

Governance Charter

Continuum of Care Background

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) amended the McKinney-Vento Homeless Assistance Act. The HEARTH Act amendments to the McKinney-Vento Homeless Assistance Act codified in law the role and functions of the Continuum of Care (CoC); thus, each community must establish a CoC in compliance with the new CoC Program Interim Rule. The U.S. Department of Housing and Urban Development (hereafter "HUD") published the Continuum of Care Program Interim Rule (24 CFR Part 578) in the Federal Register on July 31, 2012, and this rule now governs CoC composition and policy. For purpose of this Governance Charter and the local Continuum of Care region, the Metro Area Continuum of Care for the Homeless serves as the Continuum of Care Lead Organization.

The Metro Area Continuum of Care for the Homeless (hereafter "MACCH") coordinates the implementation of a housing and service system that meets the needs of all persons experiencing homelessness throughout its geography. This homeless prevention and response system includes:

- Outreach, engagement, and assessment
- Shelter, housing, and supportive services
- Homelessness prevention and diversion strategies

Roles and Responsibilities

This Governance Charter outlines the roles and responsibilities of the Continuum of Care, Continuum of Care Board, Continuum of Care Task Forces, the Continuum of Care Lead Agency, the Collaborative Applicant and the Homeless Management Information System (HMIS) Lead.

Definitions

Continuum of Care (hereafter "CoC"): This body is responsible for carrying out the duties identified in the Interim Rule. Representatives from relevant organizations include nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals. These organizations consist of the relevant parties in the geographic area. The Continuum of Care is a year-round planning body of representative stakeholders (including member agencies) in the community's work toward preventing and ending homelessness. Its work includes gathering and analyzing information in order to determine the local needs of people experiencing homelessness, implementing strategic responses, and measuring results. The Continuum of Care Task Forces and Work Groups are the action planning components of

the Continuum. In these, strategies are developed, deepened and expanded for purpose of implementing our community’s 10 Year Plan to Prevent and End Homelessness.

Collaborative Applicant: The designated organization (and/or local unit of government) that applies for annual and competitive Continuum of Care Funding to HUD on behalf of local homeless assistance projects. The Collaborative Applicant is designated by the Continuum of Care to prepare and submit the Continuum of Care funding application to HUD.

MACCH Performance Management Task Force (hereafter “PMTF”): The task force of MACCH charged with ongoing data review and discussion of system performance measures.

CoC Lead: The designated organization (and/or local unit of government) charged with coordinating year-round Continuum of Care operations, programming, and services. The Continuum of Care Lead Agency provides administrative and meeting support to the Continuum of Care, Continuum of Care Board, and the Task Forces/Work Groups.

Homeless Management Information System (hereafter “HMIS”) Lead: The organization designated by the CoC to oversee, manage, and administer the local HMIS implementation. The HMIS Lead is designated to provide oversight and implementation support to the Continuum of Care’s HMIS implementation.

CoC Board: The governing body of the specified CoC Lead Organization. The Continuum of Care Board is a group of elected leaders of the Continuum of Care who have authority to make decisions on behalf of the Continuum of Care.

Additional roles and responsibilities for each of these entities can be found in the following table:

Responsibility	Accountable Party
Define membership of Continuum of Care	MACCH as CoC Lead (inclusive of its staff, task forces, work groups, stakeholders, and governance)
Invite members annually	
Hold meetings of full membership, with published agenda, at least semi-annually	CoC at Large (in alignment with MACCH staff and the broader community) and through consultation with Provider Council
Establish a Continuum of Care Board	
Review the Written Selection Process for the Board	
Designate a Collaborative Applicant	CoC at Large and MACCH staff

<p>Designate Responsibilities to the CoC Board, HMIS Lead, and Collaborative Applicant</p> <p>Develop a Governance Charter</p> <p>Review Governance Charter annually</p>	<p>MACCH Board, MACCH Staff, and MACCH Provider Council</p> <p>The CoC, in consultation with the Collaborative Applicant and the HMIS Lead</p>
<p>Apply for CoC Planning Funds</p> <p>Designate a Single HMIS Lead for the entire CoC Geographic Area (must include CoC input via Provider Council)</p> <p>Submit annual application to HUD for Continuum of Care Program funding</p>	<p>MACCH (per its designated and staffed role as Collaborative Applicant since incorporation in 2006) and MACCH's Provider Council as appropriate</p>
<p>Consult with recipients and subrecipients to establish performance targets appropriate for population and program type</p> <p>Measure system performance via HUD's performance measures</p> <p>Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS</p>	<p>PMTF Itself (per its role as a MACCH-managed task force) representing the broader Continuum (and soliciting broader CoC input when and where appropriate)</p>
<p>Monitor recipient/sub-recipient performance</p> <p>Report on and evaluate the performance of program recipients and subrecipients</p> <p>Take action against poor performers</p> <p>Operate a Coordinated Entry System in consultation with ESG</p> <p>Ensure HMIS is in compliance with HUD requirements</p>	<p>MACCH (per its ongoing and staffed role as CoC Lead since incorporation in 2006) and inclusive of MACCH work groups as appropriate</p>

<p>Ensure consistent participation of recipients and sub-recipients in HMIS</p> <p>Plan and Conduct a Point-in-Time Study</p> <p>Ensure completion of an annual gaps analysis of homeless needs and services</p> <p>Participate in the Consolidated Plan and consult with ESG recipients and provide information necessary to complete the Consolidated Plan(s) within the geographic area</p>	
<p>Approve annual project ranking and tiering for Continuum of Care Program annual funding application to HUD</p>	<p>The MACCH Board of Directors (per its role as governing body of MACCH itself)</p>

The Governance Charter is considered complete and final only upon an annual CoC public comment period and subsequent CoC Board approval.

The Continuum of Care’s primary responsibilities include establishing and operating the Continuum of Care. In the case of HUD Continuum NE-501, MACCH serves in the following capacities: Collaborative Applicant and CoC Lead (which coordinates and leads the Continuum of Care). The CoC Board also serves as MACCH’s (and therefor the CoC’s) governance body overall.

Establishing the Continuum of Care

Representatives from relevant organizations within a geographic area shall establish a Continuum of Care for the geographic area to carry out the duties outlined in this Governance Charter.

Membership in the Continuum of Care

Membership in the Continuum of Care should ensure community-wide commitment to preventing and ending homelessness and must represent the entire geographic area covered by the Continuum of Care. The Continuum of Care defines a commitment to preventing and ending homelessness by the willingness to assist and impact the lives of people who are experiencing homelessness as well as the prevention and ending of the socially important condition of homelessness. The Continuum of Care includes the Counties of Douglas and Sarpy in Nebraska and Pottawattamie in Iowa.

Annually, the Continuum of Care will issue a public invitation for any interested person within the geographic service area to become a member of the CoC. The invitation is made public through the CoC Lead Agency's website and an email message to all interested parties on the Continuum of Care email listserv. MACCH maintains a [Membership Guide](#) detailing membership rights and responsibilities.

Continuum of Care Lead Agency

As noted above, MACCH serves as the Continuum of Care Lead Agency. Once every five years, MACCH shall convene a discussion during a Provider Council meeting regarding the selection of the Continuum of Care lead agency. General group consensus (of those present during the Provider Council meeting) shall determine the selection of the Continuum of Care Lead Agency.

Collaborative Applicant

MACCH serves as the legal entity who is also a Continuum of Care Program eligible applicant to serve as the Collaborative Applicant. The Collaborative Applicant is responsible for collecting and combining the required application information from all Continuum of Care Program funded projects within the geographic area. The Collaborative Applicant is also responsible for submitting the annual application to HUD for Continuum of Care Program funding and to apply for Continuum of Care Planning dollars.

Before the submission of the annual application to HUD for Continuum of Care Program funding, the Collaborative Applicant must submit a final draft of the application to the Continuum of Care for public comment. Depending on the timing of the submission to HUD, the Continuum of Care Board and Collaborative Applicant will create a timeline for submission to the Continuum of Care. At least once every five years, a designation of Collaborative Applicant shall occur by general consensus of current renewal CoC projects.

HMIS Lead

The Continuum of Care designated the Institute for Community Alliances (ICA) as the legal entity who is also a Continuum of Care Program eligible applicant to serve as the Homeless Management Information System (HMIS) Lead. The HMIS Lead will maintain the community's HMIS in compliance with HUD standards and coordinate all related activities including training, maintenance, and the provision of technical assistance to contributing organizations. MACCH's Performance Management Task Force develops and maintains an HMIS Data Quality Policy.

MACCH maintains an annually-signed and CoC Board-approved Memorandum of Understanding (MOU) with the Institute for Community Alliances regarding HMIS implementation and oversight.

Responsibilities

The Continuum of Care has specific responsibilities as outlined in the Continuum of Care Interim Rule.

Additional responsibilities set forth by the Continuum of Care include:

- Receive community and public policy updates relevant to homelessness issues;
- Advocate on behalf of all persons experiencing homelessness, including the implementation of efficient and effective service provision regardless of funding sources;
- Implement The 10 Year Plan to Prevent and End Homelessness;
- Review and act on the annual CoC-funding allocations; and
- Review and act on additional HUD required activities.

Written Agendas of Continuum of Care (CoC Meetings)

MACCH publishes written agendas of its monthly General Membership meetings via its organizational email listserv at least three business days before every General Membership meeting. Additionally, email agendas of task force meetings and board meetings are maintained and distributed as appropriate. MACCH General Membership meetings shall occur at least six times annually.

Coordinated Entry

MACCH's overall objective is to implement and sustain Continuum of Care-wide consumer entry, assessment, and housing prioritization in alignment with HUD's 2012 Interim Rule. For purpose of Coordinated Entry and prioritization of subpopulations, MACCH maintains a [Prioritization Policy](#).

Process for Monitoring Outcomes of HUD Emergency Solutions Grant (ESG)

For purpose of monitoring ESG outcomes, MACCH maintains a document titled "Standards of Administration of Assistance" (attached). Moreover and as of 2017, MACCH is currently developing a means of monitoring ESG outcomes per HMIS; a document referencing this process is currently being developed in collaboration with MACCH's Performance Management Task Force.

CoC Policies and Procedures

As CoC Lead, MACCH maintains formal [bylaws](#), policies, and procedures as necessary and as appropriate.

Written Process for Board Selection

As an independently incorporated nonprofit entity, MACCH maintains a written process for board director selection. Written processes are included within MACCH's CoC bylaws.

MACCH Code of Conduct

MACCH maintains an organizational Code of Conduct inclusive of a recusal process. The Code of Conduct is updated as appropriate and approved annually by the MACCH Board. MACCH also maintains a CoC Board Conflict of Interest Disclosure Form.

Establishing the CoC Board, Officers, Board Membership, and Meetings

All relevant information regarding the CoC (for purpose of this Governance Charter section) is contained within MACCH's Bylaws.

Decision Making

As the CoC Board, MACCH's Board of Directors abides by Robert's Rules of Order to the extent possible and reasonable. MACCH's Bylaws detail quorum and conflict of interest policies.

Written Standards for Administering Assistance

As noted above, MACCH maintains a document titled "Standards of Administration of Assistance."

Educational Attainment of Homeless Children

Per HEARTH Act objectives and HUD mandates, MACCH member agencies work with public school McKinney-Vento funded personnel to ensure homeless children are enrolled in early childhood programs and/or school.

CoC NOFA Rank and Review Process

MACCH maintains an objective and performance-based process for ranking/tiering of Continuum of Care-funded projects. This ensures a transparent, objective, and community-based use of HUD Continuum of Care homeless assistance funding.

Duties Assigned to the MACCH Board of Directors

MACCH's board serves as both the Continuum of Care Board (for MACCH as NOFA Collaborative Applicant) and the governance body for MACCH as a private nonprofit organization. Therefore, the general duties assigned to the board are as follows: ensuring policy development and implementation; ensuring oversight and final approval regarding MACCH's annual CoC NOFA project ranking and tiering; ensuring submission of MACCH's annual CoC NOFA Consolidated Application; and finally, ensuring MACCH remains a nonprofit organization in good standing per relevant State and Federal Laws. Current CoC Board Committees are as follows: Executive; Strategic Planning; Governance; and finally, Finance and Fund Development.

Establishing CoC Task Forces

The Continuum of Care Board and Provider Council may establish Task Forces or Work Groups that are made up of Continuum of Care members to act on behalf of the Continuum of Care. The Task Forces are the action planning components of the system for purpose of 10 Year Plan

implementation. In these bodies, strategies are developed, deepened, and expanded into timed work plans. These groups may also be directly responsible for specific strategies or exploring options to solve particular concerns. Unless authority is designated by the Continuum of Care, Task Forces may make recommendations to the CoC Board for approval.

Duties Assigned to CoC Task Forces and Work Groups

The primary duties assigned to MACCH task forces and/or work groups are those regarding implementation of “Opening Doors: The 10 Year Plan to Prevent and End Homelessness in Douglas, Sarpy, and Pottawattamie Counties.” In alignment with “Opening Doors: The Federal Strategic Plan to Prevent and End Homelessness,” MACCH’s 10 Year Plan goals are as follows: end chronic homelessness; end veteran homelessness; end child, family, and youth homelessness; and finally, set a path to reducing overall homelessness.

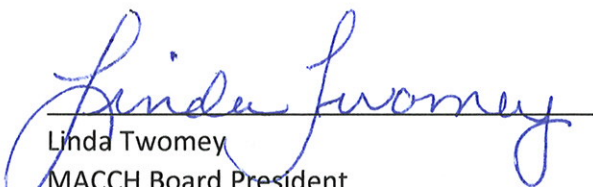
The MACCH task forces and/or work groups charged with implementation of the 10 Year Plan are as follows: Case Conferencing Work Group; Outreach Work Group; Coordinated Entry Work Group; Performance Measurement Task Force; Prevention and Diversion Task Force; Diversified Housing Task Force; and finally, the Youth Task Force. In addition to this, MACCH maintains a Provider Council consisting of member agency executive directors and/or designees; this body meets monthly and serves as an informal advisory group to the CoC Board.

MACCH Staffing Duties and Duties Assigned

MACCH currently consists of two full-time staffing positions, those being Executive Director and Assistant Director, respectively (in addition to contracted personnel and/or project managers as needed and as appropriate). The general duties assigned to MACCH staff are as follows: oversight of implementation and completion of CoC membership-level responsibilities; board development and outreach; fund development; governance policy development; annual Continuum of Care membership solicitation; contract oversight; preparation and submission of the annual CoC NOFA Consolidated Application; support of MACCH General Membership; support of all MACCH task forces and/or work groups and Provider Council; collaboration and partnership with the City of Omaha for purpose of its Consolidated Plan; and finally, MACCH representation within the broader community and/or Continuum of Care.

Updating, Amending, and Approval of the Governance Charter

MACCH’s Governance Charter is updated and amended every year as need be (following a CoC public comment period).


Linda Twomey
MACCH Board President

5/17/17
Date

Mary Meints
Mary Meints
MACCH Provider Council Chairperson

5-17-17
Date

Charles Coley
Charles Coley
MACCH Executive Director

5-17-2017
Date

Lisa Vukov
Lisa Vukov
MACCH Assistant Director

5/17/17
Date

