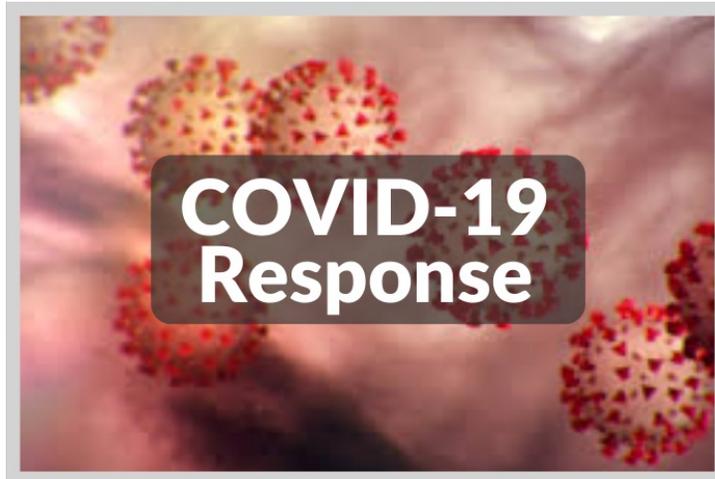




## NC COALITION<sup>to</sup><sub>end</sub> HOMELESSNESS



North Carolina became one of the first states to obtain approval from FEMA to provide housing alternatives for people with unstable housing who may need to quarantine in response to COVID-19.



“North Carolinians without stable housing still need places to go if they have a mild case of COVID-19 or need to quarantine after being exposed to the virus. These types of alternatives will help people who have no other safe options to self-isolate or social distance while we slow the spread of this virus.”

*Governor Roy Cooper*

The State will work with local partners to provide more than 16,500 units of individual housing in dormitories, hotels, trailers, or other facilities to:

- People who test positive for COVID-19 and need to be isolated but do not require hospitalization, including those discharged from hospitals.
- People exposed to COVID-19 and identified by a health care professional as needing quarantine but do not need hospitalization.
- People needing social distancing as a precautionary measure, as determined by public health officials, particularly for high-risk groups such as people over 65 or with certain underlying health conditions such as respiratory illness, compromised immunities or chronic disease. This may include those whose living situation makes them unable to adhere to social distancing guidance.

The federal government through FEMA will pay 75 percent of the costs associated with operating the non-congregate sheltering program. North Carolina will pay the remaining 25 percent. Funding includes the cost of all supporting infrastructure, such as electricity

and waste disposal, as well as other services such as laundry, food, cleaning and security.

Non-congregate shelter is being provided in many North Carolina communities and many more are in the process of creating this essential option. [Read more about the available funding](#), including information to determine if your agency might be an eligible applicant.

Reach out to us at [coronavirus@ncceh.org](mailto:coronavirus@ncceh.org) with questions and ideas!

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The homeless service system is essential in flattening the curve to ensure there are enough ICU beds, ventilators, and other resources to meet the demand. We can help flatten the curve by using strategies to reduce the spread, protect people, and appropriately utilize health care resources:

#### **Protection in Current Homeless Settings**

Meet CDC guidelines, stay at home orders, and social distancing among homeless shelters and unsheltered populations to keep people healthy

#### **Non-Congregate Shelter**

Create temporary housing or shelter locations to:

- provide quarantine and isolation options people who are symptomatic or who test positive for COVID-19
- provide recovery or care options for patients experiencing homelessness to receive care for other health issues to preserve hospital beds

#### **Housing Stability**

Divert people from - and move people out of - homelessness into housing so they can follow social distancing and hygiene guidelines to reduce the spread of COVID-19

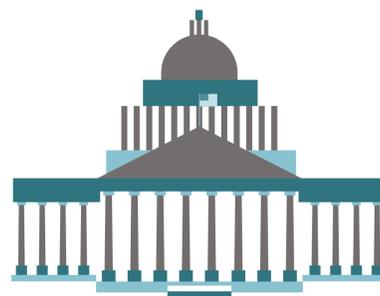
As your community continues the efforts to flatten the curve, use the resources below and reach out to us at [coronavirus@ncceh.org](mailto:coronavirus@ncceh.org).

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## **CARES Act Stimulus Bill**

Through the CARES Act, Congress appropriated an additional \$4 billion to the Emergency Solutions Grants (ESG) Program . This is a substantial increase for the program--almost fourteen times the regular FY20 allocation of \$290 million.

It makes sense for Congress to add funding to the program as it has the flexibility to assist with the current crisis by supporting street outreach, sheltering, rapid rehousing, diversion, and prevention efforts.



With [North Carolina on track to surpass 500,000 unemployment claims by the end of this week](#), we know the scale of need is massive and beyond anything we have seen in our lifetime. The good news is through our collective experience, we know how to keep people from entering the homeless system by providing assistance including rental assistance and arrears payments. It is time to prepare our programs to take what works to scale.

There are seven recipients of ESG funding in North Carolina. These recipients are responsible for planning the use of the funds. Most funding is subgranted to agencies to carry out eligible activities.

HUD is in the process of releasing the first \$1 billion of funding, including \$23.7 million

for North Carolina:

- City of Charlotte: \$1,765,572
- City of Durham: \$602,383
- City of Greensboro: \$675,621
- City of Raleigh: \$950,338
- City of Winston-Salem: \$660,748
- Wake County: \$626,800
- State of North Carolina: \$18,423,179

While this is an unprecedented amount of funding for the ESG program, these additional funds will be needed to meet an unprecedented need. In fact, estimates show an additional appropriation will be needed.

As other CARES Act funding streams become available, it will be important to coordinate implementation in order to support the right mix of activities to help people access and stay in housing. For example, the CDBG program received an additional \$5 billion and the new ability to use program funding for rental assistance.

The key to making an impact with CARES Act resources is leveraging funds to support immediate action to meet the needs of today while facilitating a sustained response for the months to come.

Want to know more about the CARES Act? Review these resources:

[The Center on Budget and Policy Priorities](#) released information on how much each state will be receiving from this bill.

The National Alliance to End Homelessness provides insight into [what's in the bill for homelessness](#).

Connecticut's The Partnership for Strong Communities has the [most comprehensive yet straightforward summary of the stimulus bill and housing](#) that we've seen.

Matt Schnars in Durham created a [public tableau](#) to display the level of funding each community will receive in ESG-CV supplemental funding through the CARES Act.



### Availability of Waivers

**new**

## HUD Program Waivers

The Department of Housing and Urban Development (HUD) recently issued a [memorandum](#) providing regulatory waivers for the Continuum of Care (CoC), Emergency Solutions Grant (ESG), and Housing for Persons With AIDS (HOPWA) programs, and Consolidated Plan requirements.

Regulations are program rules set by HUD. HUD may waive regulations for good cause. Programs also have statutory requirements that are set by Congress. These are rules that HUD can not waive, but must work within.

These waivers give HUD grantees additional flexibility to keep people in housing, quickly move people into housing, and adjust to new staffing patterns during periods of social distancing.

The changes were issued in order to prevent the spread of COVID-19 and provide additional supports to individuals and families eligible for

CoC, ESG, and HOPWA assistance who are economically impacted by COVID-19.

Grantees must notify HUD before utilizing waivers.

[Read the full announcement of COVID-19 waivers here.](#)

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**new**

## Racial Disparities and COVID-19

Racial disparities in the infection and response to the COVID-19 outbreak are becoming clear as new reporting emerges. Existing disparities, including underlying health conditions, barriers and biases are becoming amplified during the pandemic.

[Kaiser Health News reports](#) how the crisis response has not prioritized access to testing with an equity lens, and illness count and rising mortality counts are starting to show racial and economic disparities.

[The New York Times reports](#) that COVID-19's impact is reflecting and amplifying entrenched racial inequities. Where racial breakdowns of people are recorded, communities of color have disproportionate rates with confirmed infections and deaths.

[NPR covers the CDC data](#) that shows "Even though 33% of those hospitalized patients were black, African Americans constitute 13% of the U.S. population. By contrast, the report found that 45% of hospitalizations were among white people, who make up 76% percent of the population. And 8% of hospitalizations were among Hispanics, who make up 18% of the population."

Trying to figure out how to be part of a solution? Take a look at the [National Innovation Service's blog](#) for recently published reminders for planning an equitable response to COVID-19.

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## Get Connected, Stay Connected

As COVID-19 is rapidly evolving, we recognize you need a space to communicate in real time with our staff and your peers.

**Join Our Facebook Group!**

NCCEH previously created three Facebook groups for providers across the state to share resources, information, and best practices. We've decided to merge these groups into one group for all providers across the state. We hope that you will join us to share resources and ideas!



**updated**

[View Resource Page](#)

## Helpful Resources

There's a lot of information to keep up with. We are gathering it all in one place at [www.ncceh.org/covid-19](http://www.ncceh.org/covid-19).

If you have a helpful resource that isn't on the site, that you'd like to share, send it to [coronavirus@ncceh.org](mailto:coronavirus@ncceh.org).

**Become a Member of NCCEH!**

[Not sure if your membership is current? View current member list here.](#)

The mission of the North Carolina Coalition to End Homelessness is to end homelessness by creating alliances, encouraging public dialogue, securing resources, and advocating for systemic change. NCCEH works with communities to address root causes of homelessness by developing and implementing data-driven strategies that are focused on permanent housing and appropriate services.

**Join Our Mailing List**

Did someone forward you this email? Join our list!

Thank you for all you do to make our community a better place!

