

**MAG Continuum of Care Regional Committee on Homelessness
HUD McKinney-Vento Homeless Assistance Funding
Program Performance Evaluation Methodology**

Federal Performance Goals:

- Reduce lengths of homeless episodes
- Reduce new and return entries into homelessness
- Increase jobs and income

Background

The purpose of the HUD Continuum of Care (CoC) homeless assistance program, as defined by the U.S. Department of Housing and Urban Development (HUD), is to reduce the incidence of homelessness in CoC communities by assisting homeless individuals and families quickly transition to permanent housing and self-sufficiency. The Maricopa Association of Governments (MAG) was established as the lead agency for the CoC in 1999 by the MAG Regional Council. The CoC has been successful in securing HUD McKinney-Vento homeless assistance funding for programs throughout the region of Maricopa County. Since 1999, the MAG CoC has been awarded more than \$243 million for 53 programs that provide permanent supportive housing, transitional housing, and supportive services for individuals and families throughout the community.

The MAG CoC is responsible for ensuring that the federal funding is being used as intended and that programs receiving funding are meeting federal performance goals of reducing length of homeless episodes, reducing new and return entries into homelessness, and are increasing jobs and income, as well as meeting local goals established by the CoC. The HUD McKinney-Vento Homeless Assistance Program, as reauthorized under the HEARTH Act of 2009, holds CoC's to a higher level of accountability for program-level and Continuum-wide performance achievement. Achievement of program and community outcomes will directly impact the score of the annual consolidated funding application and the competition for new program funding. The McKinney-Vento Funding Program Monitoring Plan will provide the CoC with the necessary procedures to properly assess program performance for compliance with both federal and local goals.

Methodology

The CoC will evaluate HUD McKinney-Vento funded programs to ensure compliance with both federal and local goals. A CoC Performance Evaluation Team will be established and will consist of MAG staff, and three non-provider members of the Continuum of Care Regional Committee on Homelessness (including members of the current Ranking and Review Panel). The Performance Evaluation Team will be selected by the Chair of the Continuum of Care Regional Committee, the Vice Chair of the Continuum of Care Regional Committee, and the Chair of the CoC Planning Subcommittee. Program performance will be assessed once a year and will occur in the fall, approximately during the month of October each year. The timing of program performance evaluation will work in conjunction with completion of the annual consolidated funding application to HUD, which usually occurs in the fall.

A Program Performance Report (PPR) will be created for each McKinney-Vento funded program as well as a Continuum-wide report of all programs funded within the CoC. The reports will act as a performance evaluation tool and will indicate program achievement in each of the performance standards outlined below. Achievement of the established performance standard varies as defined by each standard. Points are allocated for each standard ranging from zero to fifteen points per performance standard. Performance standards will be marked as either, "achieved", "not achieved", or "not applicable". Overall program achievement will be assessed based on the percent of all performance standards achieved.

Programs which meet less than half of the performance standards will be considered “programs of concern” and will be required to develop a 12-month action plan for improving program performance in the area(s) identified as not achieved. Programs of concern will be required to participate in quarterly progress meetings with the CoC Performance Evaluation Team. The meetings are intended to establish and routinely assess the progress of the 12-month action plan and ensure that the programs are taking steps needed to implement their action plan. The CoC Performance Evaluation Team will assess the program performance at the end of the 12-month period and determine if the program is improving in the areas identified and meeting federal and local goals. If the program performance has not improved significantly, as determined by the CoC Performance Evaluation Team, then the program will be recommended to the Continuum of Care Regional Committee on Homelessness to consider for possible funding reallocation or program repurposing during the local HUD McKinney-Vento NOFA cycle (beginning in 2013).

Peer Learning Opportunity

A peer learning opportunity will be piloted as part of the program review and performance improvement process. Peer groups will be established and will consist of groups programs serving similar homeless populations. Groups will include programs serving single adults, families, single youth (ages 18-24), singles combined with families and domestic violence survivors. Providers will be teamed with providers from similar program models and will share ideas and best practices with each other to improve project performance. Peers will be required to sign a conflict of interest statement and will not be involved in the scoring of projects or recommendations for reallocation or repurposing of funding.

Program Performance Report

All data generated for the Program Performance Report will derive from the Homeless Management Information System (HMIS), the Annual Performance Report (APR), data from providers, the local HUD Field Office, or from sign-in sheets collected at MAG Continuum of Care Regional Committee on Homelessness meetings. MAG staff will work with the provider and the HMIS Lead Agency to obtain the necessary data to generate the Program Performance Report. MAG staff will inform providers of deadlines to submit data.

Reallocation or Repurposing of Funding

Programs which meet less than half (insert hard number here) of the performance standards will be considered “programs of concern” and will be required to develop a 12-month action plan for improving program performance in the area(s) identified as not achieved. Programs of concern will be required to participate in quarterly progress meetings with the CoC Performance Evaluation Team. If the program performance has not improved significantly, as determined by the CoC Performance Evaluation Team, then the program will be recommended to the Continuum of Care Regional Committee on Homelessness to consider for possible funding reallocation or program repurposing beginning in the 2013 HUD McKinney-Vento NOFA cycle.

Funding reallocation or repurposing will be determined by a vote by the MAG Continuum of Care Regional Committee on Homelessness. HUD McKinney-Vento funded providers serving as members of the Regional Committee are required to abstain from voting on items related to program funding and/or reallocation of funding to ensure there is not a conflict of interest. Appeals on the basis of fact may be requested about the decision of the Regional Committee to reallocate program funding. An appeals review will be held, if necessary, and will be conducted by the CoC Performance Evaluation Team, the Chair and Vice Chair of the Regional Committee and the Chair of the CoC Planning Subcommittee. The decision of the appeals review will be considered final. Funding reallocation would be contingent on HUD approval during the annual consolidated funding application process.

Program repurposing will be recommended by the CoC Performance Evaluation Team, and determined by a vote by the MAG Continuum of Care Regional Committee on Homelessness. Program repurposing

will be recommended if a program is not performing up to federal and local expectations and if there is an opportunity to improve performance and meet local and federal needs by changing the program model. Repurposing would mean working with the program and the local HUD office to reclassify the program from one program model to another. For example, a transitional housing program could be converted, or repurposed, to become an emergency shelter program, a transition-in-place housing program, or a rapid re-housing program. The CoC Performance Evaluation Team would work closely with the program staff and the local HUD office on the repurposing plan and the timeline for completion of program repurposing. Program repurposing would be contingent on HUD approval during the annual consolidated funding application process.

Scoring Factors and Points Available

Factor	Points
1. Program serves “hard to serve” homeless population	15
2. Reduce length of homeless episodes and new and return entries into homelessness	10
3. Increase jobs, income and self-sufficiency	20
4. Achieve APR goals	5
5. Effective use of federal funding	10
6. HMIS data quality	10
7. Participation with the Continuum of Care Committee	5
Total Available	75

10 point scale distribution:

- 10 points =95-100% achieved
- 9 points =90-94% achieved
- 8 points =85-89% achieved
- 7 points =80-84% achieved
- 6 points =75-79% achieved
- 5 points = 70-74% achieved
- 4 points = 65-69% achieved
- 3 points = 60-64% achieved
- 2 points = 55-59% achieved
- 1 point = 50-54% achieved
- 0 points = 0-49% achieved

5 point scale distribution:

- 5 points = 91-100% achieved
- 4 points = 81-90% achieved
- 3 points = 71-80% achieved
- 2 points = 61-70% achieved
- 1 point = 51-60% achieved
- 0 points = 0-50% achieved

Outcome Achievement

- Outcome achieved = √
- Outcome not achieved = ≠
- Outcome measure not applicable = N/A

**MAG Continuum of Care Regional Committee on Homelessness
Program Performance Report**

Agency Name:		Program Name:			
Program Type:		McKinney-Vento Funding Amount:			
Date of Assessment:		Monitored by:			
Goals	Performance Standard	Data	Points Available	Actual Points	Achieved √ ≠ N/A
Project serves "harder to serve" homeless population.	At least 50 percent of households served by program at entry: -Mental Illness -Alcohol Abuse -Drug Abuse -Chronic Health Conditions -HIV -Developmental Disabilities -Physical Disabilities	HMIS, APR	50 % of households in program meet any <u>one</u> criteria = 5 50 % of households in program meet any <u>two</u> criteria = 10 50 % households in program meet any <u>three</u> criteria = 15		
Reduce length of homeless episodes and new and return entries into homelessness.	Permanent Housing (PH) Programs Only: At least 77 percent of homeless persons in PH stay over six months.	HMIS, APR	10		
	Transitional Housing (TH) Programs Only: At least 65 percent of homeless persons in TH move to PH.	HMIS, APR	10		
	Transitional Housing (TH) Programs Only: Average length of program stay is reduced 10 percent over a 12-month period.	HMIS	2012 baseline year – programs scored in 2013 competition.		
	Supportive Services Only (SSO) Programs Only: At least 80 percent of Performance Measures (listed in HUD Ex 2 application) are achieved.	HMIS, APR	10		
	<i>Future standard: Average number of clients who re-enter emergency or transitional shelter system over 12-month period is reduced by at least ten percent.</i>	HMIS	NOT being scored currently but will be when reporting is available in HMIS.	N/A	N/A
Increase jobs, income and self-sufficiency.	At least 20 percent of persons obtain employment at program exit.	HMIS, APR	5		
	At least 20 percent of participants are enrolled in education/skills training programs.	HMIS or Provider Report	5		
	At least 75 percent of participants are connected to mainstream resources at exit.	HMIS, APR	10		
Achieve APR program goals.	At least 80 percent of program goals in APR are achieved.	HMIS, APR	5		
Effective use of federal funding.	Cost per household served compared to positive housing outcomes. (Program budget ÷ households served)	Provider Report	NOT being scored currently but will be assessed.		
	Funds will be drawn down on a quarterly basis. All funds must be drawn down within 90 days of the expiration of the grant.	HUD Field Report	10		
Compliance with HMIS Data Standards.	Programs will comply with HUD Data Standards including Program Data Elements, Universal Data Elements, Self Sufficiency Matrix and User Training.	HMIS	10		
Participation with the CoC	Programs will regularly attend and participate in Continuum of Care meetings.	Meeting minutes	5		
Total Outcome Achievement			75 Points Available		
Program of Concern: Yes/No					

Notes:

**MAG Continuum of Care Regional Committee on Homelessness
Program of Concern Quarterly Action Plan Report**

Agency Name:

Project Name:

Goals	Measure		Q1	Q2	Q3	Q4	Annual:	Comments:
Project serves "harder to serve" homeless population.	At least 50 percent of households served by program at entry: -Mental Illness -Alcohol Abuse -Drug Abuse -Chronic Health Conditions -HIV -Developmental Disabilities -Physical Disabilities	#						
Reduce length of homeless episodes and new and return entries into homelessness.	PH Programs: % in PH staying over six months	%						
	TH Programs: % in TH moving to PH	%						
	TH Programs: Average length of shelter stay	days						
	SSO Programs: % Performance Measures achieved	%						
	Average number of clients who re-enter shelter (Future measure)	N/A	N/A	N/A	N/A	N/A	N/A	
Increase jobs, income and self-sufficiency.	% persons obtained employment at exit	%						
	% persons enrolled in education/training	%						
	% persons connected to mainstream resources	%						
Achieve program APR goals.	% APR goals achieved	%						
Effective use of federal funding.	Cost per household/budget (program budget ÷ households served)	\$						
	Funds drawn on a quarterly basis	Key						
Compliance with HMIS data standards.	Program data elements	Key						
	Universal data elements	Key						
	Self-Sufficiency matrix	Key						

	HMIS training	Key						
Participation with the CoC.	% meetings attended	%						
Improvement Achieved in 12-months								
Key: √-Outcome achieved ≠-Outcome not achieved N/A - Measure not applicable								

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