard as a tool to inform process.
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| **F. Reallocating Projects. Demonstrate that the CoC actively reviews performance of CoC Program Funded projects** | * Utilize Clarity dashboards and reports such as the APR, Program Performance Dashboard and Data Quality report.
* Weigh project performance heavily in the ranking process and consider reallocating underperforming projects.
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| **3. Homeless Management Information System** |
| **A. Housing Inventory Count (HIC). Submit complete HIC data in a timely manner.** | * Submit HIC on time using Clarity reports to ensure accuracy
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| **B. Has a comparable database for DV Providers** | * Utilize Clarity as a Comparable Database for DV providers.
* Utilize Clarity privacy settings, access roles, and agency/department settings to protect client information.
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| **C. Provide Bed Coverage rates for the housing type within the CoC** | * Target any project types with less than 85% HMIS coverage for improvement before next year.
* Utilize the DIT and HUD VASH Translator Tool to import from HOMES to make VASH HMIS participating.
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| **D. LSA. Usable LSA data submitted in a complete and timely manner** | * Utilize LSA Toolkit Dashboards to ensure complete and accurate data.
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| **4. Point-In-Time Count** |
| **A. PIT Count and Data Submission** | * Utilize Clarity to review sheltered PIT data for accuracy.
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| **5. System Performance** |
| **A. Demonstrate the decrease in the number of individuals and families who experience homelessness** | * Target a 5% decrease in sheltered and unsheltered PIT between the most recent and prior years.
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| **B. Demonstrate how the CoC works to reduce the number of those who become homeless for the first time.** | * Implement prevention/diversion strategies, including consistent workflows to document efforts and outcomes in Clarity.
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| **C. Reduce the length of time individuals and families remain homeless and describe how they will reduce this length of time** | * Utilize SPMs in Data Analysis to target extremely long stayers contributing to average length of time homeless.
* Review data quality for Project Start and End Dates, Housing Move-in Date, and Approximate date this episode of homelessness started.
* Provide targeted training around accurately entering data.
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| **D. Demonstrate an increase in the rate in which individuals and families move to permanent housing destinations or continue to reside in PH projects** | * Review Exit Destination data quality and plan for improvement.
* Review project level bed turnover rates and destinations to target technical assistance for projects with high rates of clients exiting to homelessness.
* Utilize Clarity for Coordinated Entry to understand a different perspective on the CoC’s outflow.
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| **E. Reduce the extent of recidivism within 6 months by housed persons** | * Review Exit Destination data quality to ensure clients truly exited homelessness.
* Review Exit Destinations for clients with short term recidivism for patterns. Are people returning more often when they exit to certain destinations?
* Enhance follow up and prevention efforts for clients who exit housing and shelter programs.
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| **F. Increase program participants incomes** | * Review Income and Sources data quality, including Annual Assessments and Exit income.
* Use HMIS data to target training and assistance.
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| **G. Submit SPMs in a timely manner** | * Utilize Clarity to run and submit SPMs.
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