Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: NC-503 - North Carolina Balance of State CoC

1A-2. Collaborative Applicant Name: North Carolina Coalition to End Homelessness Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: North Carolina Coalition to End Homelessness Inc.

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
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1B-1.	**Inclusive Structure and Participation–Participation in Coordinated Entry.**	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

	In the chart below for the period from May 1, 2020 to April 30, 2021:
1.	**select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or**
2.	**select Nonexistent if the organization does not exist in your CoC's geographic area:**

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing of CoC Board Members	Participated in CoC's Coordinated Entry System
1.	**Affordable Housing Developer(s)**	Yes	Yes	Yes
2.	**Agencies serving survivors of human trafficking**	Yes	Yes	Yes
3.	**CDBG/HOME/ESG Entitlement Jurisdiction**	Yes	Yes	Yes
4.	**CoC-Funded Victim Service Providers**	Nonexistent	No	No
5.	**CoC-Funded Youth Homeless Organizations**	Nonexistent	No	No
6.	**Disability Advocates**	Yes	Yes	Yes
7.	**Disability Service Organizations**	Yes	Yes	Yes
8.	**Domestic Violence Advocates**	Yes	Yes	Yes
9.	**EMS/Crisis Response Team(s)**	Yes	Yes	Yes
10.	**Homeless or Formerly Homeless Persons**	Yes	Yes	Yes
11.	**Hospital(s)**	Yes	Yes	No
12.	**Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)**	No	No	No
13.	**Law Enforcement**	Yes	Yes	No
14.	**Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates**	Yes	Yes	Yes
15.	**LGBT Service Organizations**	Yes	Yes	Yes
16.	**Local Government Staff/Officials**	Yes	Yes	Yes
17.	**Local Jail(s)**	Yes	Yes	No
18.	**Mental Health Service Organizations**	Yes	Yes	Yes

19.	**Mental Illness Advocates**	Yes	Yes	Yes
20.	**Non-CoC Funded Youth Homeless Organizations**	Yes	Yes	Yes
21.	**Non-CoC-Funded Victim Service Providers**	Yes	Yes	Yes
22.	**Organizations led by and serving Black, Brown, Indigenous and other People of Color**	Yes	Yes	Yes
23.	**Organizations led by and serving LGBT persons**	Yes	Yes	Yes
24.	**Organizations led by and serving people with disabilities**	Yes	Yes	Yes
25.	**Other homeless subpopulation advocates**	Yes	Yes	Yes
26.	**Public Housing Authorities**	Yes	Yes	Yes
27.	**School Administrators/Homeless Liaisons**	Yes	Yes	Yes
28.	**Street Outreach Team(s)**	Yes	Yes	Yes
29.	**Substance Abuse Advocates**	Yes	Yes	Yes
30.	**Substance Abuse Service Organizations**	Yes	Yes	Yes
31.	**Youth Advocates**	Yes	Yes	Yes
32.	**Youth Service Providers**	Yes	Yes	Yes
	Other:(limit 50 characters)			
33.	Vet Homelessness Agencies	Yes	Yes	Yes
34.	Legal Aid	Yes	Yes	Yes

1B-2.	**Open Invitation for New Members.**	
	NOFO Section VII.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	**communicated the invitation process annually to solicit new members to join the CoC;**
2.	**ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;**
3.	**conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and**
4.	**invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).**

(limit 2,000 characters)

1)The CoC holds monthly Governance Board (GB) calls, & our 13 Regional Committees (RCs) also hold regular meetings, inviting new stakeholders to attend. Any person may attend, ask questions, & provide input on discussion topics. The CoC maintains an email distribution list, asking RCs to distribute sign-up sheets in local meetings to interested parties every 6 mos. The list delivers news, asks for feedback, connects people to resources, & announces policy changes/funding competitions. Staff regularly engage agencies wanting deeper involvement, inviting them to attend GB meetings, review website materials, & connect with RCs. Staff & RC leadership engage stakeholders to build new/stronger partnerships. 2)The CoC communicates in several ways to ensure people have access to information, including recorded webinars, phone calls, posted materials in multiple formats on the website, & an email address to contact staff directly to connect to resources. 3)The CoC encourages people with lived experience (PLE) to get involved in decision making & leadership roles. The CoC engages PLE at events, using peers to invite/encourage others to get involved. The Nominations Committee outreaches PLE to join the GB as voting members annually. The CoC formed a Consumer Advisory Council

(CAC) in 07/21. The CoC engaged PLE to join the CAC, which reviews & evaluates CoC policies and procedures to ensure equity & effectiveness & seeks opportunities to impact legislation through advocacy. 2 co-chairs with LE lead the CAC & recruit members with recent/current LE to help the CoC make informed decisions. 4)The RE Subcommittee (RES) engages diverse organizations to collaborate with the CoC. The RES launched a dialogue series in 08/20, engaging a diverse array of panelists to share their expertise on topics such as Racism in the Criminal Justice System & Racism in Elections. The CoC invited panelists to bring other constituencies to join our work.

1B-3.	**CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.**	
	NOFO Section VII.B.1.a.(3)	

	Describe in the field below how your CoC:
1.	**solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
2.	**communicated information during public meetings or other forums your CoC uses to solicit public information; and**
3.	**took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.**

(limit 2,000 characters)

1)The CoC has an inclusive governance structure & conducts open meetings to solicit & use feedback from stakeholders. Because it covers 79 counties, the CoC has multiple levels of coordination & options to participate, including regional & CoC-wide groups. The CoC gathers & incorporates diverse thinking into planning in 3 major ways: committees, surveys, & direct engagement. The GB includes representation from each of its 13 RCs & at-large members representing state government depts; sector experts in DV, legal aid, housing, & rural initiatives, & people with lived experience. Membership breadth ensures the CoC considers & incorporates diverse perspectives in all planning. Subcommittees include people from across the CoC to share local efforts & engage directly in planning to recommend strategies/priorities for approval by the GB. The RES & CAC bring diverse perspectives from BIPoC & people with lived experience. The CoC vets every policy & planning document through subcommittees, surveys, and/or individual stakeholder conversations, incorporating ideas & changes prior to approval by the GB. 2)The CoC uses its website & mailing list to advertise CoC meetings. It publishes all materials prior to GB meetings & incorporates a feedback loop, typically presenting policies several times prior to an official vote, soliciting feedback from members & encouraging members to gather local feedback. 3)The CoC's inclusive design allows individuals to have input throughout the process to improve its approach to prevent & end homelessness. The CoC uses open subcommittee meetings to create policy & recommend strategies & initiatives. Subcommittees report out at GB meetings, asking for feedback & official approval. The GB tasks subcommittees to create procedures for approved policies & strategies, implementing initiatives, evaluating progress through data & local stakeholder reporting, & shifting direction based on feedback from people implementing them locally.

1B-4.	**Public Notification for Proposals from Organizations Not Previously Funded.**	
	NOFO Section VII.B.1.a.(4)	

	Describe in the field below how your CoC notified the public:
1.	**that your CoC's local competition was open and accepting project applications;**
2.	**that your CoC will consider project applications from organizations that have not previously received CoC Program funding;**
3.	**about how project applicants must submit their project applications;**
4.	**about how your CoC would determine which project applications it would submit to HUD for funding; and**
5.	**how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.**

(limit 2,000 characters)

1)Staff emailed stakeholders upon release of the FY21 NOFO to inform the CoC that the competition was open & updated the CoC's website with competition information & how to apply for funding. RC leadership forwarded this email to their local email distribution lists. 2,4) The CoC advertises funding on its website year-round with staff available for one-on-one consults. The CoC announced an intent to apply (ITA) process at public, monthly GB meetings (March-August 2021), on its website, through its email list (390 stakeholders), & in RC meetings & email lists. Staff contact high-performing agencies without CoC funding, encouraging them to apply. After an agency submits an ITA, staff hold calls with agencies to discuss the application process, timelines, & projects. The CoC recorded & posted a new CoC applicant webinar for agencies interested in applying. The CoC received 29 ITAs including 22 agencies that have never received CoC funding. The CoC posted approved funding priorities & new & renewal scorecards to the website prior to the competition. Staff assisted agencies to understand project eligibility, CoC priorities, & regional needs. 3)The CoC posted instructions for new & renewal applicants on 08/19/21, highlighting required documents, timelines, & links for submission. Staff emailed stakeholders on 08/19/21 through its email distribution with links to CoC competition materials & timelines, encouraging RC leadership to forward information to stakeholders. 5)The CoC communicates in multiple ways to ensure people have access to information, including recorded webinars, conference/individual calls, written materials in multiple formats (Word, pdf, others), posting materials on a public website, & an email where people can contact staff directly to schedule meetings/get resources.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

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1C-1.	**Coordination with Federal, State, Local, Private, and Other Organizations.**	
	NOFO Section VII.B.1.b.	

	In the chart below:
1.	**select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or**
2.	**select Nonexistent if the organization does not exist within your CoC's geographic area.**

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with Planning or Operations of Projects
1.	**Funding Collaboratives**	Nonexistent
2.	**Head Start Program**	Yes
3.	**Housing and services programs funded through Local Government**	Yes
4.	**Housing and services programs funded through other Federal Resources (non-CoC)**	Yes
5.	**Housing and services programs funded through private entities, including Foundations**	Yes
6.	**Housing and services programs funded through State Government**	Yes
7.	**Housing and services programs funded through U.S. Department of Health and Human Services (HHS)**	Yes
8.	**Housing and services programs funded through U.S. Department of Justice (DOJ)**	Yes
9.	**Housing Opportunities for Persons with AIDS (HOPWA)**	Yes
10.	**Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)**	No
11.	**Organizations led by and serving Black, Brown, Indigenous and other People of Color**	Yes
12.	**Organizations led by and serving LGBT persons**	Yes
13.	**Organizations led by and serving people with disabilities**	Yes
14.	**Private Foundations**	Yes
15.	**Public Housing Authorities**	Yes
16.	**Runaway and Homeless Youth (RHY)**	Nonexistent
17.	**Temporary Assistance for Needy Families (TANF)**	Yes
	Other:(limit 50 characters)	

18.		

1C-2.	**CoC Consultation with ESG Program Recipients.**	
	NOFO Section VII.B.1.b.	

	Describe in the field below how your CoC:
1.	**consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds;**
2.	**participated in evaluating and reporting performance of ESG Program recipients and subrecipients;**
3.	**provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and**
4.	**provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update.**

(limit 2,000 characters)

1)NCDHHS serves as the ESG Program Recipient for NC. CoC staff work closely with the ESG Office (ESGO) to set the funding formula & design an application process to subgrant the funds fairly across the CoC's 13 RCs. In 2020, in consultation with the ESGO, the CoC changed what traditionally had been a de-centralized process where each RC ran a local competition to select its ESG applicants to a centralized process at the CoC-level facilitated by staff in partnership with the CoC's Project Review Committee & GB. In regions where not enough agencies applied, staff worked with the ESGO to identify potential applicants & engaged them to ensure the CoC took advantage of all available funding. CoC & ESGO staff hold monthly calls to discuss challenges, give updates & identify projects with issues. Both staffs agree on next steps with identified challenges & work together to address them. The collaboration has strengthened applications, project outcomes, & community engagement. 2)During monthly calls, the ESGO shares current subrecipient monitoring findings with CoC staff & develop a performance improvement plan with CoC staff providing TA. As part of the annual ESG funding competition, ESGO and CoC staff identify projects having issues with programmatic design & performance standards through review of policies & procedures & CAPERs & make funding conditional on participation in TA with CoC staff. 3)The CoC publishes annual PIT/HIC data on its website, posting CoC-, regional-, and county-level analysis. The website maintains PIT/HIC data since 2009. Upon request, staff provide more detailed information to Con Plan jurisdictions, scheduling conversations as needed. 4)CoC and ESGO staff participate in ongoing meetings to update & develop the NC Consolidated Plan & other jurisdictional Con Plans. At these meetings, CoC staff provide data from the PIT count, HMIS, & other reports to inform partners about current system capacity & trends indicating ongoing & future needs.

1C-3.	**Ensuring Families are not Separated.**	
	NOFO Section VII.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported gender:

1.	**Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.**	Yes
2.	**Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.**	Yes
3.	**Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.**	Yes
4.	**Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.**	Yes
5.	**Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.**	Yes
6.	**Other. (limit 150 characters)**	
		No

1C-4.	**CoC Collaboration Related to Children and Youth–SEAs, LEAs, Local Liaisons & State Coordinators.**	
	NOFO Section VII.B.1.d.	

	Describe in the field below:
1.	**how your CoC collaborates with youth education providers;**
2.	**your CoC's formal partnerships with youth education providers;**
3.	**how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);**
4.	**your CoC's formal partnerships with SEAs and LEAs;**
5.	**how your CoC collaborates with school districts; and**
6.	**your CoC's formal partnerships with school districts.**

(limit 2,000 characters)

1)CoC providers partner at the local level with early childhood service providers & work closely with Community Action Agencies (CAA) which have formal agreements to connect families with Early Head Start & Head Start. Many CAA join monthly Regional Committee (RC) meetings to share resources & make connections with other providers serving families with school age children. The CoC has funded 3 CAA to provide RRH/HP resources to families with children. 2)The CoC has several CAA that have formal, written agreements to provide Early Head Start & Head Start resources. Regional Committees also have formal, written agreements with early childhood providers. 3)CoC staff participate on state-wide committees to provide homeless children access to developmental resources, childcare, & PH. State-level professionals from NC Division of Child Development & Early Education, NC Child Care Development Fund, NC Infant Mental Health Association, NC State University, NC Department of Public Instruction, & NCDHHS join this initiative. The NC SEA Director serves as an at-large member of the CoC Governance Board, providing resources/training to members & connecting regional leadership to LEAs. CoC staff participate in the SEA's annual conference for homeless school liaisons, providing current CoC data & help connecting to the CE system. 4)LEAs & other school system social workers serve on RCs, connecting homeless youth to the CE system & providing educational assistance to families in ES & PH programs. RCs rely heavily on LEAs to plan local youth PIT counts. LEAs educate local school districts on the CoC & bring essential personnel to the table on local youth initiatives. LEAs serve on local committees, providing insight & connection to youth resources outside the homeless service system. 5,6)The CoC include school districts as part of Sharing Agreements in the CE system, allowing them to fully participate in local case conferencing.

1C-4a.	CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
	NOFO Section VII.B.1.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,000 characters)

In its programmatic written standards, the CoC has adopted specific language to guide funded programs about their responsibility working with families with children. In the services sections of the street outreach, emergency shelter, transitional housing, rapid rehousing, homelessness prevention, and permanent supportive housing written standards, the following item appears: “Program staff will connect families with children to appropriate educational services, including, but not limited to, Early Head Start, Head Start, Public Pre-K, community colleges, and others. Staff will liaise with the local homeless school liaison to ensure coordination, allowing youth to attend their school of origin and receive eligible educational and other services allowable under McKinney-Vento.” The NC SEA Director serves on the CoC Governance Board. The CoC has been in conversation with her to create a formal MOU with the SEA, inclusive of assisting with the creation of other policies & procedures to connect eligible individuals & families with children experiencing homelessness to educational services. The CoC hopes to create a workgroup in 2022 to formalize said policies with training & technical assistance to follow before the end of the calendar year.

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	No	Yes
4.	Early Head Start	Yes	Yes
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	Yes	Yes
7.	Healthy Start	No	No
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Annual Training–Best Practices.	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC coordinates to provide training for:
1.	Project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses safety and best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,000 characters)

1,2) CoC staff provide ongoing TA that includes trauma-informed, victim-centered services & partner with the NC Coalition Against Domestic Violence (NCCADV) to enhance trainings & connect providers to ongoing resources to operationalize practices for DV survivors. Many VSPs, as the only providers in their community, serve the CoC as CE Lead & mainstream housing provider. As CE Leads, they participate as members of the CE Council, providing insight & direction on CE policy to ensure survivor safety. During the pandemic, NCCEH attended weekly NCCADV COVID-response calls with NC VSPs, sharing resources, clarifying guidance, understanding challenges to connect survivors to mainstream homeless programs, & enlisting assistance to develop trauma-informed, victim-centered policies. NCCADV attended weekly NCCEH COVID-response calls, connecting providers to VSPs, brainstorming creative ways for VSPs & homeless providers to work together, & providing a trauma-informed lens to the work to ensure survivor safety. In 2022, NCCEH & NCCADV will coordinate 2 trainings to ensure DV & homeless systems work closely together: NCCADV will provide training for providers & CE Leads, focusing on DV survivor needs, trauma-informed care (how past trauma informs current needs); risk assessment & safety planning; & impacts on CE. NCCEH will provide a training to NC VSPs, focusing on homelessness/housing resources & how to connect with safe, confidential methods to PH resources. Trainings will be recorded & posted on both agencies' websites. NCCADV staff serve on the CoC's CE Council alongside regional CE Lead staff. This body evaluates the CE system, making crucial policy decisions. NCCADV staff provide insight into system protocols to ensure survivor safety remains paramount & consult with individual CE Leads to discuss local challenges & form baselines to use for individual TA with VSPs, homeless providers, & CE staff.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

The CoC uses de-identified, aggregate data from comparable databases to assess the needs of individuals and families experiencing DV, dating violence,

sexual assault, and stalking survivors to understand how these households flow through the CoC's system of care. The CoC collects information from regional CE Leads, indicating the number of people assessed and added to the coordinated entry by-name list, the types of households accessing CE, the number and type of referrals made to emergency and permanent housing programs, and the number of households moving into permanent housing after CE referral from DV agencies. The CoC can compare the aggregate data from VSPs' comparable databases to the data points listed above to understand the usage of the CE system by VSPs. The CoC partners with RC leadership and the North Carolina Coalition Against Domestic Violence to outreach and engage VSPs unwilling to participate in the CE system, addressing safety concerns, listening to experts on the special needs of the population, and working together to evaluate effectiveness of the system and how to continually improve CE to ensure victims receive appropriate, safe, and trauma-informed services.

1C-5b.	**Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Coordinated Assessment–Safety, Planning, and Confidentiality Protocols.**	
	NOFO Section VII.B.1.e.	

	Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:
1.	**prioritize safety;**
2.	**use emergency transfer plan; and**
3.	**ensure confidentiality.**

(limit 2,000 characters)

Since the implementation of CE in 2014, a staff member from the North Carolina Coalition Against Domestic Violence (NCCADV) has served as a member of the Coordinated Entry Council (CEC). The CEC, a subcommittee of the CoC Governance Board (GB), developed the CE system in conjunction with a wide variety of CoC stakeholders, including VSPs and people with lived experience of DV, providing feedback, support, and perspective. As state-wide coalitions, NCCEH and NCCADV collaborate on a variety of initiatives, and the CoC relies heavily on NCCADV's expertise on trauma-informed care and victim-centered services, ensuring that CoC-level and programmatic policies and standards account for these important models. The CoC often asks NCCADV to provide perspectives on these models, incorporating staff in technical assistance and training to providers and regional CE staff. As part of the CE system, providers conduct a Prevention and Diversion Screening Tool. The first question is "Are you currently residing with, or trying to leave, an intimate partner, family member, caregiver, or other person in your home who threatens or makes you fearful?" If the client says yes, they are immediately referred to a DV agency. The CoC updates its VAWA Emergency Transfer plan annually, providing a recorded, mandatory training for providers. NCCADV reviews and provides feedback on the plan. Providers inform CoC staff upon an Emergency Transfer Request, providing relevant information and regular updates. Staff assist providers when challenges arise, connecting them to CoCs outside our geographic area. The CE system accounts for DV households outside HMIS, manually adding de-identified information to the full By Name List. Referral agencies participate in regular case conferencing, providing relevant information and serving as liaison to the selected DV-related household to ensure connection to the agency providing permanent housing services.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training.	
	NOFO Section VII.B.1.f.	

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBT individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of the City of Greenville	12%	No	Yes
Housing Authority of the City of Wilson	31%	Yes-Both	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.B.1.g.	

	Describe in the field below:
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference–if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,000 characters)

1)Approximately 100 PHAs exist in the CoC. The CoC regularly outreaches PHAs, including the two largest, to encourage them to adopt preferences. The Greenville Housing Authority, the CoC's largest PHA, has adopted a preference for Moving On clients from PSH. The CoC invites PHAs to regular Regional Committee meetings, provides information about homelessness in their catchment area, and works with PHA staff to encourage them to adopt preferences. CoC staff with stakeholders provide education & assist in removing

perceived barriers to adopting preferences. CoC staff present at the NC PHA Director's Conference annually and at statewide conferences to educate PHAs and homeless leaders about preferences. CoC staff collaborate with the local HUD Field Office in Greensboro, focusing on helping PIH and CPD HUD staff better support the collaboration between CoCs and PHAs. In 2022, the CoC has adopted a plan to individually outreach the 15 largest PHAs in the CoC, bringing in local partner providers to ask the PHA to adopt a preference for general homelessness, family homelessness, Veteran homelessness, or Moving On from PSH. CoC staff will schedule meetings with these PHAs, introducing them to local providers, and assisting them to develop their preference or set-aside plan. Staff will provide technical assistance upon launch of any preference or set-aside of units/vouchers, addressing referral challenges, barriers, and lease up issues. Upon release of Mainstream or Family Reunification Voucher NOFAs, CoC staff hold an informational webinar, engage PHAs to apply, and assist in the preparation of applications, ensuring these vouchers are connected to the CoC's CE system.

1C-7b.	**Moving On Strategy with Affordable Housing Providers.**	
	Not Scored–For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	**Multifamily assisted housing owners**	Yes
2.	**PHA**	Yes
3.	**Low Income Tax Credit (LIHTC) developments**	Yes
4.	**Local low-income housing programs**	Yes
	Other (limit 150 characters)	
5.	NC DHHS Targeted/Key Program	Yes

1C-7c.	**Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	Yes

1C-7c.1.	**Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.**	
	NOFO Section VII.B.1.g.	

	If you selected yes in question 1C-7c., describe in the field below:
1.	**how your CoC includes the units in its Coordinated Entry process; and**
2.	**whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.**

(limit 2,000 characters)

1)HUD awarded 634 EHVs to 12 PHAs in the CoC's geographic region. This allowed 10 of its 13 regions to build closer relationships with local PHAs and include PHA units in the CoC's CE process. Local CE systems meet (at minimum) bi-weekly to case conference households, prioritizing vulnerable HHs to refer for available PH resources. The CoC prioritizes EHVs through the By Name List (BNL) in two categories: One, HHs living unsheltered with the longest LOTH where providers have been unable to obtain adequate documentation of CH. The CE Lead filters the BNL for CH, disability, current living situation, & LOTH to identify the highest priority HH meeting this priority. Two, HHs with children who need long-term rental assistance. The CE Lead filters the BNL for HH type, assessment score, LOTH, and discuss barriers/needs with providers at case conferencing to identify the highest priority HH meeting this priority.
2)The CoC has executed MOUs with all 12 PHAs offering EHVs. MOUs include program overview/goals, eligible populations & CoC prioritized populations; service provider roles & responsibilities, PHA roles & responsibilities, & CoC roles & responsibilities.

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	No

1C-7d.1.	CoC and PHA Joint Application–Experience–Benefits.	
	NOFO Section VII.B.1.g.	

	If you selected yes to question 1C-7d, describe in the field below:
1.	the type of joint project applied for;
2.	whether the application was approved; and
3.	how your CoC and families experiencing homelessness benefited from the coordination.

(limit 2,000 characters)

N/A

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	NOFO Section VII.B.1.g.	

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes

1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	

Not Scored–For Information Only

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA
Western Piedmont ...
North Carolina Co...
Foothills Regiona...
Housing Authority...
Rockingham Housin...
Wadesboro Housing...
Roanoke-Chowan Re...
City of Albemarle...
Housing Authority...
Bladenboro Housin...
Housing Authority...
Chatham County Ho...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Western Piedmont Council of Governments

1C-7e.1. List of PHAs with MOUs

Name of PHA: North Carolina Commission of Indian Affairs

1C-7e.1. List of PHAs with MOUs

Name of PHA: Foothills Regional Commission

1C-7e.1. List of PHAs with MOUs

Name of PHA: Housing Authority of the City of Concord

1C-7e.1. List of PHAs with MOUs

Name of PHA: Rockingham Housing Authority

1C-7e.1. List of PHAs with MOUs

Name of PHA: Wadesboro Housing Authority

1C-7e.1. List of PHAs with MOUs

Name of PHA: Roanoke-Chowan Regional Housing Authority

1C-7e.1. List of PHAs with MOUs

Name of PHA: City of Albemarle Department of Public Housing

1C-7e.1. List of PHAs with MOUs

Name of PHA: Housing Authority of the Town of Laurinburg

1C-7e.1. List of PHAs with MOUs

Name of PHA: Bladenboro Housing Authority

1C-7e.1. List of PHAs with MOUs

Name of PHA: Housing Authority of the City of Greenville

1C-7e.1. List of PHAs with MOUs

Name of PHA: Chatham County Housing Authority

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	No
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	**Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.**	30
2.	**Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.**	30
3.	**This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.**	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

The CoC regularly evaluates projects to ensure that they follow a Housing First approach to prioritize rapid placement and stabilization in PH and do not require service participation or preconditions of participants in three key ways: 1)CoC staff hold monthly calls with regional CE Leads. In these calls, staff review

regional By Name Lists, ensuring that the highest priority households have been referred and that funded agencies are taking these referrals. CE Leads provide insight into the flow of referrals to funded housing agencies, identifying particular challenges or when technical assistance may be needed to ensure providers do not require income, sobriety, treatment, or other service requirements as a barrier to project enrollment. When identified, CoC staff schedule a meeting with identified providers and develop a TA plan to ensure compliance with Housing First approaches. 2) CoC staff developed a Performance Improvement Planning process in 2017 to evaluate CoC-funded agencies. Staff evaluate a range of documents including: policies & procedures (P&Ps), multiple client files, APRs, VI-SPDAT data, and others to identify compliance with the HUD Interim Rule and with Housing First approaches. After evaluation, staff provide agencies an exhibit identifying areas of improvement/non-compliance. Staff meet with project staff to discuss challenges and create a timeline for performance improvement. 3) Staff and Project Review Committee members review applicant P&Ps during annual ESG/CoC competitions to ensure fidelity to Housing First. New applicant agencies cannot proceed in either competition unless their policies adhere to Housing First approaches. For returning applicants who may have updated policies that no longer follow a Housing First approach, the CoC conditionally approves them with an agreement that they will accept technical assistance and change any policies not meeting the requirements before the next funding competition.

1C-9b.	**Housing First–Veterans.**	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	No

1C-10.	**Street Outreach–Scope.**	
	NOFO Section VII.B.1.j.	

	Describe in the field below:
1.	**your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;**
2.	**whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
3.	**how often your CoC conducts street outreach; and**
4.	**how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.**

(limit 2,000 characters)

1)The CoC uses multiple methods to ensure identification & engagement across its geographic area. SSVF providers provide weekly outreach in the CoC's 79 counties. In agreement with the CoC's Veteran homelessness plan, when SSVF encounter non-Vets, they connect them to the CE system. The CoC prioritized funding in the ESG-CV process to seed new SO, allocating money to 6 projects covering 20 counties with the highest populations of people living unsheltered. The agencies applied for annual ESG to continue these services. The CoC connected the NC PATH Director to agencies in 5 counties with high numbers

of people living unsheltered to expand SO services. Staff helped agencies understand PATH requirements & develop proposals to access funding. In 2021, the CoC worked with regional CE Leads & a newly created regional leadership role, Unsheltered Access Coordinator (UAC), to develop plans to identify & connect unsheltered people to CE & PH resources. Plans identify: SO providers, outreach frequency, HMIS data entry responsibilities, agencies conducting VI-SDPATs, services, & follow-up. RCs implemented plans starting 09/21. Staff trained CE Leads & UAC on the key components of SO including how to map known encampments, engage vulnerable people appropriately, maintain safety of staff/clients, & connect people to services/CE system. 2)The CoC provides SO across its 79-counties. 3)The CoC provides SO daily as needed. 4)The CoC SO written standards, training, & TA provide staff a services template grounded in Housing First & Harm Reduction practices. To reach unsheltered people least likely to request assistance, SO projects regularly engage people where they are, listening carefully to how they identify their needs, providing options based on those needs, & consistently following through with agreements. SO projects encourage unsheltered people to access ES, advocating on their behalf & intervening as challenges arise.

1C-11.	**Criminalization of Homelessness.**	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

1.	**Engaged/educated local policymakers**	Yes
2.	**Engaged/educated law enforcement**	Yes
3.	**Engaged/educated local business leaders**	Yes
4.	**Implemented communitywide plans**	No
5.	**Other:(limit 500 characters)**	
		No

1C-12.	**Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).**	
	NOFO Section VII.B.1.l.	

	2020	**2021**
Enter the total number of RRH beds available to serve all populations as reported in the HIC–only enter bed data for projects that have an inventory type of "Current."	428	730

1C-13.	**Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.**	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
2.	Private Insurers	Yes	Yes
3.	Nonprofit, Philanthropic	Yes	Yes
4.	Other (limit 150 characters)		

1C-13a.	Mainstream Benefits and Other Assistance–Information and Training.
	NOFO Section VII.B.1.m

	Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:
1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

1)CoC staff keep abreast of changes to mainstream benefits such as Medicaid, food stamps, SSI/SSDI, TANF, & others at the federal & state levels to inform the CoC Governance Board (GB) & membership. Mainstream partners attend Regional Committee (RC) meetings, educate providers on how to connect clients to benefits, & share updates that will affect ongoing benefits. The GB includes representatives from the NC Dept. of Health and Human Services and other statewide sector leaders who provide updates on mainstream benefits. 2) CoC staff relay mainstream benefit updates & information using a CoC-wide email distribution list. Staff make announcements at committee meetings & hold webinars to share best practices. RC leadership share mainstream benefit information with local stakeholders at meetings, invite others to share updates & opportunities. 3) NCCEH staff act as the SOAR state lead & addresses issues with accessing SSA programs, including health insurance. SOAR caseworkers create relationships with local SSA staff as well as Disability Determination Services staff to provide information & answer questions. Dedicated SOAR staff increase chances of positive outcomes. The CoC also maintains partnerships with health care navigators, Managed Care Organizations (MCOs), free clinics, legal aid, & Depts of Social Services to ensure access to health insurance programs. 4) CoC staff train providers to ensure participants eligible for Medicaid are quickly identified & enrolled. CoC staff work closely with NC Medicaid & newly identified MCOs serving NC under its Medicaid waiver to ensure housing supports and access to other benefits for their members. Staff work with homeless, housing, & behavioral health providers to understand new rules under NC's Medicaid plan, which allow billing for tenancy supports, and how to access them appropriately to provide more comprehensive care for the most vulnerable people entering housing from a homeless situation.

1C-14.	**Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.1.n.	

	Describe in the field below how your CoC's coordinated entry system:
1.	**covers 100 percent of your CoC's geographic area;**
2.	**reaches people who are least likely to apply for homeless assistance in the absence of special outreach;**
3.	**prioritizes people most in need of assistance; and**
4.	**ensures people most in need of assistance receive assistance in a timely manner.**

(limit 2,000 characters)

1)The CoC's CE system serves the entire geographic area by dividing the CoC into 13 local referral zones, which the CoC's Regional Committees (RCs) facilitate with oversight by the CoC. These zones designate access points, hold regular case conferencing (CC) meetings, populate By Name Lists, & facilitate referrals to PH. Every zone has a local plan based on the CoC's CE written standards, defining the process in that region. In areas where no current service providers exist, providers in other counties conduct regular outreach, advertisement, & have centralized call centers to provide access to CE. 2)The CoC consistently evaluates & updates its CE processes to ensure people least likely to access services have opportunities, especially in the CoC's most rural parts. RCs work with SSVF providers, law enforcement, health care systems, faith communities, DSS, & other groups to identify people who have trouble accessing CE. The CoC partners with health care agencies & VSPs to provide language lines & communication options for people with disabilities. In 2021, the CoC worked with regional CE Leads and a newly created regional leadership role, Unsheltered Access Coordinator, to develop local plans to identify & connect all unsheltered people to CE & PH resources. Plans identify: SO providers, outreach frequency, HMIS data entry responsibilities, agencies conducting VI-SDPATs, services, & follow-up. RCs implemented plans starting 09/21. 3)ES use a diversion screen to prioritize beds for persons with no other options. The CoC uses the VI-SPDAT to prioritize people most in need of limited housing resources. 4)Local CC meetings facilitate conversations to assign responsibility to find hard-to-reach HHs & engage them regularly to ensure quick access to PH. CC meetings leverage other resources beyond CoC & ESG funding, such as NC Targeted/Key, Transitions to Community Living, VA resources, & PHA units to move people into PH quickly.

1C-15.	**Promoting Racial Equity in Homelessness–Assessing Racial Disparities.**	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes

1C-15a.	**Racial Disparities Assessment Results.**	

NOFO Section VII.B.1.o.

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	Yes
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	Yes
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

In 2019, the CoC updated its Governance Charter to create a standing Racial Equity Subcommittee (RES) to oversee the implementation of the annual RE Assessment & recommend data-informed action steps to the CoC Governance Board (GB) to improve equity. The RES has a diverse membership (race, sexual orientation, gender expression/identity, geographic, ethnicity) that brings multiple perspectives to governance decisions, with a different member of the RES providing monthly updates & recommendations to the GB. The RES worked with the CoC's Scorecard Committee to create CoC new & renewal application scorecards with an equity section to measure applicant agency adherence to CoC equity priorities. This section evaluated an agency's ability to provide guidelines in languages other than English; employ bilingual staff; provide interpreter services; implement the CoC's Anti-Discrimination policy; train staff on RE; include BIPoC Board members. The RES also formed a Prioritization Workgroup (PW) to work with the CoC's CE Council (CEC) to determine the feasibility of changing the standardized CE assessment. The PW evaluated assessment data, reviewing its ability to prioritize BIPoC. The evaluation determined that the assessment prioritized people identifying as White disproportionately in the highest scoring categories. The PW with the CEC are researching other assessments, creating a plan to move the CoC to another assessment by mid-2022. The RES initiated the CoC's first RE Dialogue Series in late 2020, inviting all CoC stakeholders. The series covered the following topics: Police Brutality, Anti-Blackness, & Community Response; Systemic Racism & Impact on Homelessness; Racism in the Criminal Justice System; & Racism in Voting & Elections. The CoC contracted with C4 to provide intensive RE training to GB & RES members in 11/20. Staff, GB, & RES members met for 3 trainings to dig into the topic of RE within the homeless response system.

1C-16.	**Persons with Lived Experience–Active CoC Participation.**	
	NOFO Section VII.B.1.p.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	**Included and provide input that is incorporated in the local planning process.**	10	30
2.	**Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.**	10	30
3.	**Participate on CoC committees, subcommittees, or workgroups.**	0	11
4.	**Included in the decisionmaking processes related to addressing homelessness.**	10	32
5.	**Included in the development or revision of your CoC's local competition rating factors.**	0	1

1C-17.	**Promoting Volunteerism and Community Service.**	
	NOFO Section VII.B.1.r.	

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	**The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.**	Yes
2.	**The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).**	Yes
3.	**The CoC works with organizations to create volunteer opportunities for program participants.**	Yes
4.	**The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).**	Yes
5.	**Provider organizations within the CoC have incentives for employment and/or volunteerism.**	Yes
6.	**Other:(limit 500 characters)**	

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	**Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.**	
	NOFO Section VII.B.1.q.	

	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:
1.	**unsheltered situations;**
2.	**congregate emergency shelters; and**
3.	**transitional housing.**

(limit 2,000 characters)

In 03/20, NCCEH scheduled a weekly COVID Local Leadership Response Call, inviting NC leaders to share emerging resources for social distancing, hygiene/cleaning, & PPE, & through peer-sharing, address challenges serving people living unsheltered & in congregate ES/TH. CoC staff worked closely with the NC Department of Health and Human Services to understand FEMA waives, granting access to funding for non-congregate ES in hotels/motels. Because of the size & diversity of the CoC's geographic area, the CoC Governance Board allowed local Regional Committees (RCs) to implement local protocols based on capacity & local needs with guidance/priorities from the CoC. 1)The CoC encouraged RCs to continue engaging unsheltered people during the pandemic, providing them with PPE & hygiene products, setting up hand-washing stations, & encouraging movement to non-congregate ES. The CoC changed its CE written standards to prioritize people most at risk of exposure to the virus &/or with underlying health issues where PH would protect them. Outreach teams assessed individuals using social distancing protocols, connecting them to CE quickly, & moving them into PH. 2,3)CoC staff worked closely with RCs & county Emergency Management Depts to identify options for non-congregate ES & access available FEMA resources. Congregate ES/TH followed CDC social distancing & hygiene guidelines, decreasing the number of beds, evaluating temperature & symptoms upon entry, cleaning communal spaces regularly, & finding quarantine space as available. ES/TH without these abilities shuttered at the beginning of the pandemic & moved people to non-congregate ES options. CoC staff worked with ES to update policies & procedures to meet these protocols & communicate information to the region. ES/TH were encouraged to identify people with underlying health issues,

quarantining them in separate spaces, moving them to non-congregate options, &/or prioritize them for PH services/connection to the CE system.

1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

While those of us in the sector have long known that homelessness is a public health issue, the pandemic underscored for the larger community how precarious the lives of people experiencing homelessness can be. The pandemic created a renewed sense of urgency to change the system to become more dynamic and move HHs more quickly towards PH. With the influx of new resources, ES began updates to their facilities, creating individual rooms for HHs, spreading beds in packed rooms for greater distance, & updating old HVAC/filtration systems. This will allow ES to provide increased safety for HHs during flu season or other public health emergencies. The pandemic forced all providers to develop relationships with stakeholders outside the sector who have always had a vested interest to end homelessness but were often difficult with which to connect. The CoC connected with emergency management departs, Departments of Health and Human Services, FQHCs, hospital systems, & others. These relationships forged during the crisis will allow communities to respond more quickly during future health emergencies. The CoC worked closely with providers to begin diversion approaches, helping HHs presenting for services to problem solve other safer options than ES. Because of limitations due to social distancing & reduction in the number of ES beds, providers quickly embraced diversion approaches & learned how to prioritize the most vulnerable households for limited ES beds. In regions where ES does not exist or is very limited, communities sought resources and partnered to create non-congregate ES options. Providers learned to identify challenges quickly, problem-solving with new partners, & scaling up services to meet emerging needs. These skills demonstrate to the CoC & its stakeholders that in crises our system can respond creatively & quickly to meet emerging needs, scaling up programs & implementing plans as public health emergencies present in the future more proactively.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

	Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:
1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

The CoC worked with the NC Department of Health & Human Services (NCDHHS), the ESG-CV recipient, during the pandemic to understand local needs & develop processes to distribute funds for safety measures, housing assistance, eviction prevention, & healthcare & sanitary supplies. CoC staff assisted NCDHHS to develop its ESG-CV distribution plan, including the creation of the first state-sponsored rehousing program for people experiencing homelessness. During COVID Local Leadership Response Calls, NCCEH invited NCDHHS to respond to local needs as they emerged. The CoC provided feedback on these calls to NCDHHS as they developed the ESG-CV RFA. CoC staff worked with NCDHHS to develop a new, centralized process for distribution of funds to its 79-counties. Prior to ESG-CV, the CoC followed a decentralized process wherein each of its 13 RCs reviewed & selected their own ESG applicants. CoC staff encouraged NCDHHS to relax long-standing rules to limit funding for emergency response activities so that providers could apply for the activities most needed. The CoC & NCDHHS limited funding for hotel costs, working with local communities to take advantage of FEMA funds first. This allowed more funding to address long-term safety measures in permanent ES facilities. The CoC approved agencies at NCDHHS' request to provide robust housing and prevention efforts. To ensure full coverage of these services across its 79-counties, NCDHHS & CoC staff engaged potential providers together. CoC staff worked closely with agencies to understand requirements, assist with applications, & scale local efforts. NCDHHS provided PPE & hygiene supplies to any communities/providers outside of the ESG-CV process. CoC staff worked with RCs to gauge needs, connect to NCDHHS to order supplies, & develop a local distribution plan. CoC staff served as a liaison with NCDHHS to ensure smooth distribution of supplies & provided insight about other challenges/gaps that NCDHHS might fill.

1D-4.	**CoC Coordination with Mainstream Health.**	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:
1.	**decrease the spread of COVID-19; and**
2.	**ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).**

(limit 2,000 characters)

1,2) The CoC collaborated with the NCDHHS during the pandemic to understand local needs & challenges. The CoC's 13 Regional Committees (RCs) coordinated local efforts with assistance & connections from CoC staff. NCCEH held weekly COVID-19 Local Leadership Response Calls to share emerging resources, provide an avenue for peer sharing, & brainstorm emerging challenges. NCCEH invited NCDHHS & local emergency management department staff to calls to share resources & hear local challenges. CoC staff created a library of resources to share with RCs & providers to understand & implement CDC guidance to decrease the spread of COVID-19 & implement best practice safety measures on social distancing & hygiene protocols. NCDHHS bought PPE & hygiene products for use by providers across NC. CoC staff communicated information regularly to RC leaders, assisted them with determining needs, & helped develop distribution plans to ensure all SO, ES, TH, & PH providers had adequate supplies for staff & clients. CoC staff worked with NCDHHS & NC Department of Public Safety to

understand the FEMA waiver to distribute funds for non-congregate shelter. CoC staff & RC leaders worked together to outreach county Emergency Management Departments to access the funds and set-up non-congregate shelter in hotels/motels across the 79-county geographic area to ensure that people experiencing homelessness had access to safe ES options. The CoC provided specific guidance & protocols to providers to reconfigure ES/TH facilities to social distance, screen people presenting for services for COVID-19 symptoms, & document using HMIS. Once vaccines were available, the CoC shared data with NCDHHS to match with NC Vaccine Data to understand the distribution of vaccines to people experiencing homelessness. The CoC used this data to work locally to connect FQHCs & hospitals to providers to do onsite vaccine clinics to increase use of vaccines to protect provider staff & clients.

1D-5.	**Communicating Information to Homeless Service Providers.**	
	NOFO Section VII.B.1.q.	

	Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:
1.	**safety measures;**
2.	**changing local restrictions; and**
3.	**vaccine implementation.**

(limit 2,000 characters)

1,2,3) The CoC collaborated with the NCDHHS during the pandemic to understand local needs & challenges. The CoC's 13 Regional Committees (RCs) coordinated local efforts with assistance & connections from CoC staff. NCCEH held weekly COVID-19 Local Leadership Response Calls to share emerging resources, provide an avenue for peer sharing, & to brainstorm emerging challenges. NCCEH invited NCDHHS & local emergency management department staff to these calls to share resources & hear local challenges. CoC staff created a library of resources to share with RCs & providers to understand & implement CDC guidance to decrease the spread of COVID-19 & implement best practice safety measures on social distancing & hygiene protocols. NCDHHS bought PPE & hygiene products for use by providers across NC. CoC staff communicated information regularly to RC leaders, assisted them with determining needs & helped develop distribution plans to ensure all SO, ES, TH, & PH providers had adequate supplies for staff & clients. CoC staff worked with NCDHHS & NC Department of Public Safety to understand the FEMA waiver to distribute funds for non-congregate shelter. CoC staff & RC leaders worked together to outreach county Emergency Management Departments to access the funds & set-up non-congregate shelter in hotels/motels across the 79-county geographic area to ensure that people experiencing homelessness had access to safe ES options. The CoC provided specific guidance & protocols to providers to reconfigure ES/TH facilities to social distance, screen people presenting for services for COVID-19 symptoms, & document using HMIS. Once vaccines were available, the CoC shared data with NCDHHS to match with NC Vaccine Data to understand the distribution of vaccines to people experiencing homelessness. The CoC used this data to work locally to connect FQHCs & hospitals to providers to do onsite vaccine clinics to increase use of vaccines to protect provider staff & clients.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

CoC staff provided resources for vaccine distribution directly to RC leadership & local providers. RCs with provider input developed local plans to outreach & engage persons experiencing homelessness, identifying eligible populations & ensuring that during the initial rollout of vaccine distribution people with high-risk factors connected to appropriate resources to get the vaccine as soon as possible. The CoC tasked local providers with identifying clients needing vaccination with most asking about status during intake & at routine, daily temperature/symptom checks. NCDHHS worked with our HMIS Lead & the HMIS Advisory Board to approve the use of HMIS data to match with NC Vaccine Depository data to understand vaccine distribution across the CoC's 79 counties. CoC staff used this research to work with RC leadership to develop a comprehensive action plan to increase vaccine distribution to people experiencing homelessness. CoC staff connected RCs to NCDHHS resources to set up onsite vaccine clinics at provider agencies. The CoC worked with NCDHHS to review monthly data to understand the impact of vaccine distribution initiatives, allowing staff to work with local leaders to adjust engagement efforts. NCCEH worked with local providers to advocate with NC for changes to the vaccine distribution priorities list; a letter signed by over 200 agency/local leaders convinced NCDHHS to change people experiencing homelessness from Priority 4 to 3.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

NCCEH held weekly COVID-19 Local Leadership Response Calls to share emerging resources, provide an avenue for peer sharing, & brainstorm emerging challenges. NC Coalition Against Domestic Violence (NCCADV) staff attended weekly calls, sharing current challenges & best practices to engage households experiencing DV. NCCADV held weekly calls with VSPs across NC. CoC staff attended these calls, providing updates on funding resources, practice change/updates, & answering questions, including opportunities for VSPs to apply for & access ESG-CV, CDBG-CV, & FEMA funding to increase capacity to outreach/engage vulnerable households, provide hotel/motel rooms, reconfigure existing shelter facilities to add beds, & provide rapid rehousing financial assistance & services. Discussions during NCCADV calls highlighted the decreased volume of HHs seeking assistance for DV services during the pandemic & how VSPs & advocates could advertise & engage the community to

reach people needing safe alternatives due to violence. CoC staff learned about DV resources during calls, sharing information with CoC stakeholders. The CoC updated its CE written standards, addressing new protocols for prioritizing households at greatest safety risk during the pandemic, including households experiencing domestic violence.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

The CoC's CE Council vetted potential updates to CE protocols, recommending language to the CoC Governance Board (GB) to address emerging challenges due to the pandemic. The GB approved updates to the CE written standards in 04/20, allowing local communities to prioritize households at greatest risk during public health emergencies. While the CoC changed the CE written standards in response to COVID-19, the updates broadened the language to include all public health emergencies to ensure the CE system has the greatest flexibility and can respond quickly to emerging health situations. The CoC worked closely with the NCDHHS while developing the first state-sponsored rehousing program (funded through ESG-CV). Because the program included multiple CoCs, NC funded a centralized access point and used a standardized Housing Barriers Assessment to prioritize households for housing resources. Understanding that many of these households would potentially appear on both the CoC's By Name List and the state-sponsored program's prioritization list, staff worked with the CoC's CE Council to develop protocols for movement across lists to decrease duplication of services and ensure households received appropriate referrals and accessed PH quickly. The CoC's CE lead staff member joined the state's rehousing program planning team to ensure fidelity to CoC's CE written standards, address challenges on behalf of the CoC, and serve as a liaison to communicate changes and train regional CE Leads and rehousing program staff. The CoC's CE lead staff member held monthly calls with regional CE Leads to answer questions, address challenges between the two prioritization systems, and note local issues needing elevation to the GB or the NC rehousing planning team.

1E. Project Capacity, Review, and Ranking–Local Competition

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	**Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.a. and 2.g.	

1.	**Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.**	08/18/2021
2.	**Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.**	07/26/2021

1E-2.	**Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.**	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	**Established total points available for each project application type.**	Yes
2.	**At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).**	Yes
3.	**At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).**	Yes
4.	**Used data from a comparable database to score projects submitted by victim service providers.**	Yes
5.	**Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.**	Yes
6.	**Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.**	Yes

1E-2a.	**Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.**	

	NOFO Section VII.B.2.d.

	Describe in the field below how your CoC reviewed, scored, and selected projects based on:
1.	**the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and**
2.	**considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.**

(limit 2,000 characters)

1)The CoC prioritizes projects that serve people with disabilities, including disabling conditions such as substance use, mental illness, or other impairments requiring significant support to maintain PH; CH people who have been homeless for long periods of time & more susceptible to victimization, illness, & death; HHs fleeing DV; people identifying as LGBTQ; & unaccompanied or parenting youth 18-24. The CoC prioritizes projects that use a Housing First approach & serve low- or no-income HHs or people who have difficulty engaging in services. 2) Projects that serve vulnerable populations receive additional points on the CoC-approved scorecards. Projects with more points ranked higher on the final prioritization list. The CoC historically ranks projects following Housing First tenets higher on the ranked list. For the first time, all new/renewal projects ranked met Housing First standards: not screening out for income, substance use, DV, or criminal record and not terminating due to failure to participate in services or make progress on service plans, loss of income or failure to increase income, DV, or any other activity not covered in a standard lease agreement. The CoC also evaluates and ranks projects based on their adherence to SAMHSA's PSH Key Elements & the USICH's RRH Program Standards & Benchmarks, which prioritize services to more highly vulnerable people and match services to HH needs. Projects meeting more of these standards ranked higher on the final prioritization list. All PSH projects must follow HUD Notice 16-011 to be included on the ranked list. Additionally, the CoC established funding priorities for adequate coverage of PSH in the CoC and increase the availability of RRH to ensure vulnerable populations across the CoC have access to housing services and resources.

1E-3.	**Promoting Racial Equity in the Local Review and Ranking Process.**	
	NOFO Section VII.B.2.e.	

	Describe in the field below how your CoC:
1.	**obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;**
2.	**included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;**
3.	**rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).**

(limit 2,000 characters)

1)The CoC uses a Scorecard Committee (SC) to develop CoC competition scorecards. The SC meets in advance of the competition to determine factors needed to evaluate applications, using the CoC's & HUD's funding priorities to shape recommended scorecards for the CoC Governance Board (GB) to approve. The SC that developed this year's scorecards had Regional

Committee representatives as well as members of the CoC's RE Subcommittee (RES). SC members share information locally, gathering input from local meetings. 75% of members were BIPoC. Staff post scorecards in advance of the GB approval meeting. The CoC holds open GB meetings & staff encourage members/non-members to ask questions & provide feedback. The GB approved the SC recommendation unanimously. BIPoC comprise 46% of GB membership. 2)The CoC uses a Project Review Committee (PRC) to review, score, & rank CoC applications. The scoring process pairs one PRC/CoC staff member to review each application independently. After review, the pair hold a call to discuss each question, averaging scores to complete a total application score. The PRC creates options for ranking project applications, discussing CoC precedents, priorities, geographic coverage, performance, & spending. The PRC creates a recommended ranking list for the GB to approve. 40% of PRC members were BIPoC. The CoC holds open GB meetings & staff encourage members/non-members (without a conflict) to ask questions & provide feedback. The GB approved the PRC recommendation unanimously. BIPoC comprise 46% of GB membership. 3)The RES consulted with the SC to create CoC scorecards, adding a newly designed Equity Section to measure how applicants consider populations disproportionately affected by homelessness. The section measured an agency's ability to provide guidelines in other languages, bilingual staff, interpreter services, inclusion of Anti-Discrimination Policies in P&Ps; RE staff training; equal access hiring clauses; % of non-white Board members.

1E-4.	**Reallocation–Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.**	
	NOFO Section VII.B.2.f.	

	Describe in the field below:
1.	**your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;**
2.	**whether your CoC identified any projects through this process during your local competition this year;**
3.	**whether your CoC reallocated any low performing or less needed projects during its local competition this year;**
4.	**why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and**
5.	**how your CoC communicated the reallocation process to project applicants.**

(limit 2,000 characters)

1)The CoC established funding priorities for the competition that include ensuring funding is being used well, including potentially reallocating funding from projects with patterns of low spending & poor performance. These priorities guide the work of the CoC's Project Review Committee (PRC), which scores applications & recommends project ranking & reallocation to the CoC Governance Board. 2,3,4) The PRC identified no significant performance issues during their review process. They noted potential performance criteria they would review in subsequent years to gauge applicant performance: exits to permanent destinations; ability to serve the most vulnerable populations; unit utilization; earned & unearned cash benefits. The PRC identified (8) renewals below the CoC's 90% spending threshold. When deciding about reallocation due to spending, the PRC looks at the applicant's 3-year spending history, considering full/partial reallocation as an option. In this year's competition, the

PRC declined to reallocate (2) applicants because they had just completed their first operating year & (4) applicants because they were just below the spending threshold & had no history of underspending. (2) applicants had significant & historical underspending. The PRC decided not to reallocate these projects because the applicants provided evidence that they underspent the grants because of prior reallocations that required HHs to transfer to the continuing grants. With additional HHs, the renewals would spend in excess of 95% in the coming year. One renewal applicant decided not to apply so the CoC reallocated that funding for a new project. 5)The CoC posted approved funding priorities to the CoC's website on 05/04/21. Staff oriented & shared links with new applicants during intent to apply calls prior to the competition. Staff also distributed the link through its CoC email distribution list, which includes representatives for each CoC renewal applicant.

1E-4a.	**Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.**	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No

1E-5.	**Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.**	
	NOFO Section VII.B.2.g.	

1.	**Did your CoC reject or reduce any project application(s)?**	Yes
2.	**If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.**	10/14/2021

1E-5a.	**Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	10/14/2021

1E-6.	**Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website–which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/10/2021

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2A-1.	**HMIS Vendor.**	
	Not Scored–For Information Only	

Enter the name of the HMIS Vendor your CoC is currently using.	WellSky

2A-2.	**HMIS Implementation Coverage Area.**	
	Not Scored–For Information Only	

Select from dropdown menu your CoC's HMIS coverage area.	Multiple CoCs

2A-3.	**HIC Data Submission in HDX.**	
	NOFO Section VII.B.3.a.	

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/12/2021

2A-4.	**HMIS Implementation–Comparable Database for DV.**	
	NOFO Section VII.B.3.b.	

	Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:
1.	**have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and**
2.	**submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.**

(limit 2,000 characters)

1)The CoC has a long history of working with the NCDHHS, the state ESG recipient, to ensure VSPs use comparable databases to collect data elements required in the HUD Data Standards. In partnership with our HMIS Lead, VSPs are offered paper forms for data collection & data standards training that do not depend on software type. These bite-sized trainings share foundational material that new & veteran staff can access to stay current with updates to data standards & workflows. Additionally, the CoC has started new outreach efforts to each DV dedicated housing & service provider to strengthen relationships & confirm the comparability of selected databases. The CoC conducted targeted outreach with aggregated HUD/HMIS Lead resources as well as shared these publicly online (https://www.ncceh.org/datacenter/comparable/). In particular, the outreach will confirm with agencies the basic comparable functions of data collection, CAPERs & APRs, & software type. Of agencies currently using a comparable database, 87.5% use Osnium. CoC staff coordinate with the North Carolina Coalition Against Domestic Violence, which currently provides support to NC VSPs using Osnium. The CoC is currently transitioning those support functions to our HMIS Lead. 2)The CoC has not previously required submission of SPMs data from VSPs. Over the next 12 months, the CoC, in collaboration with our HMIS Lead, will conduct additional outreach to confirm HUD CSV Export capability, System Performance Measures reports, Data Quality Framework report, & LSA. The CoC has recently developed a performance dashboard using HMIS-participating agency data, which uses the HUD CSV Export. We plan to incorporate comparable database data from VSPs by late summer 2022.

2A-5.	**Bed Coverage Rate–Using HIC, HMIS Data–CoC Merger Bonus Points.**	
	NOFO Section VII.B.3.c. and VII.B.7.	

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	2,268	222	1,048	51.22%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	491	11	154	32.08%
4. Rapid Re-Housing (RRH) beds	730	44	682	99.42%
5. Permanent Supportive Housing	1,814	0	1,543	85.06%
6. Other Permanent Housing (OPH)	0	0	0	

2A-5a.	**Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.**	
	NOFO Section VII.B.3.c.	

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	**steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and**
2.	**how your CoC will implement the steps described to increase bed coverage to at least 85 percent.**

(limit 2,000 characters)

1)The CoC's Funding and Performance Subcommittee (FPS) developed a plan to increase HMIS bed coverage for ES & TH programs, presenting the plan for approval at the 01/21 CoC Governance Board meeting. The approved plan with ambitious goals required a change in the CoC Governance Charter, assigning HMIS recruitment activities to the Regional Lead Alternate (RLA) position in each of the CoC's Regional Committees. The CoC tasked RLAs to form a subcommittee to create a local engagement plan with all agencies not currently participating in HMIS. CoC staff provided RLAs with the 2021 HIC to identify projects needing outreach. RLAs began targeting agencies with the largest number of non-HMIS beds. 2)RLAs work with their local subcommittee, assigning members engagement tasks with identified non-HMIS participating agencies. Members will outreach agencies, using prepared HMIS recruitment materials, answering questions, explaining benefits, and providing information to connect with the HMIS Lead to get started. When an agency requires more information, RLAs will connect HMIS Lead/CoC staff to agencies interested in joining HMIS. Staff will schedule meetings with agencies, providing them more detailed information as needed. RLAs will report status of activities by the 15th of each month. The FPS will review reports, evaluate progress, discuss challenges, and provide resources to RLAs based on reporting. HMIS Lead staff will provide updates on bed coverage rates and ongoing discussions with interested agencies. Upon completion, CoC staff will provide the 2022 HIC to RLAs to identify new agencies needing engagement.

2A-5b.	**Bed Coverage Rate in Comparable Databases.**	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	40.30%

2A-5b.1.	**Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.**	
	NOFO Section VII.B.3.c.	

	If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:
1.	**steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and**
2.	**how your CoC will implement the steps described to increase bed coverage to at least 85 percent.**

(limit 2,000 characters)

1)The CoC's Funding and Performance Subcommittee (FPS) developed a plan to increase bed coverage for ES & TH programs, presenting the plan for approval at the 01/21 CoC Governance Board meeting. The approved plan with ambitious goals required a change in the CoC Governance Charter, assigning HMIS recruitment activities to the Regional Lead Alternate (RLA) position in each of the CoC's Regional Committees. The CoC tasked RLAs to form a subcommittee to create a local engagement plan with all agencies not currently participating in HMIS. The CoC will adjust this plan to include outreach to VSPs not currently using a comparable database to begin recruitment efforts in 01/22. CoC staff will provide RLAs with the 2021 HIC to identify VSP projects needing outreach. 2)RLAs work with their local subcommittee, assigning members engagement tasks with identified VSPs not using a comparable database.

Members will outreach VSPs, using prepared recruitment materials, answering questions, explaining benefits, & providing information to connect with the HMIS Lead to get started. When an agency requires more information, RLAs will connect HMIS Lead/CoC staff to agencies interested in using a comparable database. Staff will schedule meetings with agencies, providing them more detailed information as needed. RLAs will report status of activities by the 15th of each month. The FPS will review reports, evaluate progress, discuss challenges, and provide resources to RLAs based on reporting. HMIS Lead staff will provide updates on comparable database bed coverage rates & ongoing discussions with interested agencies. Upon completion, CoC staff will provide the 2022 HIC to RLAs to identify new agencies needing engagement.

2A-6.	**Longitudinal System Analysis (LSA) Submission in HDX 2.0.**	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	Yes

2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2B-1.	**Sheltered and Unsheltered PIT Count–Commitment for Calendar Year 2022**	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes

2B-2.	**Unsheltered Youth PIT Count–Commitment for Calendar Year 2022.**	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes

2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2C-1.	**Reduction in the Number of First Time Homeless–Risk Factors.**	
	NOFO Section VII.B.5.b.	

	Describe in the field below:
1.	**how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;**
2.	**how your CoC addresses individuals and families at risk of becoming homeless; and**
3.	**provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.**

(limit 2,000 characters)

1)The CoC determines risk factors to identify persons becoming homeless for the first time by screening each person presenting for services with a tool called the Prevention & Diversion Screen and using the collected data from the tool to evaluate common factors seen in the population. This allows programs to use diversion approaches, assisting people to problem solve to identify other PH options rather than enter shelter. 2) The CoC actively works to increase resources for diversion activities, including financial assistance & mediation services. The CoC recently received a multi-year grant to pilot diversion services in 5 geographically diverse sites in the CoC. The funding targets HHs with children, allowing agencies to provide financial supports for a variety of items (e.g. hotel/motel costs, security deposits, rent arrears, transportation costs) to divert people from entering congregate shelter. The CoC contracted with the Cleveland Mediation Center to provide diversion practice training and bi-monthly coaching to learn how to successfully engage HHs and divert them from the system. The CoC will use the pilot to learn best practices so it can leverage the experience and funding to scale diversion services across the CoC. 3) A Project Specialist from NCCEH oversees diversion services in the CoC, working closely with regional leadership and individual agencies to implement best practices, educate local providers on tools and mediation skills, and seek local resources for diversion efforts to reduce the number of first-time homeless HHs.

2C-2.	**Length of Time Homeless–Strategy to Reduce.**	
	NOFO Section VII.B.5.c.	

	Describe in the field below:
1.	your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,000 characters)

1)The CoC CE system prioritizes HHs for RRH & PSH based on LOTH, & the CoC works closely with providers to increase accessibility to PH. The CoC's written standard focus on program design, ensuring projects follow Housing First tenets & other best practices (SAMHSA's PSH Key Elements, USICH's RRH Program Standards, & CPD Notice 16-011). CoC staff provide ongoing training on standards & pull program data from HMIS to evaluate progress on turnover rate, targeting, & positive exits. In 11/21, the CoC began using a data dashboard at monthly CoC Governance Board (GB) meetings. The dashboard highlights system performance measures, allowing the CoC to track current and historical client counts, system inflow/outflow, exits to PH, demographic breakdowns, household progress, and others. The dashboard measures both CoC-level data as well as county data. The GB will use the dashboard to develop strategies to decrease the LOTH and measure progress over time. In 2022, CoC staff will introduce the dashboard to each of the CoC's 13 Regional Committees (RCs), training local leadership how to use the dashboard and facilitate discussions to develop local strategies to reduce the LOTH and measure progress over time. The CoC's number one priority for use of available EHVs is for HHs needing to move on from PSH. Exiting HHs from PSH frees up PSH units for HHs with long histories of homelessness thus reducing the CoCs LOTH. 2)All local CE systems hold regular case conferencing, use local BNLs that identify HHs with high vulnerability & long periods of homelessness, & connect them to PH resources. CoC staff evaluate HMIS data regularly to identify long-term stayers in homeless programs & work with local CE staff to ensure connection to the CE system. 3) An NCCEH Project Specialist works with CE Leads to strategize how to target people with the longest histories of homelessness & reduce the LOTH.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

	Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:
1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1)The CoC uses several strategies to increase the rate at which persons exit ES, TH, & RRH program to PH destinations. The CoC Governance Board approved written standards, including best practice program design (USICH RRH Program Standards). The CoC set termination/evaluation procedures, limiting reasons for ending assistance to clients. CoC staff provide ongoing TA to providers on standards & work with program staff on difficult cases, providing guidance on ways to engage landlords & hard-to-house individuals to improve

PH exits. CoC staff began a 3-month intensive ES TA cohort model in late 2020, pairing 3-4 ES programs to learn how to lower barriers and become more housing-focused. Staff designed cohorts to: educate ESs on low barrier models/housing-focused services; identify barriers needing removal, operationalize low-barrier/housing-focused services, and set bold 3-month goals to increase exits to PH. At the end of the 3-month intensive, ESs begin implementation of services and staff meet with them monthly to evaluate progress on goals using the CAPER. CoC staff conducted 2 ES TA cohorts in 2021 and intend to conduct 4 additional cohorts in 2022. 2) The CoC currently has a 99% PH retention rate or exits to PH destinations in its PSH programs. This high rate is due to the CoC implementing a performance improvement planning process with its PSH programs, wherein CoC staff review program/client documents to evaluate a program's compliance, adherence to best practices, & performance. After review, staff works with program staff to implement a plan, setting goals and timelines for improvement. In 2022, staff will begin quarterly calls with programs to evaluate APR performance data and provide technical assistance to improve services, troubleshoot difficult cases, and set performance benchmarks and goals. During calls, staff will provide training as needed on Housing First tenets, trauma-informed care, and Motivational Interviewing.

2C-4.	**Returns to Homelessness–CoC's Strategy to Reduce Rate.**	
	NOFO Section VII.B.5.e.	

	Describe in the field below:
1.	**how your CoC identifies individuals and families who return to homelessness;**
2.	**your CoC's strategy to reduce the rate of additional returns to homelessness; and**
3.	**provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.**

(limit 2,000 characters)

1)The CoC uses BNL data to identify HHs returning to homelessness. It evaluates HH & program data to determine common factors of HHs returning to the system & help develop strategies to decrease returns. 2)The CoC prioritizes & targets homelessness prevention funding for return homelessness, meaning HHs that have a history of homelessness or that exited from RRH/PSH programs previously. The CoC advocated for & received support from the NCDHHS to include return homelessness on the screening tool used to prioritize HHs for ESG-CV homelessness prevention funds. The CoC implemented progressive engagement in its ESG-CV funded rehousing programs, working with CE Leads & rehousing agencies to transition higher need HHs at risk of returning to homelessness without continuing supports from RRH to PSH. The CoC will phase in progressive engagement in annual ESG-funded rehousing programs in 2022. CoC staff provide ongoing TA to ES on best practices & work with program staff on difficult cases, providing guidance on ways to engage landlords & hard-to-house individuals to improve PH exits. CoC staff began a 3-month intensive ES TA cohort model in late 2020, pairing 3-4 ES to learn how to lower barriers & become more housing-focused. Staff designed cohorts to: educate ES on low barrier models/housing-focused services; identify barriers needing removal, operationalize these best practice models, & set bold 3-month goals to increase exits to PH. After the 3-month intensive, ES begin implementing services, & staffs meet monthly, using the

CAPER to evaluate progress on goals. CoC staff conducted 2 ES TA cohorts in 2021, intending to conduct 4 additional cohorts in 2022. Housing-focused services training includes helping ES set-up HHs for long-term PH success, reducing returns to homelessness. 3)The Project Director works with PH programs to improve performance. A Project Specialist from NCCEH works with CE Leads on local implementation & will oversee the CoC's BNL.

2C-5.	**Increasing Employment Cash Income-Strategy.**	
	NOFO Section VII.B.5.f.	

	Describe in the field below:
1.	**your CoC's strategy to increase employment income;**
2.	**how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
3.	**provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.**

(limit 2,000 characters)

1)The CoC uses several strategies to increase employment income. Members across the CoC, such as Vocational Rehabilitation (VR), NC Works (NCW), & Work First (WF), provide direct assistance to people experiencing homelessness to increase employment income. CoC staff review HMIS data with program staff, comparing current & past performance on employment income. They brainstorm strategies, set goals, & have conversations with local employment resources to support income procurement. In CY20, CoC-funded programs helped 10% of stayers & 8% of leavers increase employment income. In CY20, ESG-funded programs helped 3% of participants increase employment income. The CoC maintains a list & advertises all employment-related resources to CoC stakeholders through its monthly meetings & email list. These resources include job fairs & listings, employment trainings, & news from employment providers. In 2021, the CoC will build stronger relationships with NC Workforce Development staff & attempt to partner on mutual goals, formalizing a CoC-wide MOU & helping communities make better connections with local Workforce Development Boards. 2) 100% of funded projects connect participants to mainstream employment programs. They collaborate with mainstream services such as NCW, VR, Goodwill, & DSS work programs to increase job placement, improve skills, mentor participants, & decrease barriers to work. The CoC encourages grantees to formalize partnership through MOUs, defining the specific services each party will provide. 32% of the CoC funding portfolio lies with Managed Care Organizations (MCO). Each MCO has a Supported Employment program, helping clients find & maintain long-term employment. This program provides in-house supports to HHs in their PSH project as well as to other PSH & RRH programs outside the MCO network. 3) A Project Specialist works with NC Workforce Development and local communities to help HHs increase income & access to employment.

2C-5a.	**Increasing Employment Cash Income–Workforce Development–Education–Training.**	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:

1.	**promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and**
2.	**is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.**

(limit 2,000 characters)

1)The CoC, through local stakeholders, has formal, written agreements with local workforce development boards & local education or training organizations to increase access to employment, mainstream benefit, education, & training organizations to drive increases in employment and non-employment income & opportunities. 2) The main way that the CoC promotes partnerships and increases access for participants to employment opportunities is through various job fairs. The CoC and Regional Committees (RC) use email distribution lists to notify and advertise upcoming job fairs through NC Works, local Departments of Social Services, Salvation Army, and local colleges and universities. Some local RC leadership serve on planning committees with local community colleges to conduct spring and fall job fairs for community members and partners with local industries such as hotels and casinos to drive program participants to find employment. 32% of the CoC funding portfolio lies with Managed Care Organizations (MCO). Each MCO has a Supported Employment program, helping clients find & maintain long-term employment. Each MCO has dedicated staff who work to develop local partnerships with employers who will work with PSH participants. MCOs use their Supported Employment program to provide in-house support to HHs in PSH projects they operate and offer similar services to other PSH & RRH programs outside the MCO network that work with disabled HHs. All PSH programs help participants seek meaningful volunteer opportunities in their local communities at local soup kitchens, animal rescue centers, emergency shelters, and other human service organizations. Case workers act as liaisons to these resources when problems occur, advocate for additional responsibilities on participants' behalf, and provide mentoring when necessary to reach usable skills.

2C-5b.	**Increasing Non-employment Cash Income.**	
	NOFO Section VII.B.5.f.	

	Describe in the field below:
1.	**your CoC's strategy to increase non-employment cash income;**
2.	**your CoC's strategy to increase access to non-employment cash sources; and**
3.	**provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.**

(limit 2,000 characters)

1)The CoC employs several strategies to increase non-employment cash income. Members across the CoC, such as VAMCs, DSS, & NC Legal Aid staff, provide direct assistance to people experiencing homelessness to increase non-employment cash income from sources such as VA disability & pensions, TANF, & SSI-SSDI. The CoC also has trained SOAR workers, assisting people with disabilities to navigate the often-complex SSA system to access disability benefits. The CoC sets non-employment cash income benchmarks for programs funded through the CoC. CoC staff review HMIS data with program staff, comparing current & past performance on non-employment cash income. They brainstorm strategies, set goals, & have conversations with local benefit

resources to support income procurement. In CY20, CoC-funded programs helped 39% of stayers & leavers increase non-employment cash income. In CY20, ESG-funded programs helped 2% of participants increase non-employment cash income. 2)The CoC incentivizes programs applying for CoC & ESG funding to increase non-employment cash income through extra points on scorecards. The CoC advertises & encourages providers to send staff to regular SOAR trainings. The CoC emphasizes using SOAR to apply for SSA benefits to increase non-employment income for people with disabling conditions. Over 2 years, 15 caseworkers have been SOAR-trained, and the CoC had 10 active SOAR workers. Many CoC providers have formal relationships with local benefits specialists, inviting them into their ES/TH/Food programs to work directly with program participants. CoC staff seek state & local resources that can help increase access to non-employment cash income & connect them to regional leadership & specific providers to build partnerships locally. 3) An NCCEH Project Specialist works with NC & local entities & providers in the CoC to help increase non-employment cash income & access. An NCCEH Project Specialist oversees SOAR programs.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3A-1.	**New PH-PSH/PH-RRH Project–Leveraging Housing Resources.**	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No

3A-1a.	**New PH-PSH/PH-RRH Project–Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	**Private organizations**	No
2.	**State or local government**	No
3.	**Public Housing Agencies, including use of a set aside or limited preference**	No
4.	**Faith-based organizations**	No
5.	**Federal programs other than the CoC or ESG Programs**	No

3A-2.	**New PSH/RRH Project–Leveraging Healthcare Resources.**	
	NOFO Section VII.B.6.b.	

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes

3A-2a.	**Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.B.6.b.	

1.	**Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?**	Yes
2.	**Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?**	Yes

3A-3.	**Leveraging Housing Resources–Leveraging Healthcare Resources–List of Projects.**	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

If you selected yes to question 3A-1. or 3A-2., use the list feature icon to enter information on each project you intend for HUD to evaluate to determine if they meet the bonus points criteria.

Project Name	Project Type	Rank Number	Leverage Type
Solid Foundations	PSH	30	Healthcare

3A-3. List of Projects.

1. What is the name of the new project?	Solid Foundations
2. Select the new project type:	PSH
3. Enter the rank number of the project on your CoC's Priority Listing:	30
4. Select the type of leverage:	Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3B-1.	**Rehabilitation/New Construction Costs–New Projects.**	
	NOFO Section VII.B.1.r.	

Is your CoC requesting funding for any new project application requesting $200,000 or more in funding for housing rehabilitation or new construction?	No

3B-2.	**Rehabilitation/New Construction Costs–New Projects.**	
	NOFO Section VII.B.1.s.	

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
1.	**Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and**
2.	**HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.**

(limit 2,000 characters)

N/A

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3C-1.	**Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.**	
	NOFO Section VII.C.	

Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No

3C-2.	**Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.**	
	NOFO Section VII.C.	

	If you answered yes to question 3C-1, describe in the field below:
1.	**how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and**
2.	**how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.**

(limit 2,000 characters)

N/A

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

4A-1.	**New DV Bonus Project Applications.**	
	NOFO Section II.B.11.e.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes

4A-1a.	**DV Bonus Project Types.**	
	NOFO Section II.B.11.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2021 Priority Listing.

	Project Type	
1.	**SSO Coordinated Entry**	No
2.	**PH-RRH or Joint TH/RRH Component**	Yes

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-3 and 4A-3a.

4A-2.	**Number of Domestic Violence Survivors in Your CoC's Geographic Area.**	
	NOFO Section II.B.11.	

1.	**Enter the number of survivors that need housing or services:**	18,183
2.	**Enter the number of survivors your CoC is currently serving:**	2,632
3.	**Unmet Need:**	15,551

4A-2a.	**Calculating Local Need for New DV Projects.**	
	NOFO Section II.B.11.	

Describe in the field below:

1.	**how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and**
2.	**the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects); or**
3.	**if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.**

(limit 2,000 characters)

1)The North Carolina Council for Women (CFW), a statewide agency advising the Governor's Office and NC General Assembly on women's and children's issues, conducts an annual statistical analysis with Victim Service Providers that they fund with Governor's Crime Commission funding. This analysis covering the time period of July 1, 2020 through June 30, 2021 showed 18,183 people in the CoC seeking services and housing due to Domestic Violence or Intimate Partner Violence. The total number of survivors currently being served comes from HMIS client records enrolled in CoC projects dedicated for people experiencing homelessness including CE projects. 2)The total number of survivors that need services and/or housing data comes from phone records and/or local chat hotlines. The total number of survivors being served comes from HMIS client records enrolled in CoC projects dedicated for people experiencing homelessness including CE projects. 3)The biggest reason that the total number of survivors in the system cannot be served is that the CoC lacks adequate funding for rental assistance and housing stabilization services to house each survivor household.

4A-4.	**New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information.**	
	NOFO Section II.B.11.	

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects–only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

Applicant Name
North Carolina Co...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-4.	**New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects–Project Applicant Information–Rate of Housing Placement and Rate of Housing Retention–Project Applicant Experience.**	
	NOFO Section II.B.11.	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2021 Priority Listing:

1.	**Applicant Name**	North Carolina Coalition Against Domestic Violence
2.	**Rate of Housing Placement of DV Survivors–Percentage**	70.00%
3.	**Rate of Housing Retention of DV Survivors–Percentage**	100.00%

4A-4a.	**Calculating the Rate of Housing Placement and the Rate of Housing Retention–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below:
1.	**how the project applicant calculated the rate of housing placement and rate of housing retention reported in question 4A-4; and**
2.	**the data source (e.g. comparable database, other administrative data, external data source, HMIS for non-DV projects).**

(limit 1,000 characters)

1)In 2020 & 2021, NCCADV, through state funding & private donations, developed a housing assistance program for survivors of DV. Households worked directly with NCCADV staff to identify their financial assistance and service needs & the agency provided monthly rent and utility assistance to place survivors in permanent housing. 2)NCCADV calculated the housing placement rate for DV survivors by totaling the number of households assisted with permanent housing financial assistance and dividing that number by the total of households who applied for housing assistance. NCCADV connected all households the agency helped with housing assistance to local VSPs to provide ongoing services. NCCADV calculated the housing retention rate by calculating the number of households who re-engaged with NCCADV for additional financial assistance. No households or VSPs contacted NCCADV for additional assistance.

4A-4b.	**Providing Housing to DV Survivor–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below how the project applicant:
1.	**ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;**

2.	**prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;**
3.	**connected survivors to supportive services; and**
4.	**moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.**

(limit 2,000 characters)

1)NCCADV contacted applicants needing housing assistance, conducting intake to determine the survivor HH's needs & ensuring assistance met safety & affordable guidelines. NCCADV provided rental & utility assistance to eligible applicants within two weeks of initial application until available funding was expended. 2)Applicants completed & submitted an online application. Applicants who needed language interpretation services to complete the application either worked with a local advocate or used NCCADV's language line. DV survivors whose safety & well-being were impacted by COVID-19 were eligible for housing assistance. Those meeting eligibility confirmed that without such assistance their options were to move back into housing with an abuser; move into a DV shelter; &/or move into a non-DV ES. 3)NCCADV designed its program using Housing First tenets where survivors were not required to accept services to receive assistance. However, upon intake, staff asked applicants the services to which they needed connection, including DV services, healthcare, & food assistance. NCCADV worked with local providers in communities in which the survivor lived to make direct referrals to connect them appropriately. 4)NCCADV provided rental & utility assistance to applicants with identified housing, communicating the short-term nature of financial resources. Upon intake, staff asked applicants the services to which they needed connection, including DV services, healthcare, & food assistance. NCCADV worked with local providers in communities in which the survivors lived to make direct referrals to connect them appropriately. Providers connected HHs to longer term housing assistance such as Housing Choice Vouchers, Emergency Housing Vouchers, Public Housing, & others to connect with ongoing subsidies or income-based housing to match income levels to ensure HHs sustained current housing or moved to other more sustainable housing after the end of NCCADV financial assistance.

4A-4c.	**Ensuring DV Survivor Safety–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below examples of how the project applicant ensured the safety of DV survivors experiencing homelessness by:
1.	**training staff on safety planning;**
2.	**adjusting intake space to better ensure a private conversation;**
3.	**conducting separate interviews/intake with each member of a couple;**
4.	**working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
5.	**maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant; and**
6.	**keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors.**

(limit 5,000 characters)

1)All NCCADV staff working on the housing program received training in & have

prior experience in DV safety planning, including attending the Advocate's Institute. 2)NCCADV staff conducted intakes virtually & by phone by staff working from home. NCCADV requires all staff to have secure internet connections and use encrypted communications. 3)NCCADV did not serve couples in this housing program. However, NCCADV has a policy of serving individuals separately & communicating with survivors in ways they have indicated are safe for them. 4)Eligible applicants chose their own housing, which had been identified at the time of intake. Staff asked questions during intake to determine client safety and appropriateness of chosen housing. 5)Applicants chose their own housing, which had been identified at the time of intake. Applicants signed normal leases with normal safety protocols for anyone who would be renting the unit, which were inclusive of maintenance protocols, landlord notifications, visitation expectations, & others. NCCADV does not own or maintain properties where applicants might live. 6)Applicants chose their own housing, which has been identified at the time of intake. Because applicants leased units in their names, they kept ownership to whom they divulged their location. NCCADV has strict protocols in place to protect the confidentiality of clients seeking assistance, never divulging locations of home, work, shelter, or other places where survivors may live or congregate.

4A-4c.1.	**Evaluating Ability to Ensure DV Survivor Safety–Project Applicant Experience.**	
	NOFO Section II.B.11.	

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

NCCADV prioritizes the safety of survivors in all aspects of its work, from training to staff in safety planning & protocols to providing technical assistance to NC VSPs, homeless & housing service providers, & community partners to educating the general public on the scourge of DV & how everyone can assist survivors find safety. To provide excellent trauma-informed, victim-centered services centered around safety, NCCADV evaluates its training & direct assistance programs. The agency does this in several ways: gathering direct feedback from people the agency serves through conversations, surveys, & focus groups; providing opportunities for people to provide anonymous feedback; enlisting feedback from the NC victim services provider network on NCCADV's strengths & challenges & what the agency could do to better to provide services & support; and soliciting feedback from community partners & engaging them directly in planning & program/agency policies & procedures. NCCADV staff, leadership, & Board use this information & feedback in its strategic planning & ongoing evaluation of the effectiveness of programming to provide safety to survivors. The agency continually adjusts, improves, and updates policies, relying on data, feedback, & national best practices to improve survivor safety over time.

4A-4d.	**Trauma-Informed, Victim-Centered Approaches–Project Applicant Experience.**	
	NOFO Section II.B.11.	

	Describe in the field below examples of the project applicant's experience in using trauma-informed, victim-centered approaches to meet needs of DV survivors in each of the following areas:
1.	prioritizing program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
6.	providing opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for parenting, e.g., parenting classes, childcare.

(limit 5,000 characters)

1)Participants secured housing in communities where they felt safe, had support, & could access services. NCCADV provided rental & utility assistance to eligible applicants within 2 weeks of application. 2) NCCADV hires staff with experience providing trauma-informed care & train them in survivor-driven provisions based on a foundation of respect & valuing survivors' experience, strengths, & agency. 3)NCCADV takes a trauma-informed approach to conversations with survivors. While housing assistance did not include services, NCCADV connected participants to local services including trauma-informed, victim-centered DV services. When needed, NCCADV provided funding for therapy to survivors. 4)NCCADV operates on a foundation of mutual respect for survivors. NCCADV trusts survivors are experts in their own experience, hold space for trauma they have endured, & rely on innate strengths & assets to guide services. NCCADV recognizes that seeking assistance is a brave & vulnerable act, needing acknowledgement & support. 5)NCCADV provides services with cultural sensitivity & responsiveness to survivor experiences & integrates strengths-based, victim-centered services into its provision of services. NCCADV has built a network of culturally sensitive VSPs across NC that approach survivors as people that have agency & worth, deserving respect in their choices. 6)NCCADV's housing assistance program maintained confidentiality, providing light touch, short-term assistance & services, relying on its network of VSPs across the state to provide trauma-informed, victim-centered services & connecting survivors to local therapy, mainstream services, & other assistance in the place where survivors live. 7)NCCADV's housing program connected participants to local services through its network of VSPs & other providers, including but not limited to, funding for family therapy, childcare services, parenting classes, mainstream benefits (TANF, WIC), & school liaisons for educational services.

4A-4e.	Meeting Service Needs of DV Survivors–Project Applicant Experience.	
	NOFO Section II.B.11.	

	Describe in the field below:
1.	supportive services the project applicant provided to domestic violence survivors experiencing homelessness while quickly moving them into permanent housing and addressing their safety needs; and

2.	**provide examples of how the project applicant provided the supportive services to domestic violence survivors.**

(limit 5,000 characters)

1) NCCADV hires staff with experience providing trauma-informed care & train them in survivor-driven provisions based on a foundation of respect & valuing survivors' experience, strengths, skills, & agency. NCCADV takes a trauma-informed approach to conversations with survivors. NCCADV provided rental & utility assistance to eligible applicants within 2 weeks of application. While housing assistance did not expressly include services, NCCADV connected participants to local services through its network of VSPs & other providers in the community where they would live, including but not limited to, funding for family therapy, trauma-informed, victim-centered DV services, childcare services, parenting classes, mainstream benefits (TANF, WIC, SNAP), & homeless school liaisons for educational services. 2)While housing assistance did not expressly include services, NCCADV connected participants to local services through its network of VSPs & other providers, including but not limited to, funding for family therapy, trauma-informed, victim-centered DV services, childcare services, parenting classes, mainstream benefits (TANF, WIC, SNAP), & homeless school liaisons for educational services. Local VSPs through referrals from NCCADV connected families with school age children to the local McKinney-Vento funded school liaison to ensure transportation from home to the child's school of origin was maintained. VSPs connected households to employment services through Goodwill, Vocational Rehabilitation, & local employment connections to obtain meaningful work & increase income to pay for ongoing housing costs. VSPs also provided court liaison services to households going through the justice system to obtain restraining orders, complete divorce proceedings, and handle other family justice needs.

4A-4f.	**Trauma-Informed, Victim-Centered Approaches–New Project Implementation.**	
	NOFO Section II.B.11.	

	Provide examples in the field below of how the new project will:
1.	**prioritize program participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;**
2.	**establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
3.	**provide program participants access to information on trauma, e.g., training staff on providing program participants with information on trauma;**
4.	**place emphasis on program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
5.	**center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
6.	**provide opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
7.	**offer support for parenting, e.g., parenting classes, childcare.**

(limit 5,000 characters)

1)After referral from CE, subrecipient agencies (SA) will conduct intake to discuss survivor needs/preferences regarding location of housing; proximity to jobs, services, & support network; public transportation; safety/security

measures; housing type, accessibility needs; & needs for children/pets; & others. SA will provider survivor-driven services to meet as many needs as possible within available housing stock & affordability. 2,4) SA operate from a foundation of mutual respect for all survivors, trusting their expertise in their own experiences. SA will try to eliminate barriers, holding space for the trauma survivors have endured & focusing on strengths to guide service direction. SA meet survivors where they are, understanding that valid reasons exist why they might remain in an abusive relationship & need to make their own decisions of how & when to make change. 3) SA have resources to share with survivors for DV trauma & have local connections to help process trauma when ready. SA will provide direct & referral resources for therapy, support groups, substance abuse treatment, & services for children exposed to DV. 5)NCCADV will provide training & TA to SA on the importance of cultural sensitivity, responsiveness, & inclusivity. Training centers services in the recognition that survivors tie their identities in their experiences & that interactions & services need to use individual participant strengths to untie unhealthy connections that inhibit personal growth in identity. 6)SA have strong ties locally with programs & community-based groups that will help participants connect to meaningful relationships. These include support groups; faith-based organizations; volunteer activities; behavioral health services, & others. 7) SA provide or refer to support networks for parents including family therapy, childcare services, parenting classes, mainstream benefits (TANF, WIC, SNAP), & school liaisons for educational services.

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process.

We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Tool	11/01/2021
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	11/01/2021
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	11/08/2021
1E-1. Local Competition Announcement	Yes	Local Competition...	09/30/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/02/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting - ...	11/02/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting - ...	11/02/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes	Web Posting - CoC...	11/09/2021
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Health Care Forma...	11/01/2021
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Project Review and Selection Process

Attachment Details

Document Description: Public Posting - Projects Rejected - Reduced

Attachment Details

Document Description: Public Posting - Projects Accepted

Attachment Details

Document Description: Web Posting - CoC-Approved Consolidated Application

Attachment Details

Document Description:

Attachment Details

Document Description: Health Care Formal Agreements

Attachment Details

Document Description:

Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. CoC Identification	09/15/2021
1B. Inclusive Structure	11/05/2021
1C. Coordination	11/05/2021
1C. Coordination continued	11/05/2021
1D. Addressing COVID-19	11/05/2021
1E. Project Review/Ranking	11/05/2021
2A. HMIS Implementation	11/01/2021
2B. Point-in-Time (PIT) Count	09/30/2021
2C. System Performance	11/05/2021
3A. Housing/Healthcare Bonus Points	11/01/2021
3B. Rehabilitation/New Construction Costs	09/30/2021

3C. Serving Homeless Under Other Federal Statutes	09/30/2021
4A. DV Bonus Application	11/05/2021
4B. Attachments Screen	11/09/2021
Submission Summary	No Input Required

Administration

Interviewer's Name	Agency	☐ Team ☐ Staff ☐ Volunteer
_____	_____	
Survey Date	**Survey Time**	**Survey Location**
DD/MM/YYYY ____/____/_____	__ __ __ __	_____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickname	Last Name
_____	_____	_____

In what language do you feel best able to express yourself? _____

Date of Birth	Age	Social Security Number	Consent to participate
DD/MM/YYYY ____/____/_____	_____	_____	☐ Yes ☐ No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1. **SCORE:**

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A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

☐ Shelters
☐ Transitional Housing
☐ Safe Haven
☐ **Outdoors**
☐ **Other (specify):** _____
☐ **Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.	**SCORE:**

2. How long has it been since you lived in permanent stable housing? _____ ☐ Refused

3. In the last three years, how many times have you been homeless? _____ ☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.	**SCORE:**

B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room? ____ ☐ Refused

b) Taken an ambulance to the hospital? ____ ☐ Refused

c) Been hospitalized as an inpatient? ____ ☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ____ ☐ Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? ____ ☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR **EMERGENCY SERVICE USE.**	**SCORE:**

5. Have you been attacked or beaten up since you've become homeless? ☐ **Y** ☐ N ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF HARM.**	**SCORE:**

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7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ **Y** ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES.** **SCORE:**

8. Does anybody force or trick you to do things that you do not want to do? ☐ **Y** ☐ N ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION.** **SCORE:**

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? ☐ **Y** ☐ N ☐ Refused

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ **N** ☐ Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT.** **SCORE:**

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? ☐ Y ☐ **N** ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY.** **SCORE:**

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ **N** ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE.** **SCORE:**

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? ☐ **Y** ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS.** **SCORE:**

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D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?	☐ **Y**	☐ N	☐ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	☐ **Y**	☐ N	☐ Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?	☐ **Y**	☐ N	☐ Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	☐ **Y**	☐ N	☐ Refused
19. When you are sick or not feeling well, do you avoid getting help?	☐ **Y**	☐ N	☐ Refused
20. *FOR FEMALE RESPONDENTS ONLY:* Are you currently pregnant?	☐ **Y**	☐ N	☐ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH.** **SCORE:**

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?	☐ **Y**	☐ N	☐ Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE.** **SCORE:**

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern?	☐ **Y**	☐ N	☐ Refused
b) A past head injury?	☐ **Y**	☐ N	☐ Refused
c) A learning disability, developmental disability, or other impairment?	☐ **Y**	☐ N	☐ Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH.** **SCORE:**

IF THE RESPONENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**. **SCORE:**

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25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ **Y** ☐ N ☐ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS.**	**SCORE:**

27. *YES OR NO:* Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? ☐ **Y** ☐ N ☐ Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA.**	**SCORE:**

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	**Score: Recommendation:**
A. HISTORY OF HOUSING & HOMELESSNESS	/2	0-3: no housing intervention
B. RISKS	/4	4-7: an assessment for Rapid Re-Housing
C. SOCIALIZATION & DAILY FUNCTIONS	/4	8+: an assessment for Permanent Supportive Housing/Housing First
D. WELLNESS	/6	
GRAND TOTAL:	/17	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ___ : ____ or
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	☐ Yes ☐ No ☐ Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

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Administration

Interviewer's Name	**Agency**	☐ Team ☐ Staff ☐ Volunteer
_____	_____	
Survey Date	**Survey Time**	**Survey Location**
DD/MM/YYYY ____/____/_____	__ __ : __ __	_____

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

PARENT 1

First Name	**Nickname**	**Last Name**
_____	_____	_____

In what language do you feel best able to express yourself? _____

Date of Birth	**Age**	**Social Security Number**	**Consent to participate**
DD/MM/YYYY ____/____/_____	_____	_____	☐ Yes ☐ No

PARENT 2

☐ No second parent currently part of the household

First Name	**Nickname**	**Last Name**
_____	_____	_____

In what language do you feel best able to express yourself? _____

Date of Birth	**Age**	**Social Security Number**	**Consent to participate**
DD/MM/YYYY ____/____/_____	_____	_____	☐ Yes ☐ No

IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

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Children

1. How many children under the age of 18 are currently with you? _____ ☐ Refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? _____ ☐ Refused
3. *IF HOUSEHOLD INCLUDES A FEMALE:* Is any member of the family currently pregnant? ☐ **Y** ☐ N ☐ Refused
4. Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

SCORE:

A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)

☐ Shelters
☐ Transitional Housing
☐ Safe Haven
☐ **Outdoors**
☐ **Other (specify):** _____
☐ **Refused**

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

6. How long has it been since you and your family lived in permanent stable housing? _____ ☐ Refused
7. In the last three years, how many times have you and your family been homeless? _____ ☐ Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

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B. Risks

8. In the past six months, how many times have you or anyone in your family...

   a) Received health care at an emergency department/room? ____ ☐ Refused

   b) Taken an ambulance to the hospital? ____ ☐ Refused

   c) Been hospitalized as an inpatient? ____ ☐ Refused

   d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ____ ☐ Refused

   e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? ____ ☐ Refused

   f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR **EMERGENCY SERVICE USE.**	**SCORE:**

9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☐ **Y** ☐ N ☐ Refused

10. Have you or anyone in your family threatened to or tried to harm themself or anyone else in the last year? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF HARM.**	**SCORE:**

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ **Y** ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES.**	**SCORE:**

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☐ **Y** ☐ N ☐ Refused

13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION.**	**SCORE:**

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C. Socialization & Daily Functioning

14.	Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?	☐ **Y**	☐ N	☐ Refused
15.	Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	☐ Y	☐ **N**	☐ Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR **MONEY MANAGEMENT.** **SCORE:**

16.	Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?	☐ Y	☐ **N**	☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY.** **SCORE:**

17.	Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?	☐ Y	☐ **N**	☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE.** **SCORE:**

18.	Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?	☐ **Y**	☐ N	☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS.** **SCORE:**

D. Wellness

19.	Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?	☐ **Y**	☐ N	☐ Refused
20.	Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	☐ **Y**	☐ N	☐ Refused
21.	If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?	☐ **Y**	☐ N	☐ Refused
22.	Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	☐ **Y**	☐ N	☐ Refused
23.	When someone in your family is sick or not feeling well, does your family avoid getting medical help?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH.** **SCORE:**

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24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ **Y** ☐ N ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE.** **SCORE:**

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ **Y** ☐ N ☐ Refused

b) A past head injury? ☐ **Y** ☐ N ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ **Y** ☐ N ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH.** **SCORE:**

28. *IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH:* Does any single member of your household have a medical condition, mental health concerns, **and** experience with problematic substance use? ☐ **Y** ☐ N ☐ N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**. **SCORE:**

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ **Y** ☐ N ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ **Y** ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS.** **SCORE:**

31. *YES OR NO:* Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? ☐ **Y** ☐ N ☐ Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA.** **SCORE:**

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E. Family Unit

32.	Are there any children that have been removed from the family by a child protection service within the last 180 days?	☐ **Y**	☐ N	☐ Refused
33.	Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY LEGAL ISSUES.** **SCORE:**

34.	In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?	☐ **Y**	☐ N	☐ Refused
35.	Has any child in the family experienced abuse or trauma in the last 180 days?	☐ **Y**	☐ N	☐ Refused
36.	*IF THERE ARE SCHOOL-AGED CHILDREN:* Do your children attend school more often than not each week?	☐ Y	☐ **N**	☐ N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR **NEEDS OF CHILDREN.** **SCORE:**

37.	Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?	☐ **Y**	☐ N	☐ Refused
38.	Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?	☐ **Y**	☐ N	☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY STABILITY.** **SCORE:**

39.	Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?	☐ Y	☐ **N**	☐ Refused
40.	After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...			
	a) 3 or more hours per day for children aged 13 or older?	☐ **Y**	☐ N	☐ Refused
	b) 2 or more hours per day for children aged 12 or younger?	☐ **Y**	☐ N	☐ Refused
41.	*IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER:* Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?	☐ **Y**	☐ N	☐ N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR **PARENTAL ENGAGEMENT.** **SCORE:**

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Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/2	
A. HISTORY OF HOUSING & HOMELESSNESS	/2	**Score:** **Recommendation:**
B. RISKS	/4	0-3 no housing intervention
C. SOCIALIZATION & DAILY FUNCTIONS	/4	4-8 an assessment for Rapid Re-Housing
D. WELLNESS	/6	9+ an assessment for Permanent Supportive Housing/Housing First
E. FAMILY UNIT	/4	
GRAND TOTAL:	/22	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ___ : _____ or
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (_____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	☐ Yes ☐ No ☐ Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

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Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

When a family wishes to receive assistance under the HCV program, the family must submit an application that provides the WHA with the information needed to determine the family's eligibility. HUD requires the WHA to place all families that apply for assistance on a waiting list. When HCV assistance becomes available, the WHA must select families from the waiting list in accordance with HUD requirements and WHA policies as stated in the administrative plan and the annual plan.

The WHA is required to adopt clear policies and procedures for accepting applications, placing families on the waiting list, and selecting families from the waiting list, and must follow these policies and procedures consistently. The actual order in which families are selected from the waiting list can be affected if a family has certain characteristics designated by HUD or the WHA that justify their selection. Examples of this are the selection of families for income targeting and the selection of families that qualify for targeted funding.

HUD regulations require that all families have an equal opportunity to apply for and receive housing assistance, and that the WHA affirmatively further fair housing goals in the administration of the program [24 CFR 982.53, HCV GB p. 4-1]. Adherence to the selection policies described in this chapter ensures that the WHA will be in compliance with all relevant fair housing requirements, as described in Chapter 2.

This chapter describes HUD and WHA policies for taking applications, managing the waiting list and selecting families for HCV assistance. The policies outlined in this chapter are organized into three sections, as follows:

Part I: The Application Process. This part provides an overview of the application process, and discusses how applicants can obtain and submit applications. It also specifies how the WHA will handle the applications it receives.

Part II: Managing the Waiting List. This part presents the policies that govern how the WHA's waiting list is structured, when it is opened and closed, and how the public is notified of the opportunity to apply for assistance. It also discusses the process the WHA will use to keep the waiting list current.

Part III: Selection for HCV Assistance. This part describes the policies that guide the WHA in selecting families for HCV assistance as such assistance becomes available. It also specifies how in-person interviews will be used to ensure that the WHA has the information needed to make a final eligibility determination.

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

This part describes the WHA policies for making applications available, accepting applications, making preliminary determinations of eligibility and the placement of applicants on the waiting list, when the waiting list is open. This part also describes the WHA's obligation to ensure the accessibility of the application process to elderly persons, people with disabilities, and people with limited English proficiency (LEP).

4-I.B. APPLYING FOR ASSISTANCE [HCV GB, pp. 4-11 – 4-16, Notice PIH 2009-36]

Any family that wishes to receive HCV assistance must apply for admission to the program. HUD permits the WHA to determine the format and content of HCV applications, as well how such applications will be made available to interested families and how applications will be accepted by the WHA. The WHA must include Form HUD-92006, Supplement to Application for Federally Assisted Housing, as part of the WHA's application.

The WHA utilizes a two-step application process.

Under the two-step application process, the WHA initially will require families to provide only the information needed to make an initial assessment of the family's eligibility, and to determine the family's placement on the waiting list. The family will be required to provide all of the information necessary to establish family eligibility and level of assistance when the family is selected from the waiting list.

As required by HUD, the initial application, or pre-application, will require the family provide at least the following information:

- Applicant name;
- Applicant address;
- Family size;
- Date and time of application;
- Qualification for any local preference;
- Racial or ethnic designation of the head of household;
- Social Security Numbers for applicable household members;
- Date of Births for all household members

The pre-application will also require the family provide information on its annual income.

Families may obtain application forms from the WHA's office during normal business hours. Families may also request – by telephone or by mail – that a form be sent to the family via first class mail.

Completed applications must be returned to the WHA by mail, by fax, or submitted in person during normal business hours. Applications must be complete in order to be accepted by the WHA for processing. If an application is incomplete, the WHA will notify the family of the additional information required.

4-I.C. ACCESSIBILITY OF THE APPLICATION PROCESS

Elderly and Disabled Populations [24 CFR 8 and HCV GB, pp. 4-11 – 4-13]

The WHA must take steps to ensure that the application process is accessible to those people who might have difficulty complying with the normal, standard WHA application process. This could include people with disabilities, certain elderly individuals, as well as persons with limited English proficiency (LEP). The WHA must provide reasonable accommodation to the needs of individuals with disabilities. The application-taking facility and the application process must be fully accessible, or the WHA must provide an alternate approach that provides full access to the application process. Chapter 2 provides a full discussion of the WHA's policies related to providing reasonable accommodations for people with disabilities.

Limited English Proficiency

WHAs are required to take reasonable steps to ensure equal access to their programs and activities by persons with limited English proficiency [24 CFR 1]. Chapter 2 provides a full discussion on the WHA's policies related to ensuring access to people with limited English proficiency (LEP).

4-I.D. PLACEMENT ON THE WAITING LIST

The WHA must review each complete application received and make a preliminary assessment of the family's eligibility. The WHA must accept applications from families for whom the list is open unless there is good cause for not accepting the application (such as denial of assistance) for the grounds stated in the regulations [24 CFR 982.206(b)(2)]. Where the family is determined to be ineligible, the WHA must notify the family in writing [24 CFR 982.201(f)]. Where the family is not determined to be ineligible, the family will be placed on a waiting list of applicants.

No applicant has a right or entitlement to be listed on the waiting list, or to any particular position on the waiting list [24 CFR 982.202(c)].

Ineligible for Placement on the Waiting List

If the WHA can determine from the information provided that a family is ineligible, the family will not be placed on the waiting list. Where a family is determined to be ineligible, the WHA will send written notification of the ineligibility determination within 10 business days of receiving a complete application. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal review and explain the process for doing so (see Chapter 16).

Eligible for Placement on the Waiting List

The WHA will send written notification of the preliminary eligibility determination within 10 business days of receiving a complete application.

Placement on the waiting list does not indicate that the family is, in fact, eligible for assistance. A final determination of eligibility will be made when the family is selected from the waiting list.

Applicants will be placed on the waiting list according to any preference(s) for which they qualify, and the date and time their complete application is received by the WHA.

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The WHA must have policies regarding various aspects of organizing and managing the waiting list of applicant families. This includes opening the list to new applicants, closing the list to new applicants, notifying the public of waiting list openings and closings, updating waiting list information, purging the list of families that are no longer interested in or eligible for assistance, as well as conducting outreach to ensure a sufficient number of applicants.

In addition, HUD imposes requirements on how the WHA may structure its waiting list and how families must be treated if they apply for assistance from more than one WHA assisted housing program.

4-II.B. ORGANIZATION OF THE WAITING LIST [24 CFR 982.204 and 205]

The WHA's HCV waiting list must be organized in such a manner to allow the WHA to accurately identify and select families for assistance in the proper order, according to the admissions policies described in this plan.

The waiting list must contain the following information for each applicant listed:

- Applicant name;
- Family unit size;
- Date and time of application;
- Qualification for any local preference;
- Racial or ethnic designation of the head of household.

HUD requires the WHA to maintain a single waiting list for the HCV program.

The WHA will maintain a single waiting list for the HCV program.

HUD directs that a family that applies for assistance from the HCV program must be offered the opportunity to be placed on the waiting list for any public housing, project-based voucher or moderate rehabilitation program the WHA operates if 1) the other programs' waiting lists are open, and 2) the family is qualified for the other programs.

HUD permits, but does not require, the WHA to maintain a single merged waiting list for its public housing, Section 8, and other subsidized housing programs.

A family's decision to apply for, receive, or refuse other housing assistance must not affect the family's placement on the HCV waiting list, or any preferences for which the family may qualify.

The WHA will not merge the HCV waiting list with the waiting list for any other program the WHA operates.

4-II.C. OPENING AND CLOSING THE WAITING LIST [24 CFR 982.206]

Closing the Waiting List

The WHA is permitted to close the waiting list if it has an adequate pool of families to use its available HCV assistance. Alternatively, the WHA may elect to continue to accept applications only from certain categories of families that meet particular preferences or funding criteria.

The WHA will close the waiting list when the estimated waiting period for housing assistance for applicants on the list reaches 12 months for the most current applicants. Where the WHA has particular preferences or funding criteria that require a specific category of family, the WHA may elect to continue to accept applications from these applicants while closing the waiting list to others.

Reopening the Waiting List

If the waiting list has been closed, it cannot be reopened until the WHA publishes a notice in local newspapers of general circulation, minority media, and other suitable media outlets. The notice must comply with HUD fair housing requirements and must specify who may apply, and where and when applications will be received.

The WHA will announce the reopening of the waiting list at least 10 business days prior to the date applications will first be accepted. If the list is only being reopened for certain categories of families, this information will be contained in the notice.

The WHA will give public notice by publishing the relevant information in suitable media outlets including, but not limited to:

The Wilson Times

4-II.D. FAMILY OUTREACH [HCV GB, pp. 4-2 to 4-4]

The WHA must conduct outreach as necessary to ensure that the WHA has a sufficient number of applicants on the waiting list to use the HCV resources it has been allotted.

Because HUD requires the WHA to admit a specified percentage of extremely low-income families to the program (see Chapter 4, Part III), the WHA may need to conduct special outreach to ensure that an adequate number of such families apply for assistance [HCV GB, p. 4-20 to 4-21].

WHA outreach efforts must comply with fair housing requirements. This includes:

- Analyzing the housing market area and the populations currently being served to identify underserved populations
- Ensuring that outreach efforts are targeted to media outlets that reach eligible populations that are underrepresented in the program
- Avoiding outreach efforts that prefer or exclude people who are members of a protected class

WHA outreach efforts must be designed to inform qualified families about the availability of assistance under the program. These efforts may include, as needed, any of the following activities:

- Submitting press releases to local newspapers, including minority newspapers
- Developing informational materials and flyers to distribute to other agencies
- Providing application forms to other public and private agencies that serve the low income population
- Developing partnerships with other organizations that serve similar populations, including agencies that provide services for persons with disabilities

The WHA will monitor the characteristics of the population being served and the characteristics of the population as a whole in the WHA's jurisdiction. Targeted outreach efforts will be undertaken if a comparison suggests that certain populations are being underserved.

4-II.E. REPORTING CHANGES IN FAMILY CIRCUMSTANCES

While the family is on the waiting list, the family must immediately inform the WHA of changes in contact information, including current residence, mailing address, and phone number. The changes must be submitted in writing.

4-II.F. UPDATING THE WAITING LIST [24 CFR 982.204]

HUD requires the WHA to establish policies to use when removing applicant names from the waiting list.

Purging the Waiting List

The decision to withdraw an applicant family that includes a person with disabilities from the waiting list is subject to reasonable accommodation. If the applicant did not respond to a WHA request for information or updates, and the WHA determines that the family did not respond because of the family member's disability, the WHA must reinstate the applicant family to their former position on the waiting list [24 CFR 982.204(c)(2)].

The waiting list will be reviewed annually to determine whether a waiting list purge is necessary in order to ensure that all applicants and applicant information is current and timely.

To update the waiting list, the WHA will send an update request via first class mail to each family on the waiting list to determine whether the family continues to be interested in, and to qualify for, the program. This update request will be sent to the last address that the WHA has on record for the family. The update request will provide a deadline by which the family must respond and will state that failure to respond will result in the applicant's name being removed from the waiting list.

The family's response must be in writing and may be delivered in person, by mail, or by fax. Responses should be postmarked or received by the WHA not later than 30 business days from the date of the WHA letter.

If the family fails to respond within 30 calendar days, the family will be removed from the waiting list without further notice.

If the notice is returned by the post office with no forwarding address, the applicant will be removed from the waiting list without further notice.

If the notice is returned by the post office with a forwarding address, the notice will be re-sent to the address indicated. The family will have 30 calendar days to respond from the date the letter was re-sent.

If a family is removed from the waiting list for failure to respond, the Section 8 Director may reinstate the family if it is determined that the lack of response was due to WHA error, or to circumstances beyond the family's control.

Removal from the Waiting List

If at any time an applicant family is on the waiting list and the WHA determines that the family is not eligible for assistance (see Chapter 3), the family will be removed from the waiting list.

If a family is removed from the waiting list because the WHA has determined the family is not eligible for assistance, a notice will be sent to the family's address of record as well as to any alternate address provided on the initial application. The notice will state the reasons the family was removed from the waiting list and will inform the family how to request an informal review regarding the WHA's decision (see Chapter 16) [24 CFR 982.201(f)].

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by the WHA and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

The WHA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the WHA's selection policies [24 CFR 982.204(b) and 982.207(e)].

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, the WHA may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. The WHA must maintain records showing that such families were admitted with special program funding.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a WHA funding for a specified category of families on the waiting list. The WHA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the WHA may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

The WHA does not currently administer any type of targeted funding.

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

The WHA must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the WHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 960.206]

The WHA is permitted to establish local preferences and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the WHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the WHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

The WHA will use the following local preferences:

First Priority:

- Involuntarily Displaced Persons – Applicants displaced by natural disaster declared by the President of the United States, through no fault of their own by a government action or permanently displaced by fire will be placed at the top of the WHA's waiting list.

Second Priority:

- Veterans – An applicant who has actively served in the US military and has been discharged or released under conditions other than dishonorable will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons.
- Homeless Families with Case Management Support – An applicant who meets one of the following criteria and who will be receiving regular on-site case management support from a local homeless services, social services or mental health agency for at least one year after moving into a voucher-assisted unit will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons. The agency providing the case management services will be required to verify the homeless status of the individual or family and its commitment to continue providing those case management services for at least one year following move in prior to the WHA accepting the application under this preference.
    - Individuals and families who for the last 90 days or more have been living in a place no meant for human habitation, in an emergency shelter, in transitional housing, or is exiting an institution where they temporarily resided (up to 90 days) if they were in a shelter or place not meant for human habitation before entering the institution.
    - Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under the definition above.
- Homeless Victims of Domestic Violence: Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the

individual or a family member will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons if that individual or family is residing in a domestic violence shelter or transitional housing program as a result of that domestic violence. The domestic violence shelter or transitional housing program will be asked to verify the status of the individual or family prior to the WHA accepting the application under this preference.

The agencies that the WHA accepts letters of homeless confirmation from are: Hope Station, The Wesley Shelter, The Wilson Department of Social Services, The American Red Cross, Veterans Residential Services, Wilson County Schools, Carolina Family Health Centers' Ryan White Program, Carolina Outreach Community Support Team, Stepping Stones Community Resources or the Wilson County Office of the Division of Rehabilitation Services.

If a family that has qualified for the Homeless Families with Case Management Support or Homeless Victims of Domestic Violence preference is on the waiting list more than four months, they will have to obtain a second letter from that same partner agency confirming that they are still homeless when they are notified that they have been selected from the list for an application interview. Once they have been notified that they have been selected for an interview, the family will have seven days to obtain this second letter if it is needed.

The family's homeless status is only applicable to getting the preference on the WHA's waiting list. Once the family has been confirmed as being homeless by one of our partner agencies and has been selected for an application interview, WHA staff will not take any further steps to determine whether the family is homeless and will confine their questions during the interview to questions asked of any family who is not homeless.

Third Priority:

- Working family – A family whose head of household, spouse or co-head meets one of the following criteria will be placed at the top of the waiting list behind only Involuntarily Displaced Persons, Veterans and Homeless.
    - Has worked an average of 20 hours a week or more for at least 11 months out of the last 12 months.
    - Has been seasonally employed for no less than 2 years with their current employer and worked an average of 20 hours a week during the season
    - Is self-employed, if verified in accordance with verification policies found in Chapter 7
    - Is 62 years of age or older (an elderly family)
    - Is a person with disabilities as defined by HUD

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the WHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income,

whichever number is higher. To ensure this requirement is met, the WHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

The WHA will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

Order of Selection

The WHA system of preferences may select families based on local preferences according to the date and time of application or by a random selection process (lottery) [24 CFR 982.207(c)]. If the WHA does not have enough funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the WHA's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected on a first-come, first-served basis according to the date and time their complete application is received by the WHA. For the HCV waiting list, the WHA may consider using a lottery in lieu of date and time. Documentation will be maintained by the WHA as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that the WHA does not have to ask higher placed families each time targeted selections are made.

4-III.D. NOTIFICATION OF SELECTION

When a family has been selected from the waiting list, the WHA must notify the family [24 CFR 982.554(a)].

The WHA will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of the following:

- Date, time, and location of the scheduled application interview, including any procedures for rescheduling the interview
- Who is required to attend the interview
- Documents that must be provided at the interview to document the legal identity of household members, including information about what constitutes acceptable documentation
- All documents that must be provided at the interview, including information about what constitutes acceptable documentation

If a notification letter is returned to the WHA with no forwarding address, the family will be removed from the waiting list. A notice of denial (see Chapter 3) will be sent to the family's address of record, as well as to any known alternate address.

4-III.E. THE APPLICATION INTERVIEW

HUD recommends that the WHA obtain the information and documentation needed to make an eligibility determination though a face-to-face interview with a WHA representative [HCV GB, pg. 4-16]. Being invited to attend an interview does not constitute admission to the program.

Assistance cannot be provided to the family until all SSN documentation requirements are met. However, if the WHA determines that an applicant family is otherwise eligible to participate in the program, the family may retain its place on the waiting list for a period of time determined by the WHA [Notice PIH 2012-10].

Reasonable accommodation must be made for persons with disabilities who are unable to attend an interview due to their disability.

Families selected from the waiting list are required to participate in an eligibility interview.

All adult family members will be required to attend the interview together. However, exceptions may be made on a case by case basis if the family so requests and can demonstrate the requirement will cause a hardship to the family (missing work, etc). Verification of information pertaining to adult members of the household not present at the interview will not begin until signed release forms are returned to the WHA.

The interview will be conducted only if the head of household or spouse/cohead provides appropriate documentation of legal identity. (Chapter 7 provides a discussion of proper documentation of legal identity). If the family representative does not provide the required documentation, the appointment may be rescheduled when the proper documents have been obtained.

Pending disclosure and documentation of social security numbers, the WHA will allow the family to retain its place on the waiting list for 30 calendar days. If not all household members have disclosed their SSNs at the next time the WHA is issuing vouchers, the WHA will issue a voucher to the next eligible applicant family on the waiting list.

The family must provide the information necessary to establish the family's eligibility and determine the appropriate level of assistance, as well as completing required forms, providing required signatures, and submitting required documentation. If any materials are missing, the WHA will provide the family with a written list of items that must be submitted.

Any required documents or information that the family is unable to provide at the interview must be provided within 10 business days of the interview (Chapter 7 provides details about longer submission deadlines for particular items, including documentation of eligible noncitizen status). If the family is unable to obtain the information or materials within the required time frame, the family may request an extension. If the required documents and information are not provided within the required time frame (plus any extensions), the family will be sent a notice of denial (See Chapter 3).

An advocate, interpreter, or other assistant may assist the family with the application and the interview process.

Interviews will be conducted in English. For limited English proficient (LEP) applicants, the WHA will provide translation services in accordance with the WHA's LEP policies.

If the family is unable to attend a scheduled interview, the family should contact the WHA in advance of the interview to schedule a new appointment. In all circumstances, if a family does not attend a scheduled interview, the WHA will send another notification letter with a new interview appointment time. Applicants who fail to attend two scheduled interviews without WHA approval will be denied assistance based on the family's failure to supply information needed to determine eligibility. A notice of denial will be issued in accordance with policies contained in Chapter 3.

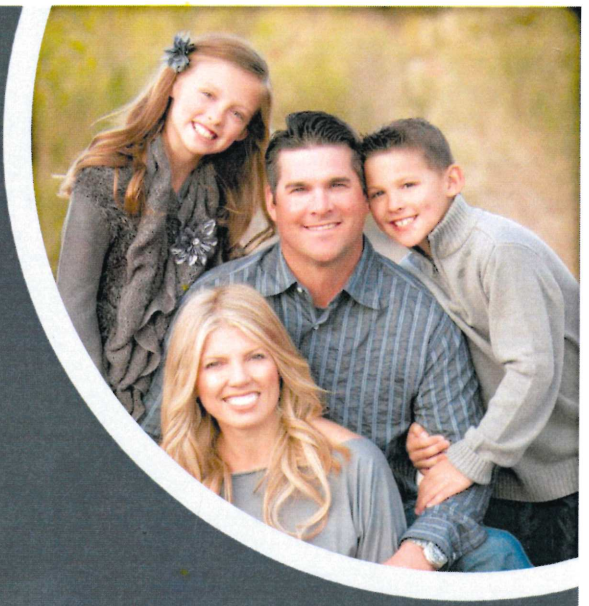
4-III.F. COMPLETING THE APPLICATION PROCESS

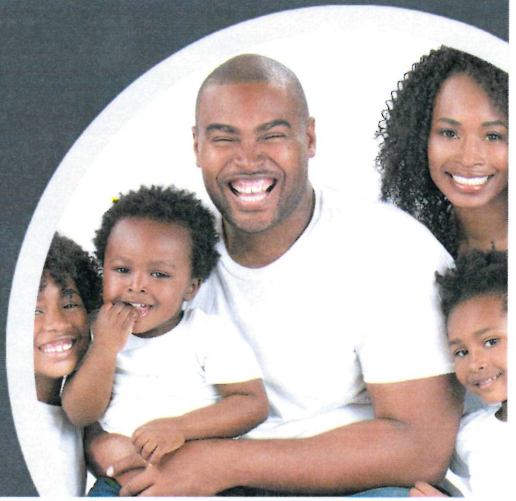
The WHA must verify all information provided by the family (see Chapter 7). Based on verified information, the WHA must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference that affected the order in which the family was selected from the waiting list.

If the WHA determines that the family is ineligible, the WHA will send written notification of the ineligibility determination within 10 business days of the determination. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal review (Chapter 16).

If a family fails to qualify for any criteria that affected the order in which it was selected from the waiting list (e.g. targeted funding, extremely low-income), the family will be returned to its original position on the waiting list. The WHA will notify the family in writing that it has been returned to the waiting list, and will specify the reasons for it.

If the WHA determines that the family is eligible to receive assistance, the WHA will invite the family to attend a briefing in accordance with the policies in Chapter 5.





Housing Choice Voucher Administrative Plan 2021

Housing Authority of the City of Greenville

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

When a family wishes to receive assistance under the HCV program, the family must submit an application that provides the HACG with the information needed to determine the family's eligibility. HUD requires the HACG to place all families that apply for assistance on a waiting list. When HCV assistance becomes available, the HACG must select families from the waiting list in accordance with HUD requirements and HACG policies as stated in the administrative plan and the annual plan.

The HACG is required to adopt clear policies and procedures for accepting applications, placing families on the waiting list, and selecting families from the waiting list, and must follow these policies and procedures consistently. The actual order in which families are selected from the waiting list can be affected if a family has certain characteristics designated by HUD or the HACG that justify their selection. Examples of this are the selection of families for income targeting and the selection of families that qualify for targeted funding.

HUD regulations require that all families have an equal opportunity to apply for and receive housing assistance, and that the HACG affirmatively further fair housing goals in the administration of the program [24 CFR 982.53, HCV GB p. 4-1]. Adherence to the selection policies described in this chapter ensures that the HACG will be in compliance with all relevant fair housing requirements, as described in Chapter 2.

This chapter describes HUD and HACG policies for taking applications, managing the waiting list and selecting families for HCV assistance. The policies outlined in this chapter are organized into three sections, as follows:

Part I: The Application Process. This part provides an overview of the application process, and discusses how applicants can obtain and submit applications. It also specifies how the HACG will handle the applications it receives.

Part II: Managing the Waiting List. This part presents the policies that govern how the HACG 's waiting list is structured, when it is opened and closed, and how the public is notified of the opportunity to apply for assistance. It also discusses the process the HACG will use to keep the waiting list current.

Part III: Selection for HCV Assistance. This part describes the policies that guide the HACG in selecting families for HCV assistance as such assistance becomes available. It also specifies how in-person interviews will be used to ensure that the HACG has the information needed to make a final eligibility determination.

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

This part describes the HACG policies for making applications available, accepting applications making preliminary determinations of eligibility, and the placement of applicants on the waiting list. This part also describes the HACG 's obligation to ensure the accessibility of the application process to elderly persons, people with disabilities, and people with limited English proficiency (LEP).

4-I.B. APPLYING FOR ASSISTANCE [HCV GB, pp. 4-11 – 4-16, Notice PIH 2009-36]

Any family that wishes to receive HCV assistance must apply for admission to the program. HUD permits the HACG to determine the format and content of HCV applications, as well how such applications will be made available to interested families and how applications will be accepted by the HACG. The HACG must include Form HUD-92006, Supplement to Application for Federally Assisted Housing, as part of the HACG 's application.

HACG Policy

Depending upon the length of time that applicants may need to wait to receive assistance, the HACG may use a one- or two-step application process.

A one-step process will be used when it is expected that a family will be selected from the waiting list within 60 days of the date of application. At application, the family must provide all of the information necessary to establish family eligibility and level of assistance.

A two-step process will be used when it is expected that a family will not be selected from the waiting list for at least 60 days from the date of application. Under the two-step application process, the HACG initially will require families to provide only the information needed to make an initial assessment of the family's eligibility, and to determine the family's placement on the waiting list. The family will be required to provide all of the information necessary to establish family eligibility and level of assistance when the family is selected from the waiting list.

Families may obtain application forms from the HACG 's office during normal business hours. Families may also request – by telephone or by mail – that an application be mailed to them via first class mail.

Completed applications must be returned to the HACG by mail, electronically, by fax, or submitted in person during normal business hours. Applications must be complete in order to be accepted by the HACG for processing. If an application is incomplete, the HACG will notify the family of the additional information required.

4-I.C. ACCESSIBILITY OF THE APPLICATION PROCESS

Elderly and Disabled Populations [24 CFR 8 and HCV GB, pp. 4-11 – 4-13]

The HACG must take steps to ensure that the application process is accessible to those people who might have difficulty complying with the normal, standard HACG application process. This could include people with disabilities, certain elderly individuals, as well as persons with limited English proficiency (LEP). The HACG must provide reasonable accommodation to the needs of individuals with disabilities. The application-taking facility and the application process must be fully accessible, or the HACG must provide an alternate approach that provides full access to the application process. Chapter 2 provides a full discussion of the HACG 's policies related to providing reasonable accommodations for people with disabilities.

Limited English Proficiency

HACG s are required to take reasonable steps to ensure equal access to their programs and activities by persons with limited English proficiency [24 CFR 1]. Chapter 2 provides a full discussion on the HACG's policies related to ensuring access to people with limited English proficiency (LEP).

4-I.D. PLACEMENT ON THE WAITING LIST

The HACG must review each complete application received and make a preliminary assessment of the family's eligibility. The HACG must accept applications from families for whom the list is open unless there is good cause for not accepting the application (such as denial of assistance) for the grounds stated in the regulations [24 CFR 982.206(b)(2)]. Where the family is determined to be ineligible, the HACG must notify the family in writing [24 CFR 982.201(f)]. Where the family is not determined to be ineligible, the family will be placed on a waiting list of applicants.

No applicant has a right or entitlement to be listed on the waiting list, or to any particular position on the waiting list [24 CFR 982.202(c)].

Ineligible for Placement on the Waiting List

HACG Policy

If the HACG can determine from the information provided that a family is ineligible, the family will not be placed on the waiting list. Where a family is determined to be ineligible, the HACG will send written notification of the ineligibility determination within 10 business days of receiving a complete application. The notice will specify the reasons for ineligibility and will inform the family of its right to request an informal review and explain the process for doing so (see Chapter 16).

Eligible for Placement on the Waiting List

HACG Policy

The HACG will send written notification of the preliminary eligibility determination within 10 business days of receiving a complete application.

Placement on the waiting list does not indicate that the family is, in fact, eligible for assistance. A final determination of eligibility will be made when the family is selected from the waiting list.

Applicants will be placed on the waiting list according to any preference(s) for which they qualify, and the date and time their complete application is received by the HACG.

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The HACG must have policies regarding various aspects of organizing and managing the waiting list of applicant families. This includes opening the list to new applicants, closing the list to new applicants, notifying the public of waiting list openings and closings, updating waiting list information, purging the list of families that are no longer interested in or eligible for assistance, as well as conducting outreach to ensure a sufficient number of applicants.

In addition, HUD imposes requirements on how a HACG may structure its waiting list and how families must be treated if they apply for assistance from a HACG that administers more than one assisted housing program.

4-II.B. ORGANIZATION OF THE WAITING LIST [24 CFR 982.204 and 205]

The HACG 's HCV waiting list must be organized in such a manner to allow the HACG to accurately identify and select families for assistance in the proper order, according to the admissions policies described in this plan.

The waiting list must contain the following information for each applicant listed:

- Applicant name;
- Family unit size;
- Date and time of application;
- Qualification for any local preference;
- Racial or ethnic designation of the head of household.

HUD requires the HACG to maintain a single waiting list for the HCV program unless it serves more than one county or municipality. Such HACG s are permitted, but not required, to maintain a separate waiting list for each county or municipality served.

HACG Policy

The HACG will maintain a single waiting list for the HCV program.

HUD directs that a family that applies for assistance from the HCV program must be offered the opportunity to be placed on the waiting list for any public housing, project-based voucher or moderate rehabilitation program the HACG operates if 1) the other programs' waiting lists are open, and 2) the family is qualified for the other programs.

HUD permits, but does not require, that HACG s maintain a single merged waiting list for their public housing, Section 8, and other subsidized housing programs.

A family's decision to apply for, receive, or refuse other housing assistance must not affect the family's placement on the HCV waiting list, or any preferences for which the family may qualify.

HACG Policy

The HACG will not merge the HCV waiting list with the waiting list for any other program the HACG operates.

4-II.C. OPENING AND CLOSING THE WAITING LIST [24 CFR 982.206]

Closing the Waiting List

A HACG is permitted to close the waiting list if it has an adequate pool of families to use its available HCV assistance. Alternatively, the HACG may elect to continue to accept applications only from certain categories of families that meet particular preferences or funding criteria.

HACG Policy

The HACG will close the waiting list when the estimated waiting period for housing assistance for applicants on the list reaches 24 months for the most current applicants. Where the HACG has particular preferences or funding criteria that require a specific category of family, the HACG may elect to continue to accept applications from these applicants while closing the waiting list to others.

Reopening the Waiting List

If the waiting list has been closed, it cannot be reopened until the HACG publishes a notice in local newspapers of general circulation, minority media, and other suitable media outlets. The notice must comply with HUD fair housing requirements and must specify who may apply, and where and when applications will be received.

HACG Policy

The HACG will announce the reopening of the waiting list at least 10 business days prior to the date applications will first be accepted. If the list is only being reopened for certain categories of families, this information will be contained in the notice.

The HACG will give public notice by publishing the relevant information in suitable media outlets including, but not limited to:

Daily Reflector

4-II.D. FAMILY OUTREACH [HCV GB, pp. 4-2 to 4-4]

The HACG must conduct outreach as necessary to ensure that the HACG has a sufficient number of applicants on the waiting list to use the HCV resources it has been allotted.

Because HUD requires the HACG to admit a specified percentage of extremely low-income families to the program (see Chapter 4, Part III), the HACG may need to conduct special outreach to ensure that an adequate number of such families apply for assistance [HCV GB, p. 4-20 to 4-21].

HACG outreach efforts must comply with fair housing requirements. This includes:

- Analyzing the housing market area and the populations currently being served to identify underserved populations.
- Ensuring that outreach efforts are targeted to media outlets that reach eligible populations that are underrepresented in the program.
- Avoiding outreach efforts that prefer or exclude people who are members of a protected class

HACG outreach efforts must be designed to inform qualified families about the availability of assistance under the program. These efforts may include, as needed, any of the following activities:

- Submitting press releases to local newspapers, including minority newspapers
- Developing informational materials and flyers to distribute to other agencies.
- Providing application forms to other public and private agencies that serve the low-income population.
- Developing partnerships with other organizations that serve similar populations, including agencies that provide services for persons with disabilities.

HACG Policy

The HACG will monitor the characteristics of the population being served and the characteristics of the population as a whole in the HACG ’s jurisdiction. Targeted outreach efforts will be undertaken if a comparison suggests that certain populations are being underserved.

4-II.E. REPORTING CHANGES IN FAMILY CIRCUMSTANCES

HACG Policy

While the family is on the waiting list, the family must immediately inform the HACG of changes in contact information, including current residence, mailing address, and phone number. The changes must be submitted in writing.

4-II.F. UPDATING THE WAITING LIST [24 CFR 982.204]

HUD requires the HACG to establish policies to use when removing applicant names from the waiting list.

Purging the Waiting List

The decision to withdraw an applicant family that includes a person with disabilities from the waiting list is subject to reasonable accommodation. If the applicant did not respond to a HACG request for information or updates, and the HACG determines that the family did not respond because of the family member's disability, the HACG must reinstate the applicant family to their former position on the waiting list [24 CFR 982.204(c)(2)].

HACG Policy

The waiting list will be updated as needed to ensure that all applicants and applicant information is current and timely.

To update the waiting list, the HACG will send an update request via first class mail to each family on the waiting list to determine whether the family continues to be interested in, and to qualify for, the program. This update request will be sent to the last address that the HACG has on record for the family. The update request will provide a deadline by which the family must respond and will state that failure to respond will result in the applicant's name being removed from the waiting list.

The family's response must be in writing and may be delivered in person, by mail, by email, or by fax. Responses should be postmarked or received by the HACG not later than 15 business days from the date of the HACG letter.

If the family fails to respond within 15 business days, the family will be removed from the waiting list without further notice.

If the notice is returned by the post office with no forwarding address, the applicant will be removed from the waiting list without further notice.

If the notice is returned by the post office with a forwarding address, the notice will be re-sent to the address indicated. The family will have 15 business days to respond from the date the letter was re-sent.

If a family is removed from the waiting list for failure to respond, the HACG may reinstate the family if it is determined that the lack of response was due to HACG error, or to circumstances beyond the family's control.

Removal from the Waiting List

HACG Policy

If at any time an applicant family is on the waiting list, the HACG determines that the family is not eligible for assistance (see Chapter 3), the family will be removed from the waiting list.

If a family is removed from the waiting list because the HACG has determined the family is not eligible for assistance, a notice will be sent to the family's address of record as well as to any alternate address provided on the initial application. The notice will state the reasons the family was removed from the waiting list and will inform the family how to request an informal review regarding the HACG 's decision (see Chapter 16) [24 CFR 982.201(f)].

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by the HACG and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

The HACG must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the HACG 's selection policies [24 CFR 982.204(b) and 982.207(e)].

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, the HACG may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. The HACG must maintain records showing that such families were admitted with special program funding.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a HACG funding for a specified category of families on the waiting list. The HACG must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the HACG may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

HACG Policy

The HACG administers the following types of targeted funding:

VASH, Mainstream Voucher, Foster Youth to Independence Initiative, HOPWA, [Insert list of all types of targeted funding here]

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

HACG s must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the HACG will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

HACG s are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the HACG to establish other local preferences, at its discretion. Any local preferences established must be consistent with the HACG plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

HACG Policy

HACG will use the following preferences to select families from the tenant-based voucher program waiting list:

- Displacement preference: Applicants who have been displaced by government action, presidentially declared disaster or HCV Program funding
- Residency preference (Applicants who live or work in the City of Greenville at the time of the application interview and/or applicants that lived or worked in the City of Greenville at the time of submitting their initial application and can verify their previous residency/employment at the applicant interview, qualify for this preference).
- Veterans and active members of the military preference.
- Emergency Housing Vouchers preference (Applicant families currently receiving Emergency Housing Voucher Program (EHV) from HACG and where EHV program funding has expired, qualify for this preference (New admission for EHV conversions is to limit 15 new admission families per calendar year).
- Family Unification Program (FUP) conversion preference. HACG may expand the Family Unification Program (FUP) by converting certain families who were assisted by a targeted FUP voucher, to the Housing Choice Voucher (HCV) program. The families selected for this conversion must have successfully reunified, maintained housing independent of services and demonstrated stability in their assisted tenancy for a consecutive 3-year period. Emancipated foster youths admitted to the FUP program will also be evaluated at the end of their 18-month term and upon demonstrated stability in their FUP tenancy, may also be offered the opportunity for continued assistance under the Housing Choice Voucher program. The conversion of FUP assisted families to the Housing Choice Voucher program is limited to 15 families per calendar year.
- Shelter-Plus Care (Continue of Care) conversion preference. HACG may expand its Shelter-Plus Care program by converting certain families who are assisted by the Shelter-Plus Care program, operated in partnership with the County of Pitt (Region 12 CoC). An HACG administered Shelter-Plus Care family who has maintained housing independent of services and who has demonstrated stability in their assisted tenancy for a consecutive 3-year period may be converted to the Housing Choice Voucher (HCV) program. The conversion of Shelter-Plus Care assisted families to the Housing Choice Voucher program is limited to 25 families per calendar year.

- Working Families: this preference applies to applicants where (a) The head, spouse, co-head or sole member is employed fulltime at least 30 hours per week; The head, spouse, co-head or sole member is a person aged 62 or older or is a person with disabilities (c) The head, spouse, co-head or sole member is a person with disabilities.
- Section 8 Homeownership Program preference. Applicant families who meet all Family Eligibility criteria for participation in the Section 8 Homeownership program (Section 15-VII.B.), and who are a participant in good standing in any HACG administered program, qualify for this preference. (New admission to the Section 8 Homeownership program for families who are participants from other HACG programs (see Section 15-VII.C.) is limited 15 new admission families per calendar year). The families will be selected based on the order (date and time) in which their completed application is received by HACG under all available positions are filled.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the HACG 's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, a HACG may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

HACG Policy

The HACG will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

Order of Selection

The HACG system of preferences may select families based on local preferences according to the date and time of application or by a random selection process (lottery) [24 CFR 982.207(c)]. If a HACG does not have enough funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

HACG Policy

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the HACG 's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected on a first-come, first-served basis according to the date and time their complete application is received by the HACG . Documentation will be maintained by the HACG as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that the HACG does not have to ask higher placed families each time targeted selections are made.

4-III.D. NOTIFICATION OF SELECTION

When a family has been selected from the waiting list, the HACG must notify the family [24 CFR 982.554(a)].

HACG Policy

The HACG will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of the following:

Date, time, and location of the scheduled application interview, including any procedures for rescheduling the interview

Who is required to attend the interview

All documents that must be provided at the interview, including information about what constitutes acceptable documentation

If a notification letter is returned to the HACG with no forwarding address, the family will be removed from the waiting list. A notice of denial (see Chapter 3) will be sent to the family's address of record, as well as to any known alternate address.

4-III.E. THE APPLICATION INTERVIEW

HUD recommends that the HACG obtain the information and documentation needed to make an eligibility determination though a face-to-face interview with a HACG representative [HCV GB, pg. 4-16]. Being invited to attend an interview does not constitute admission to the program.

Assistance cannot be provided to the family until all SSN documentation requirements are met. However, if the HACG determines that an applicant family is otherwise eligible to participate in the program, the family may retain its place on the waiting list for a period of time determined by the HACG [Notice PIH 2018-24].

Reasonable accommodation must be made for persons with disabilities who are unable to attend an interview due to their disability.

HACG Policy

Families selected from the waiting list are required to participate in an eligibility interview.

The head of household and the spouse/cohead will be strongly encouraged to attend the interview together. However, either the head of household or the spouse/cohead may attend the interview on behalf of the family. Verification of information pertaining to adult members of the household not present at the interview will not begin until signed release forms are returned to the HACG .

The head of household or spouse/cohead must provide acceptable documentation of legal identity. (Chapter 7 provides a discussion of proper documentation of legal identity.) If the family representative does not provide the required documentation at the time of the interview, he or she will be required to provide it within 10 business days.

Pending disclosure and documentation of social security numbers, the HACG will allow the family to retain its place on the waiting list for ***[insert amount of time reasonable for HACG]***. If not all household members have disclosed their SSNs at the next time the HACG is issuing vouchers, the HACG will issue a voucher to the next eligible applicant family on the waiting list.

The family must provide the information necessary to establish the family's eligibility and determine the appropriate level of assistance, and must complete required forms, provide required signatures, and submit required documentation. If any materials are missing, the HACG will provide the family with a written list of items that must be submitted.

Any required documents or information that the family is unable to provide at the interview must be provided within 10 business days of the interview (Chapter 7 provides details about longer submission deadlines for particular items, including documentation of eligible noncitizen status). If the family is unable to obtain the information or materials within the required time frame, the family may request an extension. If the required documents and information are not provided within the required time frame (plus any extensions), the family will be sent a notice of denial (See Chapter 3).

An advocate, interpreter, or other assistant may assist the family with the application and the interview process.

Interviews will be conducted in English. For limited English proficient (LEP) applicants, the HACG will provide translation services in accordance with the HACG 's LEP plan.

If the family is unable to attend a scheduled interview, the family should contact the HACG in advance of the interview to schedule a new appointment. In all circumstances, if a family does not attend a scheduled interview, the HACG will send another notification letter with a new interview appointment time. Applicants who fail to attend two scheduled interviews without HACG approval will be denied assistance based on the family's failure to supply information needed to determine eligibility. A notice of denial will be issued in accordance with policies contained in Chapter 3.

4-III.F. COMPLETING THE APPLICATION PROCESS

The HACG must verify all information provided by the family (see Chapter 7). Based on verified information, the HACG must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference that affected the order in which the family was selected from the waiting list.

HACG Policy

If the HACG determines that the family is ineligible, the HACG will send written notification of the ineligibility determination within 10 business days of the determination. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal review (Chapter 16).

If a family fails to qualify for any criteria that affected the order in which it was selected from the waiting list (e.g. targeted funding, extremely low-income), the family will be returned to its original position on the waiting list. The HACG will notify the family in writing that it has been returned to the waiting list, and will specify the reasons for it.

If the HACG determines that the family is eligible to receive assistance, the HACG will invite the family to attend a briefing in accordance with the policies in Chapter 5.

Project Application Instructions and Required Forms

2021 Materials have now been posted!

CoC New Application Detailed Instructions

Provided by HUD for the 2021 competition.

CoC Renewal Application Detailed Instructions

Provided by HUD for the 2021 competition.

Project Application Instructions: New Projects

Provides detailed instructions for all materials that must be submitted for new projects.

Project Application Instructions: Renewal Projects

Provides detailed instructions for all materials that must be submitted for renewal projects.

Grantee Certification

ALL applicants must complete this form and submit it with their application.

Determination of Certification with State Consolidated Plan (currently waiting for updated from from NC Department of Commerce)

ALL applicants must complete this form. It is submitted to the State to determine whether projects are consistent with the goals of the State Consolidated Plan. **Do not mail these forms to the address at the bottom of the form. All forms will be mailed to NCCEH and then submitted together as one packet by NCCEH staff.** Applicants must **mail the hard copy** of the form to the address below by October 1, 2021:

NCCEH, PO Box 27692, Raleigh, NC 27611

Determination of Certification for Non-PHA

Determination of Certification for PHA

ONLY Applicants from communities with a Local Consolidated Plan

- Any applicant whose agency is located in a jurisdiction that has a local Consolidated Plan must submit a Consolidated Plan Certification (HUD-2991) signed by a representative of the local plan. This certification states that the project's goals and activities are consistent with the goals of the local Consolidated Plan.
- HUD's listing of local Consolidated Plans in North Carolina can be viewed on their website.
- Applicants who are **not** located in an area with a local Con Plan **do not** need to submit this form.

New PSH Applicant Policies and Procedures Page Reference Form

Applicants requesting new PSH grants must complete this form and submit it with their application.

Renewal PSH Applicant Form

Applicants requesting renewal PSH grants must complete this form and submit it with their application.

New RRH Applicant Policies and Procedures Page Reference Form

Applicants requesting new RRH grants must complete this form and submit it with their application.

New PSH Applicant Policies and Procedures Page Reference Form

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New RRH Applicant Policies and Procedures Page Reference Form

Applicants requesting new RRH grants must complete this form and submit it with their application.

Renewal RRH Applicant Form

Applicants requesting new RRH grants must complete this form and submit it with their application.

New Project Thresholds Form

Applicants requesting new projects must submit this form regarding threshold requirements on the scorecard.

Match Letter Template

All CoC applicants must provide a letter or MOU documenting at least 25% of the applied-for amount. We encourage applicants to use the template linked above to ensure that all information required by HUD has been provided.

Explainers and GIW

Scorecard Committee Materials

Previous CoC Applications

Category: practice Subcategory: balance of state coc

Print

Tag(s): practice

Created on August 18th, 2021 12:45 PM by: denise

Last updated September 01st, 2021 12:07 PM by: balexander

Public Active Options

NCCEH

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Raleigh, NC 27611

Main Phone: 919.755.4393

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JOIN OUR NEWS UPDATE

Site by: Tendenci - The Open Source AMS | a Schipul Factory Production

[BoS] 2021 CoC New and Renewal Scorecards have been posted!

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Mon, Jul 26, 9:09 AM

to boslist, bos

Good morning, NC Balance of State CoC Stakeholders!

As you might remember, the Scorecard Committee in preparation for a potential cancelation of the CoC program competition in 2020 decided to go ahead and prepare the new and renewal scorecards a year in advance.

The FY2021 CoC new and renewal scorecards have now been finalized and posted to the website. For agencies that will be applying in this year's CoC competition, these scorecards can help you prepare your project applications and guide your agency as it designs best practice programs.

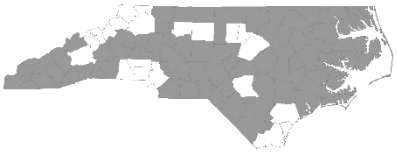
All CoC competition materials are posted at: https://www.ncceh.org/bos/currentcocapplication/.

The Notice of Funding Availability (NOFA) has not yet been released by HUD, but we anticipate a release in the next few weeks. Keep up with all of the latest information on the NCCEH website.

Please reach out to NCCEH staff if you have any questions. Thanks so much!

NC Balance of State CoC Team
North Carolina Coalition to End Homelessness
(919) 755-4393
www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care



North Carolina
Balance of State Continuum of Care

bos@ncceh.org 919.755.4393 www.ncceh.org/BoS

2021 Scorecard for CoC Funds: Renewal Projects

This scorecard will be used by the North Carolina Balance of State Continuum of Care (NC BoS CoC) Project Review Committee to score applications for renewal projects. The CoC prioritizes projects that serve households with severe needs and vulnerabilities, including chronic homelessness.

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

The NC BoS CoC Project Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), and avoid jeopardizing overall agency stability or future funding in the NC BoS CoC.

[References in brackets indicate the materials that will be used to score each question.]

Reviewer:			
Applicant:			
Project Name:			
Project Type (select one)	☐ PH:PSH ☐ PH:RRH		
Reviewer Signature:		Date:	

PROJECT QUALITY REQUIREMENTS		
Renewal projects **must receive at least the standard and minimum score in each section**. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in the final NC BoS CoC application or will receive reduced funding. Thresholds must be met in order for the project to be eligible for funding.	**Maximum Score Possible:**	**PSH: 162** **RRH: 139**
	Project Score:	

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section I Score	
Possible Points: 9 Minimum Points Required or Review is Triggered: 5			
Accuracy and Appropriateness of Responses		**Possible Score**	**Project Score**
1.1	Does the project description address all parts of the detailed instructions? *[Proj. App: 3B, Project Application Detailed Instructions]*	3	
1.2	Do the questions regarding services address all parts of the detailed instructions? *[Proj. App: 4A, Project Application Detailed Instructions]*	3	
1.3	Do the questions regarding outreach address all parts of the detailed instructions? *[Proj. App: 5C, Project Application Detailed Instructions]*	3	
Section II: Program Design		**Section II Score**	
Possible Points: PSH: 35 RRH: 20 Minimum Points Required or Review is Triggered: PSH: 10 RRH: 8			
Housing First			
2.1a	Does this project use a Housing First approach? *Must meet all statements below to meet standard. Program should not have any policies that would result in*	Standard (must meet all statements below) ☐ met (2 of 2 met) ☐ unmet (1 or more missed)	

	screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures; sample lease]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1b	Does the project ensure that participants are not screened out based on the following: ☐ Having too little or no income ☐ Active or history of substance abuse ☐ Having a criminal record (with exceptions for state mandated restrictions) ☐ History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	☐ met ☐ unmet ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1c	Does the project ensure that participants are not terminated from the program for the following reasons: ☐ Failure to participate in supportive services ☐ Failure to make progress on a service plan ☐ Loss of income or failure to improve income ☐ Domestic violence ☐ Any other activity not covered in a lease agreement typically found in the project's geographic area	☐ met ☐ unmet ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Key Elements of Permanent Supportive Housing		
2.2a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. *[Sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

2.2b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2h	Support services promoting recovery are designed to help tenants choose, get, and	Standard

	keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. *[Program policies and procedures]*	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2i	The provision of housing and the provision of support services are distinct. *(Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Rapid Re-Housing Performance Benchmarks and Program Standards		
2.3a	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates [1]?	
	Core Program Standard: Housing Identification	
2.3a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

[1] http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

	descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. *[Program policies and procedures*]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. *[Program policies and procedures]*.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Programs can negotiate additional supports, as needed, on a case-by-case basis. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b	**Core Program Standard: Rent and Move-In Assistance**	
2.3b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. *[Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. *(Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should not have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household). [Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	[Program policies and procedures]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c	**Core Program Standard: Rapid Re-Housing Case Management and Services**	
2.3c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible*. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. *(Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c3	Program has clearly defined relationships with employment and income programs	Standard ☐ met ☐ unmet ☐ N/A

	that it can connect program participants to when appropriate. *[Program policies and procedures]*	☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d	**Core Program Standard: Program Philosophy and Design**	
2.3d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed to "predict" long-term housing stability other than willingness to engage the	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	program and work on a self-directed housing plan. [*Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [*Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Services Resource Leverage Plan		
2.4	CoC programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services for program participants that are funded by another source besides CoC program funds. (Submit MOU/MOA or information on dedicated funding stream such as a contract) • Services provided by other funding sources exceed the required 25% match. (Submit MOU/contract)	
	Program meets both bullets above	10 points
	Program meets one bullet	5 points
	Program meets neither bullet	0 points
	Project Score	
Permanent Supportive Housing: Moving-on Strategy		

2.5	Permanent supportive housing should be available indefinitely, as long as households need it. However, participants in these programs can stabilize to the point that they no longer need the intensive services associated with the program. Moving-on strategies for permanent supportive housing projects create opportunities for participants who no longer need the supportive part of permanent supportive housing to live independently and sustain their homes after graduation for the program. They usually involve transferring the tenant to another long-term housing subsidy, such as a Housing Choice Voucher (Section 8), public housing, or other affordable housing option.[2] Does the permanent supportive housing project incorporate moving-on strategies in its program policies and procedures (Note: this should not be a separate section but all sections of the document should indicate how the program uses a Moving-on approach) ? To receive full points program policies and procedures should include: • Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); • A method to prepare tenants to move-on and exit planning procedures; • A method to link moving-on tenants to mainstream services and supports; • Procedures to provide step-down services after exit; and • A strategy to evaluate the effectiveness of moving-on strategies.	

[2] https://www.usich.gov/resources/uploads/asset_library/PHA_MovingUp.pdf

	[Program policies and procedures]	
	Program meets all bulleted points above	15
	Program meets 4-5 of the above bulleted points	10
	Program meets 1-3 of the above bulleted points	5
Project score:		

2.6 Targeting to Prioritized Subpopulations			
	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including people experiencing chronic homelessness, homeless Veterans, survivors of domestic violence, and youth. Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs? Is the project targeting: ☐ People experiencing chronic homelessness ☐ People who identify as LGBTQ ☐ People with histories of institutionalization, incarceration, or foster care ☐ Veterans ☐ Survivors of domestic violence ☐ Unaccompanied or parenting youth 18-24 *[Program policies and procedures]*		
		Possible score	**Project Score**
	Full points for detailed plan to engage and serve specific needs of identified population(s). Partial points available for less detailed plans.	10	

Section III: Equity	**Section III Score**
Possible Points: 20 Minimum Points Required or Review is Triggered: 11	

3.1	Does the applicant provide guidelines/program rules in other languages besides English? *[Guidelines/Program Rules in another language]*	4	
3.2	Does the applicant have client-facing bilingual staff? *[Org Chart]*	4	
3.3	Does the applicant contract with interpreter services? *[Provide a MOA/MOU or other agreement with interpreter service]*	4	
3.4	Does the applicant have an Anti-discrimination Policy? *[Program policies and procedures]*	Standard ☐ met ☐ unmet	
3.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? *[Renewal Application Form]*	3	
3.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Please list the date(s) of training(s) and percentage of staff that have attended an external racial equity/anti-discrimination training in the last 12 months). *[Renewal Application Form]*	3	
3.7	Does the applicant have an equal access hiring clause in job postings? *[Example Job Posting]*	1	
3.8	What percentage of your Board of Directors are non-white? *[Racial Equity Chart]*		
	20% or above	1	
	Less than 20%	0	

Staff Scoring

The following section is scored by NCCEH. Staff use standardized scoring methods to ensure fairness.

Section IV: Project Performance		**Section IV Score**	
Possible Points Added: PSH: 88 RRH: 80 Minimum Points Required or Review is Triggered: PSH: 45 RRH: 41			
The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2020 to December 31, 2020, unless otherwise noted.			
Populations Served		**Possible score**	**Project Score**
4.1a	**RRH projects:** What percentage of the **people** served by the project had a disability? *[Q13a2 divided by total enrolled]*		
	Less than 25%	0	
	25%-49%	4	
	Above 50%	8	
4.1b	What percentage of the **adults** served by the project were Veterans? *[CoC-APR Q25a]*		
	Less than 25%	0	
	25%-49%	3	
	Above 50%	6	
4.1c	**PSH Projects:** What percentage of new admissions during the 2020 calendar year were chronically homeless? [0640 Report, Tab1-Detail]		
	100%	11	
	Less than 100%	0	
4.1d	**PSH Projects:** What percentage of households served by the project were chronically homeless? [*CoC-APR Q26a]*		
	Less than 50%	0	
	50-74%	2	
	75-100%	4	
4.1e	**RRH Projects:** What percentage of **households** served by the project were chronically homeless? [*CoC-APR Q26a]*		

	Less than 25%	0	
	25%-49%	2	
	50-74%	4	
	75-100%	8	
4.1f	What is the program's unit utilization rate? *[Average of APR Q8b divided by application unit projections]*		
	Less than 70%	-10	
	70-79%	-5	
	80-94%	0	
	95%-124%	5	
	Above 125%	10	
4.1g	**RRH projects**: what percentage of exits were to a permanent housing destination? *[CoC-APR 23a/b]*		
	No Exits or Less than 70%	0	
	70-80%	5	
	Above 80%	12	
4.1h	What percentage of exits were to a known destination? *[CoC-APR Q23a/b]*		
	95% or higher	5	
	0-94%	0	
4.1i	**PSH projects:** what percentage of exits were to a permanent housing destination? *[CoC-APR 23a/b]*		
	No exits	5	
	Below 80%	0	
	80% or higher	10	
4.1j	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
	<10%	0	
	10-15%	4	
	15-20%	8	
	Above 20%	11	
4.1k			
	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
	<10%	0	
	10-15%	4	
	15-20%	8	

Above 20%	11	

HMIS Participation (Per federal law, domestic violence programs are prohibited from using HMIS and exempted from this section.)		**Possible Score**	**Project Score**
4.2a	HMIS Data Completeness *[0640 – HUD Data Quality Report Framework Report, Q2-Q5]*		
	0-10%	5	
	Above 10%	0	
4.2b	Are all of the agency's projects that are listed in the 2020 HIC participating in HMIS? *[HIC]*		
	Yes	10	
	No	0	
4.2c	Did the program submit their APR on or before the designated deadline? [Sage]		
	Yes	5	
	No	0	
HUD Monitoring			
4.3a	Is the recipient free of HUD monitoring findings for any agency projects? If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application to meet standards. *[Renewal application form]*	Standard ☐ met ☐ unmet	
4.3b	**Previous Project Spending Rates:** These questions are for projects that have been operating for at least one year at the time of the NOFA release. (percentage rounded to the nearest whole number) Percentage 90% or higher (Projects that fall below the standard will trigger review by CoC staff and Project Review Committee. The review will determine potential consequences, including whether some funding should be reallocated to new projects.) *[Scored from APR. If APR is not available, agencies will submit an eLOCCS screenshot of final draw for last completed year. If agencies are spending less than 90% of funding, they must submit a narrative explaining why the agency is underspending their grant.*]	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
	Amount awarded		
	Amount spent		

4.3c	How many grant extensions from HUD were given for a reason other than merging grants in fiscal years 2017, 2018, and 2019? *[Renewal application form]*		
		Possible score	**Project Score**
	0	0	
	1	-5	
	2+	Further review	

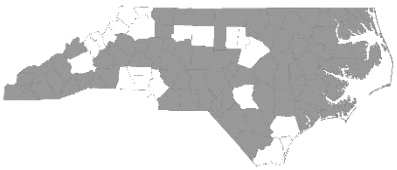
Section V: Coordinated Entry and Prioritization

Possible Points: 10
Minimum score or review triggered: 3

Section V Score

5.1	Does the program have a VI-SPDAT score for at least 97% of new admissions during the 2020 calendar year? *[Renewal Application Form; tab 1, 0640 report]*	Standard ☐ met ☐ unmet ☐ N/A	
5.2	Is the program's average VI-SPDAT score for new admissions in the 2020 calendar year within or above the recommended range for the program type? *[Renewal Application Form]*	Standard ☐ met ☐ unmet ☐ N/A	
5.3	What percentage of new admissions during the 2020 calendar year have a VI-SPDAT in HMIS? [*Renewal Application Form; tab 1, 0640 report*]		
		Possible score	Project score
	100%	10	
	90%-99%	6	
	80-89%	3	
	Below 80%	0	
5.4	**Permanent Supportive Housing:** Has the program adopted HUD's prioritization policy as outlined in HUD Notice CPD-16-011 and added it to their program policies and procedures? [*Program Policies and Procedures*]	Standard ☐ met ☐ unmet ☐ N/A	

Section VI: Application Deadlines and Documentation		Section VI Score	
Possible Deductions: -25 Minimum Points Required or Review is Triggered: Not more than loss of -15			
Budget & Match		Possible score	Project score
6.1a	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	
6.1b	Does the project demonstrate they have 25% match and all match funds are eligible? [*Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections*].	Standard ☐ met ☐ unmet	
		Possible score	Project score
6.1c	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published).	-10	
6.1d	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	
Deadlines			
6.2a	The online application and accompanying documents must be submitted by the deadline. If not, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in final NC BoS CoC application or will receive reduced funding.	Standard ☐ met ☐ unmet	
6.2b	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold ☐ met ☐ unmet	



North Carolina
Balance of State Continuum of Care

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2021 Scorecard for CoC Funds: New Projects

This scorecard will be used by the North Carolina Balance of State Continuum of Care (NC BoS CoC) Project Review Committee to score applications for new projects. The CoC prioritizes projects that serve households with severe needs and vulnerabilities, including chronic homelessness.

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

The NC BoS CoC Project Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), and avoid jeopardizing overall agency stability or future funding for the NC BoS CoC.

[References in brackets indicate the materials that will be used to score each question.]

Reviewer:			
Applicant:			
Project Name:			
Project Type (select one)	☐ PH:PSH ☐ PH:RRH ☐ TH-RRH (DV) ☐ SSO-CE (DV)		
Reviewer Signature:		Date:	

Project Quality Requirements		
New projects **must receive at least the standard and minimum score in each section**. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in final NC BoS CoC application or will receive reduced funding. **Thresholds are a requirement** for new projects. Projects that do not meet thresholds will not be put through the next steps in the application process.	**Maximum Score Possible:**	**PSH: 142 RRH:129 TH-RRH: 129 SSO-CE: 93**
	Project Score:	

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section I Score	
Possible Points: PSH, RRH, TH-RRH: 9 SSO-CE: 3 Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH 5 SSO-CE: 1			
Consistency with Mission			
1.1a	Does the project fit within the mission of the agency? Does the agency currently serve homeless households in their community? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
1.1b	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
Accuracy and Appropriateness of Responses		**Possible Score**	**Project Score**
1.2a	Does the project description address all parts of the detailed instructions? *[Proj. App: 3B, Project Application Detailed Instructions]*	3	
1.2b	**PSH, RRH, TH-RRH only**: Do the questions regarding services address all parts of the detailed instructions? *[Proj. App: 4A, Project Application Detailed Instructions]*	3	
1.2c	**PSH, RRH, TH-RRH only**: Do the questions regarding outreach address all parts of the detailed instructions? *[Proj. App: 5C, Project Application Detailed Instructions]*	3	

Section II: Program Design		Section II Score	
Possible Points: PSH, RRH, TH-RRH: 15 SSO-CE: 30 Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 8 SSO-CE: 16			
Community Need Statement			
2.1	New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe: • What community need the new project will address, including local data (PIT Count, coordinated entry data, waiting lists, etc.) that demonstrates the need • How the community has used other resources to address this need *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1a	**SSO-CE only**: Will the CE process funded in part by this grant cover the CoCs entire geographic area? *[Proj. App. Sec. 3B, Q4A]*	Threshold ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1b	**SSO-CE only**: Does the advertisement strategy ensure the CE process reaches survivors of DV with the highest barriers to access? *[Proj. App. Sec. 3B, Q4C]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1c	**SSO-CE only**: Does the CE project indicate that it will tie into the existing NC BoS CoC CE system in each region? *[Proj. App. Sec. 3B, Q4E]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
2.1d	**SSO-CE only:** The budget maximizes funding for assessment of service needs, case management, and outreach services that increase access for DV survivors (assessment of service needs + CM + outreach / total budgeted amount)? *[Proj. App. Sec. 6]*		
	Less than 50%	0	
	50-84%	5	
	85-100%	15	
2.1e	**SSO-CE only**: Does the project maximize the use of cash match versus in-kind match (cash match total / total match amount)? *[Proj. App. Sec. 6]*		
	Less than 25%	0	
	25-74%	5	
	75-100%	10	

2.1f	**TH-RRH only**: Does the New Project Form describe the TH portion of the project as bridge housing (regular (at least monthly) offers of PH placement, housing-focused services)? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided
2.1g	**TH-RRH only**: Does the program adequately demonstrate that both TH and RRH are available to all participants when needed or desired? *[Proj. App. Sec. 3B, Q1, Proj. App. Sec. 6]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
Targeting to Prioritized Subpopulations		
2.2a	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including people experiencing chronic homelessness, homeless Veterans, survivors of domestic violence, and youth. Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs? Is the project targeting: ☐ People experiencing chronic homelessness ☐ People who identify as LGBTQ ☐ People with histories of institutionalization, incarceration, or foster care ☐ Veterans ☐ Survivors of domestic violence ☐ Unaccompanied or parenting youth 18-24 *[Program policies and procedures]*	**No specific targeting: 0 points** **Targeted program: 5 points**
2.2b	**PSH projects**: Is this a permanent supportive (PSH) project dedicated to serving chronically homeless households per HUD Notice CPD-16-11? *[Policies and procedures]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
2.2c	**PSH projects**: Rental assistance projects are preferred to leasing projects as rental assistance projects adjust to FMR and provide tenants with a lease in their name. Projects that wish to provide leasing must submit a written statement that explains why the project is not applying as a rental assistance project.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	[Written statement for leasing application]	
2.2d	**TH-RRH and RRH projects**: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the NC ESG Office or operating a RRH program with other funding sources that adheres to the RRH program standards. (Exceptions may be made for Public Housing Authorities - PHAs are not eligible to apply for ESG funds but are eligible for CoC funding. Exceptions may also be made for projects applying for the DV-RRH bonus funding).	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
PSH, RRH, TH-RRH Only: Services Resource Leverage Plan		
2.3	CoC programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services for program participants that are funded by another source besides CoC program funds. (Submit MOU/MOA or information on dedicated funding stream such as a contract) • Services provided by other funding sources exceed the required 25% match. (Submit MOU/match letter)	
	Program meets both bullets above	10 points
	Program meets one bullet	5 points
	Program meets neither bullet	0 points
	Project Score	
Housing First		
2.4a	Does this project use a Housing First approach? Must meet all statements below to meet standard. Program should not have any policies and procedures that would result in screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures, sample lease]	Threshold (must meet all statements below) ☐ met (2 of 2 met) ☐ unmet (1 or more missed)

2.4b	Does the project ensure that participants are not screened out based on the following: ☐ Having too little or no income ☐ Active or history of substance abuse ☐ Having a criminal record (with exceptions for state mandated restrictions) ☐ History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	☐ met ☐ unmet ☐ unmet, documentation not provided
2.4c	Does the project ensure that participants are not terminated from the program for the following reasons: ☐ Failure to participate in supportive services ☐ Failure to make progress on a service plan ☐ Loss of income or failure to improve income ☐ Domestic violence ☐ Any other activity not covered in a lease agreement typically found in the project's geographic area	☐ met ☐ unmet ☐ unmet, documentation not provided
PSH Projects Only: Key Elements of Permanent Supportive Housing		
2.5	Does this project include the following key elements of permanent supportive housing as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA)[1]?	
2.5a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. *[Sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

[1] US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration Center for Mental Health Services. (2010) Permanent Supportive Housing: Building Your Program (Evidence- Based Practices KIT). Retrieved from http://store.samhsa.gov/shin/content//SMA10-4510/SMA10-4510-06-BuildingYourProgram-PSH.pdf

2.5c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants	Standard

	establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. *[Program policies and procedures]*	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5i	The provision of housing and the provision of support services are distinct. *(Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing). [Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
For TH-RRH and RRH Programs Only: Rapid Re-Housing Performance Benchmarks and Program Standards		
2.6	Does this project include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates [2]?	
2.6a	**Core Program Standard: Housing Identification**	
2.6a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

[2] http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Program can negotiate additional supports, as needed, on a case-by-case basis. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b	**Core Program Standard: Rent and Move-In Assistance**	
2.6b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. *(Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.)* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c	**Core Program Standard: Rapid Re-Housing Case Management and Services**	
2.6c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible*. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. *(Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A

		☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d	**Core Program Standard: Program Philosophy and Design**	
2.6d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed to "predict" long-term housing stability other than willingness to engage the program and work on a self-directed housing plan. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	Reviewer Notes (if unmet or documentation not provided, note why):		

Section III: Scope of Services — Section III Score

Possible Points: PSH, RRH, TH-RRH: 12 SSO-CE: 6
Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 7
SSO-CE: 4

Service Needs		**Possible Score**	**Project Score**
3.1	Does the applicant demonstrate they will meet the anticipated individual service needs of participant households? Will services ensure households will be able to find and maintain permanent housing? *[PSH, RRH, TH-RRH Proj. App: 4A Question 2; SSO-CE Proj. App: 3B, Q4E]*	6	
Employment Services (PSH, RRH, TH-RRH only)		**Possible Score**	**Project Score**
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? *[Proj. App: 4A Question 3]*	3	
Access to Mainstream Benefits (PSH, RRH, TH-RRH only)		**Possible Score**	**Project Score**
3.3	Does the project include services to help participants access mainstream benefits such as unemployment benefits, TANF, food stamps/SNAP, and Medicaid? *[Proj. App: 4A Question 3]*	3	

Section IV: Equity — Section IV Score

Possible Points: 20
Minimum Points Required or Review is Triggered: 11

4.1	Does the applicant provide guidelines/program rules in other languages besides English? *[Guidelines/Program Rules in another language]*	4	
4.2	Does the applicant have client-facing bilingual staff? *[Org Chart]*	4	
4.3	Does the applicant contract with interpreter services? *[Provide a MOA/MOU or other agreement with interpreter service]*	4	
4.4	Does the applicant have an Anti-discrimination Policy? *[Program policies and procedures]*	Standard ☐ met ☐ unmet	
4.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? *[New Project Form]*	3	
4.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Please list the date(s) of training(s) and percentage of staff that	3	

	have attended an external racial equity/anti-discrimination training in the last 12 months). *[New Project Form]*		
4.7	Does the applicant have an equal access hiring clause in job postings? *[Example Job Posting]*	1	
4.8	What percentage of your Board of Directors are non-white? *[Racial Equity Chart]*		
	20% or above	1	
	Less than 20%	0	

Staff Scoring

The following section is scored by NCCEH. Staff use standardized scoring methods to ensure fairness.

Priority		
Priority	What priority is this project in its region? *[Priority 1, 2, 3, or no priority, based on the 2019 CoC Funding Priorities document]*	☐ 1 ☐ 2 ☐ 3 ☐ no priority
Section V: Organizational Capacity		**Section V Score**
Possible Points: 14 Minimum Points Required or Review is Triggered: 8		
Completed Similar Projects		**Possible Score** / **Project Score**
5.1	Has the agency or subrecipients implemented this same type of project (permanent supportive housing, rapid re-housing)? *[Proj. App: 3B; New Project Form]*	4
5.2	Has the agency or subrecipients successfully implemented a different HUD-funded project (ESG, Section 8, HPRP, etc.) or a CoC-funded project of a different type? *[Proj. App: 3B; New Project Form; interview with agency]*	2
Agency Stability		
5.3	**Non-profits only:** Has the agency been in operation for at least three years? *[Proj. App: 3B; non-profit documentation]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
5.4	**Non-profits only:** Did the applicant submit financial statements and a copy of their budget from the most recent fiscal year? (Financial statements will be used to assess fiscal stability of the applicant agency. Financial statements that	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	demonstrate instability may result in the agency not meeting requirements). *[Budget vs actual profit and loss statement for the last two fiscal years; agency detailed budget]*		
5.5	**Non-profits only:** Does the agency have the financial capacity to operate this project on a reimbursement basis? *[Agency detailed balance sheet]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
5.6	**Non-profits only:** Has the agency submitted a list of their board of directors and a copy of the minutes from their three most recent board meetings? Does the agency have an active and engaged board of directors? *[Board list and minutes]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
Capacity to Provide Needed Services			
5.7	Does the agency have the capacity to provide the services that will be needed? a) Do the services described seem adequate and appropriate and b) is the staffing pattern or subcontract plan adequate and appropriate? Do program staff have sufficient experience and knowledge to effectively run the type of program applied for? *[Proj. App: 3B and 4A; organizational chart]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
5.8	Does the project actively participate in the NC SOAR program? [*NC SOAR program records*]	2	
Administrative Capacity		**Possible Score**	**Project Score**
5.9	Is the administrative staff separate from the services staff? *[Organizational chart: where does the CoC grant get executed and what staff is working on it]*	3	
5.10	Is funding for the administrative staff stable? Is there adequate administrative staff to ensure agency stability throughout program implementation? *[New project form; Budget vs actual profit and loss statement]*	3	
Section VI: Project Performance			**Section VI Score**
Possible Points Added: PSH: 52 RRH and TH-RRH: 39 Possible points subtracted: -15 Minimum Points Required or Review is Triggered: PSH: 27			

RRH and TH-RRH: 20 (if section is scored)			
The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2020 to December 31, 2020, unless otherwise noted. All applicants that currently run an RRH or PSH program, regardless of funding source, will be scored for this section using the CoC-APR report from HMIS. For applicants applying for TH-RRH funding and currently run an RRH program, they will be scored for this section using the CoC-APR report from a comparable database for the RRH program.			
Populations Served		**Possible Score**	**Project Score**
6.1a	**RRH projects:** What percentage of the **people** served by the project had a disability? *[Q13a2 divided by total enrolled]*		
	Less than 25%	0	
	25%-49%	1	
	Above 50%	2	
6.1b	**PSH Projects:** What percentage of **adults** served by the project were chronically homeless? [*CoC-APR Q26]*		
	Less than 50%	0	
	50-74%	2	
	75-100%	4	
6.1c	What is the program's unit utilization rate? *[Average of APR Q8b divided by application unit projections]*		
	Less than 70%	-5	
	70-80%	-3	
	80-95%	0	
	95%-124%	5	
	Above 125%	N/A	
6.1d	Did 100% of program participants enter the program from an eligible situation? *[CoC APR Q15 - if participants found ineligible, staff will follow up with grantee to determine eligibility]*		
	No	-5	
	Yes	0	
6.1e	**RRH projects**: what percentage of exits were to a permanent housing destination? *[CoC-APR 23a/b]*		
	Less than 70%	0	
	70-80%	5	
	Above 80%	15	
6.1f	What percentage of exits were to a known destination? [CoC-APR 23a/b		
	0-94%	0	
	95%	1	
6.1g	**PSH projects:** what percentage of exits were to a permanent housing destination? *[CoC-APR 23c.]*		
	No exits	2	

	Below 80%	0	
	80% or higher	5	
6.1h	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
	<10%	0	
	10-15%	4	
	15-20%	8	
	Above 20%	11	
6.1i	**PSH Projects:** What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
	<10%	0	
	10-15%	4	
	15-20%	8	
	Above 20%	11	
6.1j	**PSH projects**: What percentage of program participants remained in the program for 6 months or longer? *[CoC-APR 22a]*		
	At least 80%	3	
	At least 94%	5	
6.1k	**PSH Projects:** What percentage of total program participants enrolled in the program during the calendar year exited to a permanent destination? *[CoC-APR 23a/b divided by CoC-APR 5a]*		
	<10%	0	
	10-15%	1	
	15-20%	3	
	20-30%	5	
HMIS/Comparable Database Participation		**Possible Score**	**Project Score**
6.2	Are all of the agency's projects that are listed in the 2020 HIC participating in HMIS or comparable database? *[HIC]*		
	Yes	5	
	No	0	
HUD Monitoring			
6.3a	Is the recipient free of HUD monitoring findings for any agency projects? If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application to meet standards. *[New project form]*	Standard ☐ met ☐ unmet	
6.3b	**Previous Project Spending Rates** These questions are for projects that have been operating for at least one year at the time of the NOFA release (percentage rounded to the nearest whole number). *[Scored on APR. If APR is not available, agencies will submit an eLOCCS screenshot of final draw for last completed year. If agencies are spending less than 90% of funding, they must submit a narrative explaining why the agency is underspending their grant*].		
	Amount awarded		
	Amount spent		
	Percentage 90+%	Standard	

		☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
6.3c	How many grant extensions from HUD were given for a reason other than merging grants in fiscal years 2017, 2018, and 2019? (Note: only applicable for current CoC grantees) *[New project form]*	
	0	0
	1	-5
	2+	Further review

Section VII: Agency's Relationship to Community		Section VII Score
Possible Points: 20 Minimum Points Required or Review is Triggered: 6		
Participation in Regional Committee Activities The following participation questions will be scored based on project participation in all Regional Committees within the grant coverage area.		
6.1	Did the applicant participate in 75% of meetings in at least one Regional Committee or for statewide projects attend 75% of Steering Committee meetings from July 2020 – June 2021? *[Regional Lead verification, Steering Committee minutes]*	Standard ☐ met ☐ unmet
6.2	Application has been presented to Regional Committee or Steering Committee (for statewide projects) for consideration by the NC BoS CoC Project Review Committee *[Minutes, Regional Lead verification]*	Threshold ☐ met ☐ unmet ☐ unmet, documentation not provided
6.3	Currently or within past year, serves/served in one of the regional leadership roles or Steering Committee leadership.	10
6.4	Applicant agrees to actively participate in the local coordinated entry process as designed by the Regional Committee and only take referrals directly from the regional coordinated entry prioritization by name list. *[New Project Form]*	Threshold ☐ met ☐ unmet ☐ unmet, documentation not provided
6.5	Applicant accurately describes the process to take referrals through coordinated entry. *[New Project Form]*	Standard ☐ met ☐ unmet ☐ N/A
6.6	Do all of applicant's projects on the 2020 HIC participate in the coordinated entry system? Agency staff must attend any coordinated entry meetings, including regular case conferencing. Emergency shelters must conduct prevention and diversion screens and VI-SPDATs on residents and refer all people who have received VI-SPDATs to the regional coordinated entry prioritization by name list. RRH, PSH, and TH-RRH projects must only take referrals directly from the coordinated entry prioritization waiting list. *[Interview with region's Coordinated Entry Lead and applicant]*	Standard ☐ met ☐ unmet ☐ N/A
Current PSH, RRH Grantees: VI-SPDAT		

6.7	Does the program have a VI-SPDAT score for every new admission during the 2020 calendar year? *[New project form]*	
	Yes	5
	No/N/A	0
6.8	Does the program have VI-SPDATs for all new admissions during the 2020 calendar year in HMIS?	
	Yes	5
	No/N/A	0

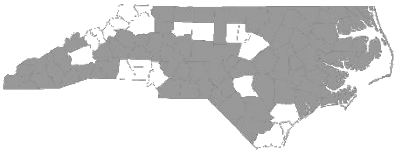
Section VII: Application Deadlines and Documentation

Section VIII Score

Possible Deductions: -25
Minimum Points Required or Review is Triggered: Not more than loss of -15

Budget & Match		**Possible Score**	**Project Score**
7.1	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	
7.2	Do match letters sufficiently document the required match amount for the project type? [*Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections*].	Standard ☐ met ☐ unmet	

Deadlines		**Possible Score**	**Project Score**
7.3	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published).	-10	
7.4	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	
7.5	The online application and accompanying documents were submitted by the deadline.	Threshold ☐ met ☐ unmet	
7.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold ☐ met ☐ unmet	



North Carolina
Balance of State Continuum of Care

bos@ncceh.org 919.755.4393 www.ncceh.org/BoS

2021 Scorecard for CoC Funds: Renewal Projects

This scorecard will be used by the North Carolina Balance of State Continuum of Care (NC BoS CoC) Project Review Committee to score applications for renewal projects. The CoC prioritizes projects that serve households with severe needs and vulnerabilities, including chronic homelessness.

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

The NC BoS CoC Project Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), and avoid jeopardizing overall agency stability or future funding in the NC BoS CoC.

[References in brackets indicate the materials that will be used to score each question.]

Reviewer:			
Applicant:	Vaya Health		
Project Name:	Vaya Health PSH Central Combo		
Project Type (select one)	PSH		
Reviewer Signature:		Date:	

PROJECT QUALITY REQUIREMENTS		
Renewal projects **must receive at least the standard and minimum score in each section**. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in the final NC BoS CoC application or will receive reduced funding. Thresholds must be met in order for the project to be eligible for funding.	**Maximum Score Possible:**	**PSH: 142** **RRH: 119**
	Project Score:	134

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section I Score	
Possible Points: 9 Minimum Points Required or Review is Triggered: 5		7.5	
Accuracy and Appropriateness of Responses		**Possible Score**	**Project Score**
1.1	Does the project description address all parts of the detailed instructions? *[Proj. App: 3B, Project Application Detailed Instructions]*	3	3
1.2	Do the questions regarding services address all parts of the detailed instructions? *[Proj. App: 4A, Project Application Detailed Instructions]*	3	3
1.3	Do the questions regarding outreach address all parts of the detailed instructions? *[Proj. App: 5C, Project Application Detailed Instructions]*	3	1.5
Section II: Program Design		**Section II Score**	
Possible Points: PSH: 35 RRH: 20 Minimum Points Required or Review is Triggered: PSH: 10 RRH: 8		25	
Housing First			
2.1a	Does this project use a Housing First approach? *Must meet all statements below to meet standard. Program should not have any policies that would result in*	Standard met 2 of 2 met	

	screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures; sample lease]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1b	Does the project ensure that participants are not screened out based on the following: ☐ Having too little or no income ☐ Active or history of substance abuse ☐ Having a criminal record (with exceptions for state mandated restrictions) ☐ History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1c	Does the project ensure that participants are not terminated from the program for the following reasons: ☐ Failure to participate in supportive services ☐ Failure to make progress on a service plan ☐ Loss of income or failure to improve income ☐ Domestic violence ☐ Any other activity not covered in a lease agreement typically found in the project's geographic area	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
Key Elements of Permanent Supportive Housing		
2.2a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. *[Sample lease]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	

2.2b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. *[Program policies and procedures, sample lease]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent	met

	supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. *[Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2i	The provision of housing and the provision of support services are distinct. *(Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing).* *[Program policies and procedures]*	met
	Reviewer Notes (if unmet or documentation not provided, note why):	
Rapid Re-Housing Performance Benchmarks and Program Standards		
2.3a	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates [47]?	
	Core Program Standard: Housing Identification	
2.3a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities	N/A

[47] http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

	including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. *[Program policies and procedures*]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. *[Program policies and procedures]*.	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Programs can negotiate additional supports, as needed, on a case-by-case basis. *[Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. *[Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b	**Core Program Standard: Rent and Move-In Assistance**	
2.3b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a routine way to onboard new staff and to	N/A

	keep staff regularly updated on changing regulations and/or program policies. *[Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. *(Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should not have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household). [Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement. *[Program policies and procedures]*	N/A

	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c	**Core Program Standard: Rapid Re-Housing Case Management and Services**	
2.3c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible*. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager).* *[Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. *(Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan).* *[Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c3	Program has clearly defined relationships with employment and income programs	N/A

	that it can connect program participants to when appropriate. *[Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. *[Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d	**Core Program Standard: Program Philosophy and Design**	
2.3d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [*Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [*Program policies and procedures]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed to "predict" long-term housing stability other than willingness to engage the	N/A

	program and work on a self-directed housing plan. [*Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [*Program policies and procedures, sample lease]*	N/A
	Reviewer Notes (if unmet or documentation not provided, note why):	
Services Resource Leverage Plan		
2.4	CoC programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services for program participants that are funded by another source besides CoC program funds. (Submit MOU/MOA) • Services provided by other funding sources exceed the required 25% match. (Submit MOU/contract)	
	Program meets both bullets above	10 points
	Program meets one bullet	5 points
	Program meets neither bullet	0 points
	Project Score	5
Permanent Supportive Housing: Moving-on Strategy		
2.5	Permanent supportive housing should be available indefinitely, as long as	

	households need it. However, participants in these programs can stabilize to the point that they no longer need the intensive services associated with the program. Moving-on strategies for permanent supportive housing projects create opportunities for participants who no longer need the supportive part of permanent supportive housing to live independently and sustain their homes after graduation for the program. They usually involve transferring the tenant to another long-term housing subsidy, such as a Housing Choice Voucher (Section 8), public housing, or other affordable housing option.[48] Does the permanent supportive housing project incorporate moving-on strategies in its program policies and procedures (Note: this should not be a separate section but all sections of the document should indicate how the program uses a Moving-on approach) ? To receive full points program policies and procedures should include: • Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); • A method to prepare tenants to move-on and exit planning procedures; • A method to link moving-on tenants to mainstream services and supports; • Procedures to provide step-down services after exit; and • A strategy to evaluate the effectiveness of moving-on strategies. *[Program policies and procedures]*	

[48] https://www.usich.gov/resources/uploads/asset_library/PHA_MovingUp.pdf

	Program meets all bulleted points above	15	
	Program meets 4-5 of the above bulleted points	10	
	Program meets 1-3 of the above bulleted points	5	
Project score:		12.5	
2.6 Targeting to Prioritized Subpopulations			
	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including people experiencing chronic homelessness, homeless Veterans, survivors of domestic violence, and youth. Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs? Is the project targeting: ☐ People experiencing chronic homelessness ☐ People who identify as LGBTQ ☐ People with histories of institutionalization, incarceration, or foster care ☐ Veterans ☐ Survivors of domestic violence ☐ Unaccompanied or parenting youth 18-24 *[Program policies and procedures]*		
		Possible score	**Project Score**
	Full points for detailed plan to engage and serve specific needs of identified population(s). Partial points available for less detailed plans.	10	7.5

Section III: Equity		Section III Score	
Possible Points: 23		19.5	
3.1	Does the applicant provide guidelines/program rules in other languages besides English?	5	4
3.2	Does the applicant have client-facing bilingual staff?	5	4
3.3	Does the applicant contract with interpreter services? [Provide a MOA/MOU or other agreement with interpreter service]	5	4
3.4	Does the applicant have an Anti-discrimination Policy?	met	
3.5	*Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy?	3	
3.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Please list the date(s) of training(s) and percentage of staff that have attended an external racial equity/anti-discrimination training in the last 12 months).	4	3
3.7	Does the applicant have an equal access hiring clause in job postings?	2	1
3.8	What percentage of your Board of Directors are non-white?		0.5
	20% or above	2	
	Less than 20%	0	

Staff Scoring

The following section is scored by NCCEH. Staff use standardized scoring methods to ensure fairness.

Section I: Project Performance		Section I Score	
Possible Points Added: PSH: 88 RRH: 80 Minimum Points Required or Review is Triggered: PSH: 45 RRH:41		74	
The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2019 to December 31, 2019, unless otherwise noted.			
Populations Served		**Possible score**	**Project Score**
1.1a	**RRH projects:** What percentage of the **people** served by the project had a disability? *[Q13a2 divided by total enrolled]*		
	Less than 25%	0	N/A
	25%-49%	4	
	Above 50%	8	
1.1b	What percentage of the **adults** served by the project were veterans? *[CoC-APR Q25a]*		
	Less than 25%	0	0
	25%-49%	3	
	Above 50%	6	
1.1c	**PSH Projects:** What percentage of new admissions during the 2019 calendar year were chronically homeless? [0640 Report, Tab1-Detail]		
	100%	11	11
	Less than 100%	0	
1.1d	**PSH Projects:** What percentage of households served by the project were chronically homeless? [*CoC-APR Q26a]*		
	Less than 50%	0	4
	50-74%	2	
	75-100%	4	
1.1e	**RRH Projects:** What percentage of **households** served by the project were		

	chronically homeless? [*CoC-APR Q26a]*		
	Less than 25%	0	N/A
	25%-49%	2	
	50-74%	4	
	75-100%	8	
1.1f	What is the program's unit utilization rate? *[Average of APR Q8b divided by application unit projections]*		
	Less than 70%	-10	5
	70-79%	-5	
	80-94%	0	
	95%-124%	5	
	Above 125%	10	
1.1g	**RRH projects**: what percentage of exits were to a permanent housing destination? *[CoC-APR 23a/b]*		
	No Exits or Less than 70%	0	N/A
	70-80%	5	
	Above 80%	12	
1.1h	What percentage of exits were to a known destination? *[CoC-APR Q23a/b]*		
	95% or higher	5	5
	0-94%	0	
1.1i	**PSH projects:** what percentage of exits were to a permanent housing destination? *[CoC-APR 23a/b]*		
	No exits	5	10
	Below 80%	0	
	80% or higher	10	
1.1j	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
	<10%	0	11
	10-15%	4	
	15-20%	8	
	Above 20%	11	
1.1k			
	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
	<10%	0	8
	10-15%	4	
	15-20%	8	
	Above 20%	11	

Section II: HMIS Participation (Per federal law, domestic violence programs are prohibited from using HMIS and exempted from this section.)		**Section II Score** **74**	
2.2a	HMIS Data Completeness *[0640 – HUD Data Quality Report Framework Report, Q2-Q5]*		
	0-10%	5	5
	Above 10%	0	
2.2b	Are all of the agency's projects that are listed in the 2019 HIC participating in HMIS? *[HIC]*		
	Yes	10	10
	No	0	
2.2c	Did the program submit their APR on or before the designated deadline? [Sage]		
	Yes	5	5
	No	0	
HUD Monitoring			
3.3a	Is the recipient free of HUD monitoring findings for any agency projects? If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application to meet standards. *[Renewal application form]*	met	
3.3b	**Previous Project Spending Rates:** These questions are for projects that have been operating for at least one year at the time of the NOFA release. (percentage rounded to the nearest whole number) Percentage 90% or higher (Projects that fall below the standard will trigger review by CoC staff and Project Review Committee. The review will determine potential consequences, including whether some funding should be reallocated to new projects.) *[Scored from APR. If APR is not available, agencies will submit a LOCCS screenshot of final draw for last completed year. If agencies are spending less than 90% of funding, they must submit a narrative explaining why the agency is underspending their grant.*]	met	
	Amount awarded		
	Amount spent		

3.3c	How many grant extensions from HUD were given for a reason other than merging grants in fiscal years 2018, 2019, and 2020? *[Renewal application form]*		
		Possible score	**Project Score**
	0	0	
	1	-5	0
	2+	Further review	

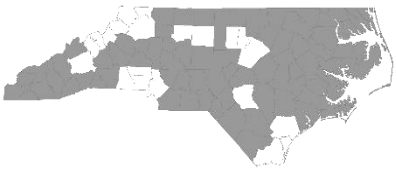
Section IV: Coordinated Entry and Prioritization

Possible Points: 10
Minimum score or review triggered: 3

Section IV Score

		10	
4.1	Does the program have a VI-SPDAT score for at least 97% of new admissions during the 2020 calendar year? *[Renewal project form; tab 1, 0640 report]*	met	
4.2	Is the program's average VI-SPDAT score for new admissions in the 2020 calendar year within or above the recommended range for the program type? *[Renewal project form]*	met	
4.3	What percentage of new admissions during the 2020 calendar year have a VI-SPDAT in HMIS?[Renewal project form; tab 1, 0640 report]	10	
		Possible score	Project score
	100%	10	10
	90%-99%	6	
	80-89%	3	
	Below 80%	0	
4.4	**Permanent Supportive Housing:** Has the program adopted HUD's prioritization policy as outlined in HUD Notice CPD-16-011 and added it to their program policies and procedures? [*Program policies and Procedures*]	met	

Section V: Application Deadlines and Documentation		Section V Score	
Possible Deductions: -25 Minimum Points Required or Review is Triggered: Not more than loss of -15		-2	
Budget & Match		Possible score	Project score
5.1a	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	0
5.1b	Does the project demonstrate they have 25% match and all match funds are eligible? [*Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections*].	met	
		Possible score	Project score
5.1c	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published).	-10	-2
5.1d	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	0
Deadlines			
5.2a	The online application and accompanying documents must be submitted by the deadline. If not, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in final NC BoS CoC application or will receive reduced funding.	met	
5.2b	Was the signed NC BoS CoC Grantee Agreement submitted?	met	



North Carolina
Balance of State Continuum of Care

bos@ncceh.org 919.755.4393 www.ncceh.org/BoS

2021 Scorecard for CoC Funds: New Projects

This scorecard will be used by the North Carolina Balance of State Continuum of Care (NC BoS CoC) Project Review Committee to score applications for new projects. The CoC prioritizes projects that serve households with severe needs and vulnerabilities, including chronic homelessness.

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

The NC BoS CoC Project Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), and avoid jeopardizing overall agency stability or future funding for the NC BoS CoC.

[References in brackets indicate the materials that will be used to score each question.]

Reviewer:			
Applicant:			
Project Name:			
Project Type (select one)	☐ PH:PSH ☐ PH:RRH ☐ TH-RRH (DV) ☐ SSO-CE (DV)		
Reviewer Signature:		Date:	

Project Quality Requirements		
New projects **must receive at least the standard and minimum score in each section**. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in final NC BoS CoC application or will receive reduced funding. **Thresholds are a requirement** for new projects. Projects that do not meet thresholds will not be put through the next steps in the application process.	**Maximum Score Possible:**	**PSH: 142 RRH:129 TH-RRH: 129 SSO-CE: 93**
	Project Score:	

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section I Score	
Possible Points: PSH, RRH, TH-RRH: 9 SSO-CE: 3 Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH 5 SSO-CE: 1			
Consistency with Mission			
1.1a	Does the project fit within the mission of the agency? Does the agency currently serve homeless households in their community? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
1.1b	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
Accuracy and Appropriateness of Responses		**Possible Score**	**Project Score**
1.2a	Does the project description address all parts of the detailed instructions? *[Proj. App: 3B, Project Application Detailed Instructions]*	3	
1.2b	**PSH, RRH, TH-RRH only**: Do the questions regarding services address all parts of the detailed instructions? *[Proj. App: 4A, Project Application Detailed Instructions]*	3	
1.2c	**PSH, RRH, TH-RRH only**: Do the questions regarding outreach address all parts of the detailed instructions? *[Proj. App: 5C, Project Application Detailed Instructions]*	3	

Section II: Program Design		Section II Score	
Possible Points: PSH, RRH, TH-RRH: 15 SSO-CE: 30 Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 8 SSO-CE: 16			
Community Need Statement			
2.1	New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe: • What community need the new project will address, including local data (PIT Count, coordinated entry data, waiting lists, etc.) that demonstrates the need • How the community has used other resources to address this need *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1a	**SSO-CE only**: Will the CE process funded in part by this grant cover the CoCs entire geographic area? *[Proj. App. Sec. 3B, Q4A]*	Threshold ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1b	**SSO-CE only**: Does the advertisement strategy ensure the CE process reaches survivors of DV with the highest barriers to access? *[Proj. App. Sec. 3B, Q4C]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided	
2.1c	**SSO-CE only**: Does the CE project indicate that it will tie into the existing NC BoS CoC CE system in each region? *[Proj. App. Sec. 3B, Q4E]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided	
2.1d	**SSO-CE only:** The budget maximizes funding for assessment of service needs, case management, and outreach services that increase access for DV survivors (assessment of service needs + CM + outreach / total budgeted amount)? *[Proj. App. Sec. 6]*		
	Less than 50%	0	
	50-84%	5	
	85-100%	15	
2.1e	**SSO-CE only**: Does the project maximize the use of cash match versus in-kind match (cash match total / total match amount)? *[Proj. App. Sec. 6]*		
	Less than 25%	0	
	25-74%	5	
	75-100%	10	

2.1f	**TH-RRH only**: Does the New Project Form describe the TH portion of the project as bridge housing (regular (at least monthly) offers of PH placement, housing-focused services)? *[New Project Form]*	Standard ☐ met ☐ unmet ☐ unmet, documentation not provided
2.1g	**TH-RRH only**: Does the program adequately demonstrate that both TH and RRH are available to all participants when needed or desired? *[Proj. App. Sec. 3B, Q1, Proj. App. Sec. 6]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
Targeting to Prioritized Subpopulations		
2.2a	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including people experiencing chronic homelessness, homeless Veterans, survivors of domestic violence, and youth. Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs? Is the project targeting: ☐ People experiencing chronic homelessness ☐ People who identify as LGBTQ ☐ People with histories of institutionalization, incarceration, or foster care ☐ Veterans ☐ Survivors of domestic violence ☐ Unaccompanied or parenting youth 18-24 *[Program policies and procedures]*	**No specific targeting: 0 points** **Targeted program: 5 points**
2.2b	**PSH projects**: Is this a permanent supportive (PSH) project dedicated to serving chronically homeless households per HUD Notice CPD-16-11? *[Policies and procedures]*	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
2.2c	**PSH projects**: Rental assistance projects are preferred to leasing projects as rental assistance projects adjust to FMR and provide tenants with a lease in their name. Projects that wish to provide leasing must submit a written statement that explains why the project is not applying as a rental assistance project.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	[Written statement for leasing application]	
2.2d	**TH-RRH and RRH projects**: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the NC ESG Office or operating a RRH program with other funding sources that adheres to the RRH program standards. (Exceptions may be made for Public Housing Authorities - PHAs are not eligible to apply for ESG funds but are eligible for CoC funding. Exceptions may also be made for projects applying for the DV-RRH bonus funding).	Threshold ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
PSH, RRH, TH-RRH Only: Services Resource Leverage Plan		
2.3	CoC programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services for program participants that are funded by another source besides CoC program funds. (Submit MOU/MOA or information on dedicated funding stream such as a contract) • Services provided by other funding sources exceed the required 25% match. (Submit MOU/match letter)	
	Program meets both bullets above	10 points
	Program meets one bullet	5 points
	Program meets neither bullet	0 points
	Project Score	
Housing First		
2.4a	Does this project use a Housing First approach? Must meet all statements below to meet standard. Program should not have any policies and procedures that would result in screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures, sample lease]	Threshold (must meet all statements below) ☐ met (2 of 2 met) ☐ unmet (1 or more missed)

2.4b	Does the project ensure that participants are not screened out based on the following: ☐ Having too little or no income ☐ Active or history of substance abuse ☐ Having a criminal record (with exceptions for state mandated restrictions) ☐ History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	☐ met ☐ unmet ☐ unmet, documentation not provided
2.4c	Does the project ensure that participants are not terminated from the program for the following reasons: ☐ Failure to participate in supportive services ☐ Failure to make progress on a service plan ☐ Loss of income or failure to improve income ☐ Domestic violence ☐ Any other activity not covered in a lease agreement typically found in the project's geographic area	☐ met ☐ unmet ☐ unmet, documentation not provided
PSH Projects Only: Key Elements of Permanent Supportive Housing		
2.5	Does this project include the following key elements of permanent supportive housing as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA)[1]?	
2.5a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. *[Sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

[1] US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration Center for Mental Health Services. (2010) Permanent Supportive Housing: Building Your Program (Evidence- Based Practices KIT). Retrieved from http://store.samhsa.gov/shin/content//SMA10-4510/SMA10-4510-06-BuildingYourProgram-PSH.pdf

2.5c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants	Standard

	establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. *[Program policies and procedures]*	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5i	The provision of housing and the provision of support services are distinct. *(Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing). [Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
For TH-RRH and RRH Programs Only: Rapid Re-Housing Performance Benchmarks and Program Standards		
2.6	Does this project include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates [2]?	
2.6a	**Core Program Standard: Housing Identification**	
2.6a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

[2] http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Program can negotiate additional supports, as needed, on a case-by-case basis. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b	**Core Program Standard: Rent and Move-In Assistance**	
2.6b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. *(Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.)* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c	**Core Program Standard: Rapid Re-Housing Case Management and Services**	
2.6c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible*. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. *(Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A

		☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d	**Core Program Standard: Program Philosophy and Design**	
2.6d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed to "predict" long-term housing stability other than willingness to engage the program and work on a self-directed housing plan. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	Reviewer Notes (if unmet or documentation not provided, note why):		

Section III: Scope of Services — Section III Score

Possible Points: PSH, RRH, TH-RRH: 12 SSO-CE: 6
Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 7
SSO-CE: 4

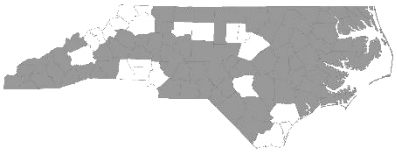
Service Needs		**Possible Score**	**Project Score**
3.1	Does the applicant demonstrate they will meet the anticipated individual service needs of participant households? Will services ensure households will be able to find and maintain permanent housing? *[PSH, RRH, TH-RRH Proj. App: 4A Question 2; SSO-CE Proj. App: 3B, Q4E]*	6	
Employment Services (PSH, RRH, TH-RRH only)		**Possible Score**	**Project Score**
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? *[Proj. App: 4A Question 3]*	3	
Access to Mainstream Benefits (PSH, RRH, TH-RRH only)		**Possible Score**	**Project Score**
3.3	Does the project include services to help participants access mainstream benefits such as unemployment benefits, TANF, food stamps/SNAP, and Medicaid? *[Proj. App: 4A Question 3]*	3	

Section IV: Equity — Section IV Score

Possible Points: 20
Minimum Points Required or Review is Triggered: 11

4.1	Does the applicant provide guidelines/program rules in other languages besides English? *[Guidelines/Program Rules in another language]*	4	
4.2	Does the applicant have client-facing bilingual staff? *[Org Chart]*	4	
4.3	Does the applicant contract with interpreter services? *[Provide a MOA/MOU or other agreement with interpreter service]*	4	
4.4	Does the applicant have an Anti-discrimination Policy? *[Program policies and procedures]*	Standard ☐ met ☐ unmet	
4.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? *[New Project Form]*	3	
4.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Please list the date(s) of training(s) and percentage of staff that	3	

	have attended an external racial equity/anti-discrimination training in the last 12 months). *[New Project Form]*		
4.7	Does the applicant have an equal access hiring clause in job postings? *[Example Job Posting]*	1	
4.8	What percentage of your Board of Directors are non-white? *[Racial Equity Chart]*		
	20% or above	1	
	Less than 20%	0	



North Carolina
Balance of State Continuum of Care

bos@ncceh.org 919.755.4393 www.ncceh.org/BoS

2021 Scorecard for CoC Funds: Renewal Projects

This scorecard will be used by the North Carolina Balance of State Continuum of Care (NC BoS CoC) Project Review Committee to score applications for renewal projects. The CoC prioritizes projects that serve households with severe needs and vulnerabilities, including chronic homelessness.

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

The NC BoS CoC Project Review Committee may ask applicant agencies to provide additional information to determine agency capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), and avoid jeopardizing overall agency stability or future funding in the NC BoS CoC.

[References in brackets indicate the materials that will be used to score each question.]

Reviewer:			
Applicant:			
Project Name:			
Project Type (select one)	☐ PH:PSH ☐ PH:RRH		
Reviewer Signature:		Date:	

PROJECT QUALITY REQUIREMENTS		
Renewal projects **must receive at least the standard and minimum score in each section**. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in the final NC BoS CoC application or will receive reduced funding. Thresholds must be met in order for the project to be eligible for funding.	**Maximum Score Possible:**	**PSH: 162** **RRH: 139**
	Project Score:	

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section I Score	
Possible Points: 9 Minimum Points Required or Review is Triggered: 5			
Accuracy and Appropriateness of Responses		**Possible Score**	**Project Score**
1.1	Does the project description address all parts of the detailed instructions? *[Proj. App: 3B, Project Application Detailed Instructions]*	3	
1.2	Do the questions regarding services address all parts of the detailed instructions? *[Proj. App: 4A, Project Application Detailed Instructions]*	3	
1.3	Do the questions regarding outreach address all parts of the detailed instructions? *[Proj. App: 5C, Project Application Detailed Instructions]*	3	
Section II: Program Design		**Section II Score**	
Possible Points: PSH: 35 RRH: 20 Minimum Points Required or Review is Triggered: PSH: 10 RRH: 8			
Housing First			
2.1a	Does this project use a Housing First approach? *Must meet all statements below to meet standard. Program should not have any policies that would result in*	Standard (must meet all statements below) ☐ met (2 of 2 met) ☐ unmet (1 or more missed)	

	screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures; sample lease]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1b	Does the project ensure that participants are not screened out based on the following: ☐ Having too little or no income ☐ Active or history of substance abuse ☐ Having a criminal record (with exceptions for state mandated restrictions) ☐ History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	☐ met ☐ unmet ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.1c	Does the project ensure that participants are not terminated from the program for the following reasons: ☐ Failure to participate in supportive services ☐ Failure to make progress on a service plan ☐ Loss of income or failure to improve income ☐ Domestic violence ☐ Any other activity not covered in a lease agreement typically found in the project's geographic area	☐ met ☐ unmet ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Key Elements of Permanent Supportive Housing		
2.2a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. *[Sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

2.2b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. *[Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2h	Support services promoting recovery are designed to help tenants choose, get, and	Standard

	keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. *[Program policies and procedures]*	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.2i	The provision of housing and the provision of support services are distinct. *(Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Rapid Re-Housing Performance Benchmarks and Program Standards		
2.3a	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates [1]?	
	Core Program Standard: Housing Identification	
2.3a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

[1] http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

	descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. *[Program policies and procedures*]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. *[Program policies and procedures]*.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Programs can negotiate additional supports, as needed, on a case-by-case basis. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b	**Core Program Standard: Rent and Move-In Assistance**	
2.3b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. *[Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. *(Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should not have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household). [Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement.	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	[Program policies and procedures]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c	**Core Program Standard: Rapid Re-Housing Case Management and Services**	
2.3c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible*. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. *(Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan).* *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c3	Program has clearly defined relationships with employment and income programs	Standard ☐ met ☐ unmet ☐ N/A

	that it can connect program participants to when appropriate. *[Program policies and procedures]*	☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. *[Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d	**Core Program Standard: Program Philosophy and Design**	
2.3d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [*Program policies and procedures]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed to "predict" long-term housing stability other than willingness to engage the	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided

	program and work on a self-directed housing plan. [*Program policies and procedures]*	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [*Program policies and procedures, sample lease]*	Standard ☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
Services Resource Leverage Plan		
2.4	CoC programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services for program participants that are funded by another source besides CoC program funds. (Submit MOU/MOA or information on dedicated funding stream such as a contract) • Services provided by other funding sources exceed the required 25% match. (Submit MOU/contract)	
	Program meets both bullets above	10 points
	Program meets one bullet	5 points
	Program meets neither bullet	0 points
	Project Score	
Permanent Supportive Housing: Moving-on Strategy		

2.5	Permanent supportive housing should be available indefinitely, as long as households need it. However, participants in these programs can stabilize to the point that they no longer need the intensive services associated with the program. Moving-on strategies for permanent supportive housing projects create opportunities for participants who no longer need the supportive part of permanent supportive housing to live independently and sustain their homes after graduation for the program. They usually involve transferring the tenant to another long-term housing subsidy, such as a Housing Choice Voucher (Section 8), public housing, or other affordable housing option.[2] Does the permanent supportive housing project incorporate moving-on strategies in its program policies and procedures (Note: this should not be a separate section but all sections of the document should indicate how the program uses a Moving-on approach) ? To receive full points program policies and procedures should include: • Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); • A method to prepare tenants to move-on and exit planning procedures; • A method to link moving-on tenants to mainstream services and supports; • Procedures to provide step-down services after exit; and • A strategy to evaluate the effectiveness of moving-on strategies.	

[2] https://www.usich.gov/resources/uploads/asset_library/PHA_MovingUp.pdf

	[Program policies and procedures]	
	Program meets all bulleted points above	15
	Program meets 4-5 of the above bulleted points	10
	Program meets 1-3 of the above bulleted points	5
Project score:		

2.6 Targeting to Prioritized Subpopulations			
	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including people experiencing chronic homelessness, homeless Veterans, survivors of domestic violence, and youth. Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs? Is the project targeting: ☐ People experiencing chronic homelessness ☐ People who identify as LGBTQ ☐ People with histories of institutionalization, incarceration, or foster care ☐ Veterans ☐ Survivors of domestic violence ☐ Unaccompanied or parenting youth 18-24 *[Program policies and procedures]*		
		Possible score	**Project Score**
	Full points for detailed plan to engage and serve specific needs of identified population(s). Partial points available for less detailed plans.	10	

Section III: Equity	**Section III Score**
Possible Points: 20 Minimum Points Required or Review is Triggered: 11	

3.1	Does the applicant provide guidelines/program rules in other languages besides English? *[Guidelines/Program Rules in another language]*	4	
3.2	Does the applicant have client-facing bilingual staff? *[Org Chart]*	4	
3.3	Does the applicant contract with interpreter services? *[Provide a MOA/MOU or other agreement with interpreter service]*	4	
3.4	Does the applicant have an Anti-discrimination Policy? *[Program policies and procedures]*	Standard ☐ met ☐ unmet	
3.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? *[Renewal Application Form]*	3	
3.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Please list the date(s) of training(s) and percentage of staff that have attended an external racial equity/anti-discrimination training in the last 12 months). *[Renewal Application Form]*	3	
3.7	Does the applicant have an equal access hiring clause in job postings? *[Example Job Posting]*	1	
3.8	What percentage of your Board of Directors are non-white? *[Racial Equity Chart]*		
	20% or above	1	
	Less than 20%	0	

Grant Number	Funding Priority	Rank	Agency	Project Name	2021 ARA / Request	Running Total	App Type	Project Type	TOTAL
NC0035L4F032013		1	North Carolina Coalition to End Homelessness	BoS HMIS	$519,299	$519,299	Renewal	HMIS	0
NC0384L4F032003		2	North Carolina Coalition to End Homelessness	BoS Coordinated Entry	$423,767	$943,066	Renewal	SSO	0
NC0240L4F032005		3	Vaya Health	Vaya Health PSH Central Combo	$427,624	$1,370,690	Renewal	PSH	134
NC0255L4F032008		4	Vaya Health	Vaya Health PSH Western Combo	$411,530	$1,782,220	Renewal	PSH	124
NC0294L4F032008		5	Vaya Health	Vaya Health PSH Central Chronic	$51,478	$1,833,698	Renewal	PSH	122
NC0239L4F032007		6	Housing Authority of City of Greenville	Project Stable Solutions	$68,055	$1,901,753	Renewal	PSH	103.5
NC0183L4F032011		7	Housing Authority of City of Greenville	Solid Ground	$71,952	$1,973,705	Renewal	PSH	92.5
NC0237C4F032005		8	Housing Authority of City of Greenville	Project Hope	$491,852	$2,465,557	Renewal	PSH	90.5
NC0045L4F032013		9	Community Link, Programs of Travelers Aid	Piedmont 1 PSH 0045	$610,439.00	$3,075,996	Renewal	PSH	88.5
NC0281L4F032007		10	Thrive	Pathways to Permanent Housing Henderson Cou	$358,645	$3,434,641	Renewal	PSH	88.5
NC0410L4F032002		11	Union County Community Shelter	CoC RRH UCCS	$199,872.00	$3,634,513	Renewal	RRH	88
NC0159L4F032007		12	Housing Authority of City of Greenville	Seeds of Change	$341,760	$3,976,273	Renewal	PSH	86
NC0040L4F032013		13	Trillium Health Resources	Trillium PSH #1	$864,444	$4,840,717	Renewal	PSH	80
NC0409L4F032002		14	Pitt County Planning	PittRRH	$120,986	$4,961,703	Renewal	RRH	79
NC0221L4F032010		15	Community Link, Programs of Travelers Aid	Northern PSH Combo	$1,303,099.00	$6,264,802	Renewal	PSH	78
NC0235L4F032004		16	Community Link, Programs of Travelers Aid	Piedmont 2 PSH 0235	$197,393.00	$6,462,195	Renewal	PSH	77
NC0236L4F032008		17	Community Link, Programs of Travelers Aid	Community Link PRC PSH 0236	$269,213.00	$6,731,408	Renewal	PSH	71.5
NC0238L4F032005		18	Eastpointe Human Services	Eastpointe Shelter Plus Care 3 - Renewal 2018	$222,412	$6,953,820	Renewal	PSH	128
NC0358L4F032004		19	Eastpointe Human Services	Eastpointe Shelter Plus Care Southeast	$77,203	$7,031,023	Renewal	PSH	114
NC0262L4F032009		20	Eastpointe Human Services	Eastpointe Shelter Plus Care Combined	$193,919	$7,224,942	Renewal	PSH	107
NC0204L4F032006		21	Trillium Health Resources	Trillium PSH #2	$123,684	$7,348,626	Renewal	PSH	95.5
NC0042L4F032013		22	Partners Behavioral Health Management	Partners Consolidated	$265,943	$7,614,569	Renewal	PSH	84.5
NC0198L4F032008		23	Rockingham County Help for Homeless, Inc.	RCHH Permanent Supportive Housing	$263,682	$7,878,251	Renewal	PSH	82
NC0185L4F032011		24	Trillium Health Resources	Trillium PSH #3	$98,304	$7,976,555	Renewal	PSH	81
NC0125L4F032012		25	Community Link, Programs of Travelers Aid	Community Link PRC RRH 0125	$343,153.00	$8,319,708	Renewal	RRH	71.5
NC0176L4F032011		26	The New Reidsville Housing Authority	New Reidsville HA PSH	$280,091	$8,599,799	Renewal	PSH	68
NC0174L4F032011		27	Rockingham County Help for Homeless, Inc.	RCHH Rapid Re-Housing	$203,678	$8,803,477	Renewal	RRH	52.5
NC0446L4F032001		28	Trillium Health Resources	Trillium RRH	$207,563	$9,011,040	Renewal	RRH	44
	2	29	Thrive	RRH New	$200,000.00		New	RRH	108.5
				RRH New (Tier One)	$59,860.00	$9,070,900			
				RRH New (Tier Two)	$140,140.00	$9,211,040			
	3	30	Housing Authority of the City of Greenville	HACG PSH New	$359,352.00	$9,570,392	New	PSH	105.5
	1	31	Brick Capital Community Development	Brick Capital PSH New	$277,280.00		New	PSH	81.5
				Brick Capital PSH New (Tier Two)	$200,369.00	$9,770,761			
				Brick Capital PSH New (Portion Not Funded)	$76,911.00	Not Funded			
		32	North Carolina Coalition Against Domestic Violer	NCCADV RRH New	$2,099,852.00	DV BONUS	New	RRH	51.5

[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Oct 14, 2021, 7:52 AM

to Melissa, bos

Dear Union County Community Shelter.

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Union County Community Shelter project:

Union County Community Shelter - CoC RRH UCCS Renewal - $199,872 - Rank 11 in Tier 1

Unfortunately, the following project(s) were not included in the final ranked list of projects:

Union County Community Shelter - CoC RRH UCCS New

This year's CoC funding process was very competitive. The CoC received $2,078,586 in requests for new projects with only $699,861 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as quality of application to make final decisions. The CoC was only able to include three new projects (plus the one new DV Bonus project) in the final list. Union County Community Shelter's new RRH project was not one of the selected new projects.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

If you would like to appeal the decision on the new project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process.

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing for the new project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion about how you might improve your application in subsequent competitions. Staff will be in touch soon about next steps on your renewal project application. We look forward to continuing to work with you.

NC Balance of State CoC Team
North Carolina Coalition to End Homelessness
(919) 755-4393
www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:47 AM

to Angela, bos

Dear Greene Lamp.

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. Unfortunately, the following project was not included in the final ranked list of projects:

Greene Lamp – Greene Lamp RRH New

This year's CoC funding process was very competitive. The CoC received $2,078,586 in requests for new projects with only $699,861 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as quality of application to make final decisions. The CoC was only able to include three new projects (plus the one new DV Bonus project) in the final list. Greene Lamp's project was not one of the selected new projects.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

If you would like to appeal this decision, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process.

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion about how you might improve your application in subsequent competitions.

NC Balance of State CoC Team
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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:48 AM

to Jane, bos

Dear Family Care Center of Catawba Valley.

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. Unfortunately, the following project was not included in the final ranked list of projects:

Family Care Center of Catawba Valley – Uni5 RRH Project New

This year's CoC funding process was very competitive. The CoC received $2,078,586 in requests for new projects with only $699,861 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as quality of application to make final decisions. The CoC was only able to include three new projects (plus the one new DV Bonus project) in the final list. Family Care Center's project was not one of the selected new projects.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

If you would like to appeal this decision, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process.

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion about how you might improve your application in subsequent competitions.

NC Balance of State CoC Team
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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:49 AM

to Michele, bos

Dear Diakonos.

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. Unfortunately, the following project(s) were not included in the final ranked list of projects:

Diakonos, Inc. – 2021 Fifth Street Ministries PSH

This year's CoC funding process was very competitive. The CoC received $2,078,586 in requests for new projects with only $699,861 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as quality of application to make final decisions. The CoC was only able to include three new projects (plus the one new DV Bonus project) in the final list. Diakonos Inc's project was not one of the selected new projects because it did not meet the Housing First threshold for new projects.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

If you would like to appeal this decision, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process.

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion about how you might improve your application in subsequent competitions.

NC Balance of State CoC Team
North Carolina Coalition to End Homelessness
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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:52 AM

to Lori, Sarah, bos

Dear Vaya Health,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Vaya Health projects:

Vaya Health - PSH Central Combo - $427,624 – Rank 3 in Tier 1
Vaya Health - PSH Western Combo - $411,530 - Rank 4 in Tier 1
Vaya Health - PSH Central Chronic - $51,478 - Rank 5 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

Thank you for your hard work on your applications over the last few weeks. Staff will be in touch soon about next steps with your application(s). We look forward to continuing to work with you.

NC Balance of State CoC Team
North Carolina Coalition to End Homelessness
(919) 755-4393
www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Oct 14, 2021, 7:52 AM

to Melissa, bos

Dear Union County Community Shelter.

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Union County Community Shelter project:

Union County Community Shelter - CoC RRH UCCS Renewal - $199,872 - Rank 11 in Tier 1

Unfortunately, the following project(s) were not included in the final ranked list of projects:

Union County Community Shelter - CoC RRH UCCS New

This year's CoC funding process was very competitive. The CoC received $2,078,586 in requests for new projects with only $699,861 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as quality of application to make final decisions. The CoC was only able to include three new projects (plus the one new DV Bonus project) in the final list. Union County Community Shelter's new RRH project was not one of the selected new projects.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

If you would like to appeal the decision on the new project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process.

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing for the new project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion about how you might improve your application in subsequent competitions. Staff will be in touch soon about next steps on your renewal project application. We look forward to continuing to work with you.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:50 AM

to Amy.Modlin@TrilliumNC.org, Talaika, bos

Dear Trillium Health Resources,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Trillium Health Resources projects:

Trillium Health Resources - Trillium PSH #1 - $864,444 - Rank 13 in Tier 1
Trillium Health Resources - Trillium PSH #2 - $123,684 - Rank 21 in Tier 1
Trillium Health Resources - Trillium PSH #3 - $ 98,304 - Rank 24 in Tier 1
Trillium Health Resources - Trillium RRH - $207,563 - Rank 28 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:48 AM

to Kristen, bos

Dear Thrive,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Thrive projects:

Thrive - Pathways to Permanent Housing PSH – Rank 10 in Tier 1
Thrive - Thrive RRH New - Rank 29 straddling Tiers 1 and 2

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:50 AM

to Amy, bos

Dear Rockingham County Help for Homeless,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following RCHH projects:

RCHH - RCHH PSH - $263,682 - Rank 23 in Tier 1
RCHH - RCHH RRH - $203,678 - Rank 27 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:51 AM

to Lynne, bos

Dear Pitt County Planning,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Pitt County Planning projects:

Pitt County Planning - PittRRH – $120,986 – Rank 14 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:51 AM

to Teena, bos

Dear Partners Behavioral Health,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Partners projects:

Partners Behavioral Health – Partners Consolidated PSH - $265,682 - Rank 22 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:50 AM

to Mitch, Teresa, bos

Dear New Reidsville Housing Authority,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following NRHA projects:

NRHA - NRHA PSH – $280,091 – Rank 26 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:45 AM

to Matthew, Ryan, bos

Dear North Carolina Coalition to End Homelessness,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following NCCEH projects:

NCCEH - BoS HMIS - $519,299 - Rank 1 in Tier 1
NCCEH - BoS Coordinated Entry - $423,767 - Rank 2 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:46 AM

to Cassie, bchartrand, cfisher, bos

Dear NCCADV,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following NCCADV projects:

NCCADV - Safe at Home – $2,099,852.00 - Rank 32 in Tier 2

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:49 AM

to Michael, Tujuanda, bos

Dear Greenville Housing Authority,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Greenville Housing Authority projects:

GHA - Project Stable Solutions - $68,055 - Rank 6 in Tier 1
GHA - Solid Ground - $71,952 - Rank 7 in Tier 1
GHA - Project Hope - $491,852 - Rank 8 in Tier 1
GHA - Seeds of Change - $341,760 - Rank 12 in Tier 1
GHA - Solid Foundations New - $359,352 - Rank 30 in Tier 2

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:51 AM

to LaTasha, bos

Dear Eastpointe,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Eastpointe projects:

Eastpointe - Eastpointe SPC 3 - $222,412 - Rank 18 in Tier 1
Eastpointe - Eastpointe SPC Southeast - $77,203 - Rank 19 in Tier 1
Eastpointe - Eastpointe SPC Combined - $193,919 - Rank 20 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org> Thu, Oct 14, 7:50 AM

to Tameka, bos

Dear Community Link,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Community Link projects:

Community Link - Piedmont 1 PSH 0045 $610,439 - Rank 9 in Tier 1
Community Link - Northern Combo PSH - $1,303,099 - Rank 15 in Tier 1
Community Link - Piedmont 2 PSH 0235 - $197,393 - Rank 16 in Tier 1
Community Link - PRC PSH 0236 - $269,213 - Rank 17 in Tier 1
Community Link - PRC RRH 0125 - $343,153 - Rank 25 in Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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[BoS] CoC Application: Project Prioritization Ranking List Notification

External Inbox ×

NC Balance of State CoC <bos@ncceh.org>
to kbashaw, bos

Thu, Oct 14, 7:49 AM

Dear Brick Capital Community Development Corporation,

The NC Balance of State CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that the Project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following Brick Capital Community Development Corporation projects:

Brick Capital - Region 7 PSH – $200,369.00 – Rank 31 in Tier 2

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/media/files/page/46720f3f/2021-approved-nc-bos-coc-ranking-list.pdf.

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ECU PHYSICIANS

Smart Medicine

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Director, Clinical Operations
Ryan White Program Director

Dean F. Markham, MD
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Alicia Lagasca, MD
Clinical Assistant Professor of Medicine

Dora Lebron, MD
Clinical Assistant Professor of Medicine

Rabindra Ghimire, MD
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Alexandra Stang, MD
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Jennifer Emberger, MD, MPH
Clinical Assistant Professor of Medicine

Michael Robinson, MD
Clinical Assistant Professor of Medicine

Jeffrey F. Thomas, PhD, LMHCS, LCAS, CCMHC, CRC, CCS-I, NCC
Director of Behavioral Health
Interim Ryan White Program Administrator

Manal Elnabtity, PharmD
Adherence Pharmacist

Tracey Perry, PharmD
Adherence Pharmacist

Nan Ma, MBA
Grants Program Coordinator

Barry White, MSIT, MBA
Data Manager

Memorandum of Agreement (MOA)
Between
Division of Infectious Disease at the Brody School of Medicine HIV Program
AND
Greenville Housing Authority

Brody School of Medicine HIV Program (BSOMHIVP) is a Ryan White Part B (RWPB) Region 10 grantee. The Greenville Housing Authority (GHA) is a Ryan White Part B Housing for People With AIDS (HOPWA) Region 10 grantee.

The BSOMHIVP receives RWPB funds that are used to provide core medical and supportive services to people living with HIV and AIDS (PLWHA) in Region 10 counties located in Eastern North Carolina: Beaufort, Carteret, Craven, Greene, Jones, Lenoir, Martin Pamlico, Pitt, Washington, and Wayne. BSOMHIVP provides core medical services, including medical provider visits, vaccinations, and lab work. Support services provided include medical case management, mental health counseling, substance abuse counseling, tobacco cessation counseling, and nutritional counseling.

The GHA receives Ryan White Part B HOPWA funding that provides emergency funding assistance, tenant-based rental assistance, and housing vouchers via permanent supportive housing. The GHA is an active partner in the Region 10 network of the North Carolina HIV Prevention and Care Program. Their work is invaluable by providing housing opportunities to the clients that we serve in Region 10.

The Division of Infectious Disease at the Brody School of Medicine will:

- Provide core medical and supportive services of no less than $89,838 to the GHA
- Provide said services for the Solid Foundation grant period of January 1, 2022, to December 31, 2022
- Refer Region 10 patients to the GHA who are eligible for HOPWA and other program services/funding

Greenville Housing Authority will:

- Comply with HUD and fair housing requirements
- Provide emergency funding assistance to eligible Region10 clients when funding is available
- Provide tenant-based rental assistance to eligible Region 10 clients when funding is available
- Provide permanent supportive housing to eligible Region 10 clients living with HIV/AIDS

This agreement shall be reviewed and amended annually and may be amended by mutual consent.

Grace L. Wilkins 27 OCT 2021
Signature and Date

Grace Wilkins, FNP-BC
Ryan White Program Director
Division of Infectious Disease
Brody School of Medicine HIV Program

Wayman A. Williams
Signature and Date
Person authorized to sign
Print Name Wayman A. Williams
Title Executive Director / CEO
Greenville Housing Authority