

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 2022 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2022 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 2022 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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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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.p., and VII.B.1.r.	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	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 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.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
8.	Hospital(s)	Yes	Yes	No
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No	No	No
10.	Law Enforcement	Yes	Yes	Yes
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	Yes	Yes	Yes
13.	Local Government Staff/Officials	Yes	Yes	Yes
14.	Local Jail(s)	Yes	Yes	No
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
18.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
19.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
23.	State Domestic Violence Coalition	Yes	Yes	Yes
24.	State Sexual Assault Coalition	No	No	No
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	Yes	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Organizations serving homeless Veterans	Yes	Yes	Yes
35.	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 a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 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, where assigned CoC staff ask attendees to sign-up to join the email list (the current list has 415 stakeholders). 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 to RCs. Staff and 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. 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 the Lived Expertise Advisory Council (LEAC) in 07/21. The CoC engaged PLE to join the LEAC, which reviews & evaluates CoC policies & procedures to ensure equity & effectiveness & seeks opportunities to impact legislation through advocacy. Two co-chairs with LE lead the LEAC & recruit recent/current PLE to help the CoC make informed decisions. The CoC uses the closed captioning function on web platforms during meetings to ensure hearing impaired individuals can fully participate. 3) The RE Subcommittee (RES) engages diverse organizations to collaborate with the CoC. The RES launched an annual dialogue series in 2020, engaging a diverse array of panelists to share their expertise on topics such as how racism creates barriers to permanent housing for people experiencing homelessness & how stress/trauma impact BIPoC experiencing homelessness.

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 2,500 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 three major ways: committees, surveys, & direct engagement. The Governance Board (GB) includes representation from each of its 13 Regional Committees (RCs) & at-large members representing people with lived experience, sector leaders (DV, legal aid, PHAs, rural), & state government depts (Depts of Health & Human Services; Public Safety, Housing Finance). Membership breadth ensures the CoC incorporates & considers 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 RE Subcommittee & Lived Expertise Advisory Council bring diverse perspectives from BIPOC & PLE. 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 & email 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 stakeholders 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 Awarded CoC Program Funding.	
	NOFO Section VII.B.1.a.(4)	

Describe in the field below how your CoC notified the public:

1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
2.	about how project applicants must submit their project applications—the process;
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and
4.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,500 characters)

1, 3) Staff emailed stakeholders upon release of the FY22 NOFO to inform the CoC that the competition was open & updated the CoC's website with competition information & how to apply for funding. Regional Committee (RC) leadership forwarded this email to their local email distribution lists. The CoC advertises funding on its website year-round with CoC staff available for one-on-one consults. The CoC announced an Intent to Apply (ITA) process at public, monthly Governance Board meetings (March-July 2022), on its website, through its email list (415 stakeholders), & in RC meetings & email lists. CoC staff held a webinar for agencies interested in applying for new projects under the FY22 CoC competition on 03/03/2022, recording the presentation for agencies unable to attend live. The webinar explained eligible activities under the CoC program, provided an overview of the CoC application process, defined CoC & HUD thresholds & standards, & encouraged new agencies to submit an ITA to schedule a conversation about the proposed project. The CoC received 18 ITAs including 13 agencies that have never received CoC funding. The CoC posted approved funding priorities (on 04/05/22) & new & renewal scorecards (on 06/07/22) to the website prior to the FY22 CoC NOFO release. Staff assisted agencies to understand project eligibility, CoC priorities, & regional needs. 3) The CoC posted instructions for new & renewal applicants on 08/02/2022, highlighting required documents, timelines, & links for submission. Staff emailed stakeholders on 08/02/2022 through its email distribution list with links to CoC competition materials & timelines, encouraging RC leadership to forward information to stakeholders. 4) 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 to a public website, & an email where people can contact staff directly to schedule meetings/get resources.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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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 the 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 LGBTQ+ 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.		
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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 2,500 characters)

1) NC DHHS serves as the ESG Program Recipient for NC. CoC staff work closely with the NC ESG Office (ESGO) to set the funding formula & design an application process to subgrant the funds fairly across the CoC's 13 Regional Committees (RCs). In 2022, CoC staff worked with the ESGO to update its RFP process & funding application. CoC staff joined a representative workgroup (current grantees, CoC Leads, ESGO staff) to review all aspects of the RFP to help CoCs better evaluate agencies applying for funding. This workgroup's feedback facilitated the creation of a new, more comprehensive application that enhanced the ability to measure performance, services, equity initiatives, & administrative capacity. The CoC holds monthly calls with ESGO staff to discuss emerging issues with current grantees, technical assistance needs, & funding competition processes. Both staffs agree on next steps with identified challenges & work together to resolve them. 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 & CoC staff identify projects having issues with programmatic design & performance standards through review of policies & procedures & CAPERs/APRs, making funding conditional on participation in TA with CoC staff. 3, 4) 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. CoC staff work closely with state agencies such as NC DHHS, NC Commerce, NC Public Safety, & NC Housing Finance Agency who oversee the process of the NC Con Plan. Staff meet regularly with staff, providing PIT/HIC & HMIS data to fulfill Con Plan requirements & collaborate on strategy creation & updates related to homeless or at-risk of homelessness populations.

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 sexual orientation and gender identity:

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, School Districts.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	No

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

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 & connect with providers serving families with school age children. The CoC funds 3 CAA to provide RRH resources to families with children. CoC staff participate on statewide 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 MH Assoc., NC State University, NC Dept of Public Instruction, & NC DHHS join this initiative. The SEA Director serves as an at-large member on the CoC GB, providing resources/training to members & connecting RCs to LEAs. CoC staff participate in the SEA’s annual conference, providing current CoC data to connect to the CE system. The SEA & CoC held reciprocal trainings in early 2022. The SEA invited LEAs & school districts to a webinar where CoC staff described the CoC system, including how to connect to their local RCs & CE case conferencing meetings. The CoC invited stakeholders to a webinar where the SEA defined its work with families experiencing homelessness & the homeless liaison network, inviting homeless school liaisons to share experiences working with RCs to collaborate. In 07/22, the SEA collaborated with the CoC to work with the NC DMV to obtain free state ID for youth experiencing homelessness up to age 24. The SEA & DMV have agreed to form an agreement to develop a form to streamline applications for free ID cards by homeless youth. In Fall 2022, CoC staff will collaborate with LEAs to conduct required needs assessments, connecting stakeholders to local focus group meetings. 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 school districts on the CoC & bring essential personnel to the table on local youth initiatives. LEAs serve on committees, providing insight & connection to youth resources outside the homeless service system. The CoC includes school districts as part of Sharing Agreements in the CE system, allowing them to fully participate in local case conferencing.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	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 2,500 characters)

In its programmatic written standards, the CoC has adopted specific language to guide funded programs about their responsibility to work with families with children. In the services sections of the street outreach, emergency shelter, transitional housing, rapid rehousing, homelessness prevention, & 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 CoC's Anti-Discrimination Policy includes a Family Separation Policy, clearly prohibiting children of either gender from separation from their parent(s) despite their age. This allows parents to oversee & make decisions regarding their children's education directly while they are in their care. 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. In 07/22, the SEA collaborated with the CoC to work with the NC Division of Motor Vehicles to obtain free state ID for youth experiencing homelessness up to age 24. Once approved by the state, the CoC will work closely with the SEA to develop policies and procedures to assist local homeless school liaisons & service providers to connect youth to these resources.

1C-4c.	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	Yes	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.		No	No

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:	
1.	update CoC-wide policies; and	
2.	ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.	

(limit 2,500 characters)

1, 2) Since the implementation of CE in 2014, a staff member from the NC Coalition Against Domestic Violence (NCCADV) has served as a member of the CE Council (CEC). The CEC, a subcommittee of the CoC Governance Board (GB), developed the CE policies & procedures in conjunction with a wide variety of stakeholders, including VSPs & people with lived experience of DV, providing feedback, support, & perspective. As a member of the CEC, NCCADV staff assist the CoC to evaluate the CE system annually & provide ongoing expertise as the CoC updates policies. NCCADV staff also serve as a member of the CoC GB. With longstanding connections to the entire VSP network in NC, NCCADV regularly includes survivors with a range of lived experiences in policy & program development to ensure services provided by the DV, homeless, & housing sector meets their urgent & long-term needs. NCCADV evaluates programs, providing survivor feedback during GB & subcommittee meetings to ensure that the system remains trauma-informed & meets the needs of all survivors. CoC staff offer a range of technical assistance activities to providers, including VSPs, to improve & implement best practices such as Housing First, Harm Reduction, & Trauma-Informed Care. Currently, CoC staff conduct 3-4 ES TA cohorts annually with at least one VSP involved. Staff focus on lowering barriers to ES & work with shelters to become more housing focused. The cohort design incorporates peer sharing between agencies participating in the technical assistance as well as with former participating shelters. The peer sharing component allows VSPs with expertise in safety planning, trauma-informed care, & confidentiality methods to share practices with general admission shelters. General admission shelters use this insight to incorporate trauma-informed practices in their policies & procedures & begin operationalizing them with existing & new staff. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure DV & homeless systems work closely together: NCCADV provides training for providers & CE Leads, focusing on survivor needs; trauma-informed care (how past trauma informs current needs); risk assessment & safety planning; & impacts on CE. NCCEH provides training to NC VSPs, focusing on homelessness/housing resources & how to connect with safe, confidential methods to PH resources. NCCEH & NCCADV record trainings & post the recordings on their respective websites.

1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	

1.	project staff that addresses 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 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 2,500 characters)

1,2) CoC staff provide ongoing technical assistance that includes trauma-informed, survivor-centered services & partner with the NC Coalition Against Domestic Violence (NCCADV) to enhance trainings & connect providers to ongoing resources to operationalize practices for survivors. Some VSPs, as the only providers in their communities, serve the CoC as CE Lead & mainstream housing providers. 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, connecting providers to VSPs, sharing resources, clarifying guidance, understanding challenges to connect survivors to mainstream housing programs, & enlisting assistance to develop trauma-informed, survivor-centered policies. NCCADV staff attend monthly NCCEH leadership response sharing 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. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure DV & homeless systems work closely together: NCCADV provides training for providers & CE Leads, focusing on survivor needs; trauma-informed care (how past trauma informs current needs); risk assessment & safety planning; & impacts on CE. NCCEH provides training to NC VSPs, focusing on homelessness/housing resources & how to connect with safe, confidential methods to PH resources. NCCEH & NCCADV record trainings & post the recordings on their respective 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 technical assistance with VSPs, homeless providers, & CE staff.

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC uses for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)

1) The CoC uses de-identified, aggregate data from several sources to assess the needs of individuals & families experiencing DV, dating violence, sexual assault, & stalking to understand how these households flow through the CoC's system of care. These sources include data from comparable databases, data provided by NCCADV & the Council on Women, the annual Point-In-Time count, & the CoC's CE system. 2) Data from NCCADV & the Council on Women allow the CoC to understand the full scope of service & housing needs for people experiencing violence across the full geographic area. This sets a baseline understanding of how other data sources within the CoC's control measure total need, fueling continued quality improvement on data collection methods, program implementation, & evaluation approaches. The CoC collects information from regional CE Leads, indicating the number of people assessed & added to the CE By Name List, the types of households accessing CE, the number & types of referrals made to emergency & permanent housing programs, & the number of households moving into permanent housing after CE referral from VSPs. With the anticipated launch of the CoC-wide DV Bonus RRH project (10/22), the CoC will plan for additional data collection & submission requirements throughout the year. In the long-term, the CoC's hopes to produce the HUD CSV Export with the HMIS implementation's custom data element of NC County of Service, to understand the scope of services & housing provided in every county within the CoC's geographic area. This will allow the CoC to add de-identified, aggregate DV client data safely to the CoC data dashboard (the current dashboard only includes data from HMIS). In the short term, the CoC has contracted with a consultant to build mini-dashboards that visualize CoC-APR data, allowing it to compare performance between DV CE services & HMIS-based CE services.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
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NOFO Section VII.B.1.e.

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

- | | |
|----|--|
| 1. | the emergency transfer plan policies and procedures; and |
| 2. | the process for individuals and families to request an emergency transfer. |

(limit 2,500 characters)

1, 2) The CoC updates its VAWA Emergency Transfer Plan (VETP) & provides a training for providers across the geographic area (mandatory for all CoC-& ESG-funded projects) annually. The CoC collaborates with partner VSPs as well as the North Carolina Coalition Against Domestic Violence (NCCDV) to ensure that the plan continues to take a trauma-informed, survivor-centered approach & meets the needs of survivors. The CoC Governance Board (GB) approved the updated VETP at its 04/05/22 meeting & held a mandatory training for funded agencies on 04/14/22. CoC staff recorded the training & made the recording available on the CoC website. The CoC required all funded agencies not in attendance at the live training to confirm that project staff watched the training. As part of the CoC's VETP, all agencies must inform participants at intake their rights to request an emergency transfer, the process they should follow to make a request, & the action the agency will take to secure a safe & timely transfer for the requestor. Upon an emergency transfer request, agencies must inform CoC staff of the request, providing relevant, de-identified information about the household. Staff log all requests, periodically following up on the status of the transfer. Staff assist providers when challenges arise, connecting them to CoCs outside the geographic area, when necessary.

1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC's geographic area.

(limit 2,500 characters)

Since the implementation of CE in 2014, a staff member from the NC 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 & people with lived experience of DV, providing feedback, support, & perspective. As state-wide coalitions, NCCEH & NCCADV collaborate on a variety of initiatives, & the CoC relies heavily on NCCADV’s expertise on trauma-informed care & survivor-centered services, ensuring the CoC-level & programmatic policies & standards account for these important models. The CoC often asks NCCADV to provide perspective on these practices, incorporating staff in technical assistance & training to providers & 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 VSP. The CE system includes VSPs & the survivors they serve. The system accounts for survivor households outside HMIS, manually adding de-identified information to the full By Name List. VSPs actively participate in case conferencing meetings, providing relevant information & serving as a liaison to the selected DV-related household to ensure connection to permanent housing resources. Traditionally, the CoC has referred survivor households to PH providers serving general homeless population households. However, in the FY21 CoC competition, NCCADV received a CoC-wide DV Bonus RRH project. Starting in 10/22, NCCADV’s project will work with ten local VSPs to provide RRH financial assistance & services specifically to survivor households. This project expands the CoC’s capacity to serve survivor households in all 79 counties of its geographic area & will do so through a network of providers with specific expertise for this population. NCCEH also serves on NCCADV’s statewide governing board with other sector leaders, sharing best practices, making viable cross-sector connections, & educating sector leaders on CoC protocols, eligibility, & policies.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC’s coordinated entry includes:	
1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

CoC staff provide ongoing technical assistance that includes trauma-informed, survivor-centered services & partner with NCCADV to enhance trainings & connect providers to ongoing resources to operationalize practice for survivors. Some VSPs, as the only providers in their community, serve the CoC as CE Lead & mainstream housing provider. As CE Lead, they participate as members of the CE Council (CEC), providing insight & direction on CE policy to ensure survivor safety & confidentiality. During the pandemic, NCCEH attended bi-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, survivor-centered policies. NCCADV attends the monthly NCCEH Local Leadership Response Sharing calls, connecting providers to VSPs, brainstorming creative ways for VSPs & homeless providers to work together, & providing a trauma-informed lens to ensure survivor safety & confidentiality. In 2023, NCCEH & NCCADV will coordinate reciprocal trainings to ensure DV & homeless systems work closely together: NCCADV will provide training for providers & CE Leads, focusing on 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 CEC 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 & confidentiality remain paramount & consult with individual CE Leads to discuss local challenges & form baselines to use for individual technical assistance with VSPs, homeless providers, & CE staff.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+--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 LGBTQ+ 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 in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy--Updating Policies--Assisting Providers--Evaluating Compliance--Addressing Noncompliance.	
	NOFO Section VII.B.1.f.	

Describe in the field below:	
1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and

4. your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1,2)The CoC updates its ADP, providing annual training to providers & stakeholders. It uses 2 subcommittees, Racial Equity & Lived Expertise Advisory Council, to review current policies. They gather feedback on challenges, consider other CoC policies, & research emerging best practices to inform updates. The Governance Board (GB) approved the updated ADP on 06/07/22 & held a mandatory training on 06/08/22. Staff recorded the training, making it available on the CoC website. The CoC required all funded agencies not in attendance at the live training to confirm that project staff watched the training. The ADP requires providers to include a compliant ADP as part of project policies & procedures (P&Ps). This includes: a plan to train new staff & an annual staff training on the policy; intake procedures that provide the plan to all participants; reference to HUD's Equal Access Rule, privacy laws, & other federal, state, & local laws; an equal access policy that includes LGBTQ+, transgender, & gender non-conforming persons; a family separation policy; a faith-based activities policy; & procedures that demonstrate how clients, staff, & volunteers will carry out policies. The CoC provides a checklist that helps agencies determine if they have all required elements in their ADP. 3)Upon initial adoption of a CoC-wide ADP, it required all funded agencies to submit P&Ps, showing the addition of a compliant ADP. Since initial review, the CoC evaluates project P&Ps as part of annual CoC & ESG competitions. The CoC prioritizes agencies for funding with a compliant ADP. Agencies approved for funding without a compliant ADP must show proof of the addition of an ADP policy to their P&Ps as a condition of funding. 4) The CoC's ADP has a 3-step grievance procedure: a)anyone can submit a complaint to administrators; b)administration must address the grievance with staff, client, & other parties involved. If the grievance is against administration, the agency must identify an objective body, such as a Board Executive Committee, to make decisions about the grievance; c)if the participant is not satisfied with the outcome or the participant fears retaliation, a complaint can be filed with NCCEH. NCCEH follows up, gathers information from the client & agency & decides the course of action. If it has disregarded the ADP, staff will work with the agency on a performance improvement plan, &/or in the most egregious circumstances, take a recommendation to the GB for remedial action.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy.	
	NOFO Section VII.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the FY 2021 CoC-PHA Crosswalk Report 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 2021 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	11%	No	Yes
Housing Authority of the City of Wilson	21%	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 2,500 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, & 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 regularly present at the NC PHA Director’s Conference & at statewide conferences to educate PHAs & homeless service providers about preferences. CoC staff collaborate with the local HUD Field Office in Greensboro, focusing on helping PIH & CPD staff better support the collaboration between CoCs & 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, and/or Moving On from PSH. CoC staff will schedule meetings with these PHAs, introducing them to local providers & CE staff & assisting them to develop their general or limited preference plan. Staff will provide technical assistance upon launch of any preference, addressing referral challenges, barriers, & lease up issues. CoC staff have built strong relationships with the majority of PHAs that received EHVs. CoC staff have begun conversations with these PHAs about the next phase of our collaboration. This includes applying for mainstream, FUP, stability, & additional emergency housing vouchers, creating a plan to use additional vouchers for prioritized households from local CE systems, & putting in place a general or limited preference for public housing units or HCVs for people experiencing homelessness.

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 Housing 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.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. NOFO Section VII.B.1.g.	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process?

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	Yes
8.	Other Units from PHAs:	
		No

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness. NOFO Section VII.B.1.g.	
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1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	N/A

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). NOFO Section VII.B.1.g.	
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	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
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

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

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: Western Piedmont Council of Governments

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: Rockingham Housing Authority

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: Wadesboro Housing Authority

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: Housing Authority of the Town of Laurinburg

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: Bladenboro 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: Chatham County Housing Authority

1D. Coordination and Engagement Cont'd

1D-1.	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

1D-2.	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 2022 CoC Program Competition.	29
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 2022 CoC Program Competition that have adopted the Housing First approach.	29
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2022 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section VII.B.1.i.	

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1,3)The CoC ensures Housing First (HF) compliance in 3 key ways: a)staff hold monthly calls with CE Leads, reviewing regional BNLs, ensuring the system prioritizes HHs, & that funded agencies take high need HHs. CE Leads provide insight on referrals to funded housing agencies, identifying challenges or when providers need TA to ensure they do not require income, sobriety, treatment, or other service requirements as a barrier to PH. When identified, staff schedule calls with providers to develop a plan to ensure HF compliance; b)staff developed a Performance Improvement Planning process to evaluate CoC-funded agencies. Staff evaluate documents, including P&Ps, client files, & APRs to ensure compliance with the HUD Interim Rule & HF. After evaluation, staff provide agencies an exhibit identifying areas of improvement, meeting with staff to discuss challenges & a timeline for improvement. c)the CoC reviews applicant P&Ps during funding competitions to ensure fidelity to HF. New applicants must adhere to HF approaches to move forward in competitions. Returning applicants with updated polices that no longer follow a HF approach must accept TA & change any non-HF policies before the next funding cycle for continued approval. 2)The CoC reviews several factors/performance indicators to ensure HF compliance. Staff work with regional CE Leads to review BNL referrals, evaluating whether projects have taken prioritized HHs without conditions. The CoC evaluates key APR performance metrics such as the reasonableness of the # of people exiting the project during the operating period paired with the reasons for exit (seeing high #s of terminations or for reasons other than those outlined in CoC policies could indicate using non-HF approaches); the # & types of participant disabling conditions (low/no indication of disabling conditions could indicate projects screen out high need HHs); HHs #s enrolled with no move-in date (seeing large #s of enrolled HHs without moving into PH could indicate providers terminate difficult to house HHs); prior living situation (low #s of unsheltered people could indicate eschewing harder to serve populations); cash income at enrollment (large %s of HHs with income could indicate income requirements); & length of participation (PSH: HHs exiting in less than 2 years could indicate wrongful terminations; RRH: HHs exiting with the same length of participation could indicate a standard package rather than a progressive approach based on HH need).

1D-3.	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 2,500 characters)

1,2,3) The CoC has 6 providers funded through ESG for SO activities covering 20 of 79 counties in its geographic area. To ensure full SO coverage, engaging all people experiencing unsheltered homelessness (PEUH), the CoC launched a new initiative in 06/21. The CoC developed a new leadership role in each of its 13 RCs called an Unsheltered Access Coordinator (UAC) to facilitate a local plan to identify & connect all PEUH the local CE system. UACs formed subcommittees to design an unsheltered outreach & engagement plan. Plans define how RCs identify PEUH through both passive (organizations/events coming into regular contact with the population) & assertive (SO in the community) outreach; the frequency of outreach; and the providers who conduct the standardized assessment & enter data into HMIS. Each UAC works closely with the regional CE Lead to ensure PEUH without another community-based provider has navigation services. To identify new PEUH, passive outreach occurs daily at agencies participating in the CE system & weekly at non-participating agencies through identified staff/volunteers in the local plan. The frequency of assertive outreach depends on each RC's capacity. However, the CoC encourages assertive outreach on the streets no less than quarterly. Once identified & engaged, UACs & other provider staff connect with PEUH through regular case management, as desired; attempt to connect the HH to local shelter; conduct the standardized CE assessment; refer HHs to the BNL, & serve as their advocate during case conferencing meetings until the HH moves into PH. 4) At launch of this new process, the CoC held several webinars with UACs & other CoC stakeholders involved in engagement efforts to understand the CoC's approach & standards working with PEUH, especially people with the highest vulnerabilities & people historically disconnected from the homeless service system. These webinars focused on best practices such as Harm Reduction, Housing First, & Trauma-Informed Care, outlining basic principles of each practices & providing scenarios from experienced SO staff of how to appropriately work with disenfranchised HHs. Webinars also discussed person-centered case management approaches that allow HHs to make decisions for themselves & their needs. CoC staff have continued to work with UACs & other SO providers on specific cases as needed to brainstorm ways to better engaged PEUH & connect them to needed services & PH.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

		Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	No	No
5.	Other:(limit 500 characters)		

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

		2021	2022
	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."	730	1,192

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	Yes
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	
	Medicaid	Yes

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC:

1. systemically provides 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. works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3. works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 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 Governance Board (GB) & membership. Mainstream partners attend Regional Committee meetings, educate providers on how to connect clients to benefits, & share updates that will affect ongoing benefits. The GB includes representation from the NC DHHS & other statewide sector leaders who provide updates on mainstream benefits. 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, inviting others to share updates & opportunities. 2) NCCEH acts 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. In the last two years, 21 case managers in the CoC completed SOAR training through NCCEH with 16 actively submitting cases on behalf of people experiencing homelessness. NCCEH holds monthly case conferencing meetings, & a dedicated NCCEH Project Specialist works 1:1 with trained SOAR staff to review medical narratives, provide connections to SSA & DDS staff, & troubleshoot difficult cases. The CoC also maintains partnerships with health care navigators, Managed Care Organization (MCOs), free clinics, legal aid, & DSS to ensure access to health insurance programs. 3) 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 under its Medicaid waiver to ensure housing supports & 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 & how to access them appropriately to provide more comprehensive care for the most vulnerable people entering housing from a homeless situation.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

During the pandemic, CoC staff worked with local emergency management departments & providers to set-up non-congregate shelter using a FEMA waiver. Through this initiative, 2/3 of the CoC's counties had some non-congregate shelter options in hotels/motels. While many of these shelters have since closed due to decreased funding availability, many CoC counties have found other funding options including re-allocating current shelter funding to ensure non-congregate shelter options exist for the most vulnerable populations, including people experiencing unsheltered homelessness. Currently, the CoC has at least some non-congregate shelter available in 22 counties with full non-congregate shelter coverage for Veterans experiencing homelessness & survivors of domestic violence. CoC stakeholders have seen the benefit of having non-congregate options; many people living unsheltered who have refused to enter a congregate shelter have been willing to take a room in a hotel/motel. This provides a safe space for people living unsheltered & gives providers an easier way to work with them to access services & permanent housing. Staff work closely with stakeholders in communities in the CoC where no shelter exists who want to develop shelter options. Staff encourage stakeholders to consider non-congregate project & facility design, connecting them to other successful, low-barrier, housing-focused, non-congregate shelter programs in other CoC communities. The CoC has also prioritized non-congregate shelter funding for Special NOFO projects under the rural set-aside. The rural counties in the CoC are most likely to not have any type of emergency shelter. This funding under rural set-aside projects would build non-congregate shelter capacity, targeting people experiencing homelessness with severe service needs.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
NOFO Section VII.B.1.o.		
Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:		
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

1) 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 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 departments, Departments of Health and Human Services, FQHCs, hospital systems, & others. These relationships forged during the crisis have allowed communities to bring experts to the table to discuss, plan for, & develop policies & procedures to respond to infectious disease outbreaks such as COVID-19. Having state & local public health partners at the table on a regular basis helped the CoC & its providers to create policies for diversion approaches, helping HHs presenting for services to problem solve other safer options than ES. They also assisted emergency response programs to define protocols for social distancing, right-sizing facility-based shelters to ensure staff & participant safety, & prioritizing beds for the most vulnerable HHs for limited ES beds. 2) During the pandemic, NCCEH scheduled a weekly COVID Local Leadership Response Call, inviting NC leaders including staff from local emergency management & public health departments & state-level staff from the Departments of Health & Human Services & Public Safety to share resources, address challenges, & work on protocols for safety of people experiencing homelessness. As the pandemic became endemic, NCCEH shifted to monthly calls & set agendas that focus on long-term system planning, offering examples of emerging best practices, space for state & local health experts & homeless providers & leaders to share & develop ideas, & time to build stronger relationships. Calls reflect ongoing challenges of the pandemic with all parties ready to brainstorm ideas but also a place to develop the infrastructure to plan for future infectious disease outbreaks.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:	
1.	sharing information related to public health measures and homelessness, and	
2.	facilitating communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1) Starting in 03/20, NCCEH held regular COVID Local Leadership Response Sharing Calls, 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, & PH programs. CoC worked closely with the NC DHHS to understand FEMA waivers, 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 worked with Regional Committees (RCs) to implement local protocols based on capacity & local needs with guidance/priorities from the CoC. The CoC encouraged RCs to continue engaging people living unsheltered 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 to CE quickly, & moving them in PH. CoC staff worked with NC DHHS & Dept. of Transportation to communicate the availability of CRF funds for local transportation to/from vaccine sites. CoC stakeholders connected clients to available funding, negotiating discounted pricing, scheduling transport, & ensuring provision of services. 2) CoC staff worked closely with RCs & county Emergency Management Departments to identify options for non-congregate ES & access available FEMA resources. Congregate ES/TH & PH project staff followed CDC social distancing & hygiene guidelines, decreasing the numbers of beds, evaluating temperature & symptoms upon entry, cleaning communal spaces regularly, & finding quarantine space as available. CoC staff connected providers not already connected to local public health departments to ensure flow of important information & local protocols, connection to resources such as communication materials, vaccine clinics & PPE, & expertise on emerging challenges. When providers experienced difficulties with local public health & emergency management departments, CoC staff attempted to facilitate conversations with the parties or to use its connections with NC DHHS to facilitate resolutions.

1D-9.	Centralized or Coordinated Entry System—Assessment Process.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	covers 100 percent of your CoC's geographic area;	
2.	uses a standardized assessment process; and	
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 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’s Coordinated Entry Council (CEC). 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 from other counties conduct regular outreach, advertisement, & have centralized call centers to provide access to CE. 2) The CoC currently uses two assessments as part of CE. The first assessment is called the Prevention & Diversion Screening Tool. This tool is used at front door providers to help the household determine if they have other safe, natural resources they can use rather than enter the system or access available ES beds. This tool begins with a question to determine if there might be intimate partner violence; if so, the HH is immediately referred to local VSPs. The second assessment the CoC uses is the VI-SPDAT to determine household vulnerability & assist the CE system to determine the most appropriate PH intervention. The CoC houses recorded trainings of how to conduct these assessments on its website. Local CE Leads provide regular updates on assessment protocols to providers, connecting new staff conducting assessments to the recorded trainings. 3) The CoC conducts an annual assessment of its CE system. As part of the assessment, the CoC surveys participating projects & HHs that currently or recently used CE. As part of the annual assessment, the CEC uses feedback to identify annual goals to improve CE, using monthly meetings to set timelines for updates & communicating a continual feedback loop to system leaders about updates being implemented. This continuous quality improvement allows the CEC to regularly tweak system policies & procedures to address challenges, communicate updates to the CoC & RC network, & ensure the system more quickly responds to emerging issues.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.B.1.p.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
4.	takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1) 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, & volunteer 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 created a new regional leadership role called an Unsheltered Access Coordinator to develop local plans to identify & connect all people living unsheltered to CE & PH resources. Plans identify: SO providers, outreach frequency, HMIS data entry responsibilities, & agencies conducting VI-SPDATs, services, & follow-up. RCs started plan implementation in 09/21. 2) ES use a diversion screen to prioritize beds for person with no other options. The CoC uses the VI-SPDAT to prioritize people most in need of limited housing resources. 3) Local case conferencing (CC) meetings facilitate conversations to assign responsibility to find hard-to-reach HHs with the assigned provider engaging them regularly to ensure quick access to PH. CC meetings leverage other resources beyond CoC & ESG funded services such as NC Targeted/Key, Transitions to Community Living, HOPWA, VA resources, Emergency Housing Vouchers, & other available PHA-preferenced units to move people into PH quickly. 4) Often HHs referred to the CE system lack a service provider to help them navigate the system. Prior to 09/21, this meant that because of limited local capacity, especially in the most rural areas of the CoC, the regional CE Lead would attempt to assist the HH to connect to supportive services & ES. With the election of UACs & development of local plans to identify & connect people living unsheltered, the CE Lead became one of several identified partners to help people without service provision to navigate the system & access needed services & supports. This has reduced the burden on HHs using CE, especially HHs with the highest needs.

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/20/2022

1D-10a.	Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section VII.B.1.q.	

Describe in the field below:

1.	your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1)The CoC’s RE Subcommittee (RES) produces an annual RE Assessment. Using tools created by national partners, the CoC conducts an analysis of PIT, HMIS, & CE data to see who accesses the system. RE members & CoC & HMIS Lead staff evaluate relevant data, draft the assessment using HUD’s CoC Assessment Tool, NAEH’s Racial Equity Tool, & HUD’s Stella Performance Module, & present findings, challenges, & prioritized goals to the Governance Board (GB) for approval. The assessment focuses on answering four basic questions: a) who does the CoC serve in comparison to people in NC & people in poverty? b) who accesses PH in the system? c) how does the system support people to end their homelessness? D) who has access to CE & PH resources? Outside of the assessment process, NCCEH, as the CoC’s HMIS Lead, employs a Data Analyst. The Data Analyst uses datasets including PIT, LSA, & SSO-CE data to perform deeper analysis than an annual assessment can provide, helping the GB & RES to see the intersectionality of gender & race/ethnicity & impacts regionally. 2) The RE Assessment demonstrates that people who identify as White made up 72% of the entire population in the CoC geographic area, while showing a significantly lower rate of Whites in poverty & the homeless population. In contrast, people who identify as Black make up only 19% of the CoC’s population. While the % of people who identify as Black increased when looking at poverty (31%), homelessness (37%), & families experiencing homelessness (43%). When looking at people who identify as Black & where they experience homelessness, the majority access ES & do so at a higher % (41% vs. 38%) than that in the overall homeless population. Fewer people experiencing unsheltered homelessness (PEUH) identify as Black (31%). The CoC believes that BIPoC EUH have been undercounted during PIT counts. Until the 2022 PIT Count, the CoC used volunteer groups to canvas the geographic area to identify & count PEUH. As volunteers, most of whom did not serve in a professional capacity in the system, they brought implicit bias to the process, canvassing areas they knew & deemed safe enough to explore where they thought PEUH might congregate. With most volunteers identifying as White, they likely rarely explored areas in which they were unfamiliar, limiting the scope of their outreach & thus likely undercounting BIPoC. This is especially true for the more rural areas of the CoC, where volunteer groups focused on known locations.

1D-10b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.q.	
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.		

1D-10c.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 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 regular updates & recommendations to the GB. The RES worked with the CoC’s Scorecard Committee to create an equity section in new & renewal CoC application scorecards, setting equity benchmarks & standards for funded agencies based on the CoC’s equity priorities. This section evaluates 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 & leadership staff; & increase the level of participation of people with lived expertise in decision-making. The RES also formed a Prioritization Workgroup (PW) to work as part of a CoC CE Equity Core Team. Through an evaluation of CE assessment data, the Core Team identified significant disparity issues with the current CE assessment (VI-SPDAT). The evaluation determined that the assessment prioritized people identifying as White disproportionately in the highest scoring categories. The Core Team has formed a diverse workgroup, joining researchers from UNC & Duke & healthcare experts from UNC Health, Cone Health, & NC Departments of Health & Human Services & Public Health to explore & develop a new assessment & prioritization process. They will evaluate recently conducted research using linkages of HMIS data with state death records, explore other community assessment & prioritization processes, & use qualitative & quantitative research to prioritize vulnerable populations in the CE system for housing resources. The workgroup intends to begin implementation of a new assessment/prioritization process by early 2023. The RES initiated a RE Dialogue Series to discuss relevant & emerging topics. The Dialogue Series invites all CoC stakeholders to learn about relevant & emerging topics from expert panelists. Recent topics discussed in the series include: How stress & trauma impact BIPoC experiencing homelessness & how racism creates barriers to accessing PH for people experiencing homelessness.

1D-10d.	Tracking Progress on Preventing or Eliminating Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC evaluates several key measures to determine & track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance. From the annual RE Assessment, the CoC has a baseline understanding of the percentages of people of different races/ethnicities in the homeless system in comparison to the general population & in poverty. This helps the CoC to understand how BIPoC access programs & succeed in PH. The CoC focuses its attention on access, exits, & returns. While less robust than HMIS data, we review PIT Count data to determine the number of BIPoC experiencing unsheltered homelessness in comparison to the percentage of that respective race in the total homeless population. We also review the percentage of BIPoC who access program types such as ES, TH, RRH, & PSH, comparing the percentage of each race/ethnicity who access these services against the percentage of that respective race in the total homeless population. For each program type, the CoC wants to understand & evaluate where households exit, paying special attention to comparisons of positive/negative outcomes per race/ethnicity. In conjunction with these exit data, the CoC monitors returns data. The CoC wants to understand how successful the system is at helping households of different races/ethnicities & preventing them from returning to the system after two years. After its initial evaluation of CE data, the CoC learned that the current assessment prioritizes people identifying as White disproportionately in the highest scoring categories thus providing more access to the most intensive PH interventions. As mentioned earlier, the CoC will undertake a process in Fall 2022 to develop a new CE assessment/prioritization process. As part of this process, the CE assessment workgroup will define the measures it will evaluate on a monthly basis to determine the effectiveness of the new assessment/prioritization process to more equitably prioritize households for PH. While not currently defined or measured, the CoC expects to look at the percentage of households for different races/ethnicities prioritized for different PH interventions, comparing these percentages against the percentage of that respective race in the overall homeless population.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
NOFO Section VII.B.1.r.		

Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.

(limit 2,500 characters)

The CoC approved the formation of a Lived Expertise Advisory Council (LEAC) in 07/21. The CoC created this subcommittee to improve its ability to make governance & funding decisions & provide technical assistance by explicitly incorporating the perspectives of people with lived experience of homelessness (PLE). The LEAC improves the provision of services to PLE, & the policies that govern these services, across the CoC through insights & expertise that come directly from PLE first-hand. The LEAC consists of people who currently experience or have previously experienced homelessness, including people experiencing unsheltered homelessness. The LEAC membership intentionally incorporates diverse perspectives: people of different races/ethnicities; PLE that work in the field; people that have experienced the CoC’s CE system & programs; & people residing across the full geographic area of the CoC. The LEAC educates & engages people experiencing or recently experienced homelessness through several paths. The LEAC works with regional CE Leads & local providers to identify PLE currently in or who have recently been housed through the system. Individual LEAC members with the help of CoC staff schedule calls or virtual meetings to discuss the CoC’s & LEAC’s work, recruiting them to join the subcommittee. The CoC ensures that at least one member of the LEAC also serves on other CoC subcommittees including the CE Council, Funding & Performance Subcommittee, RE Subcommittee, Governance Nominations Subcommittee, Project Review Committee, & Scorecard Committee. CoC subcommittees handle the day-to-day decision-making & oversight of the CoC’s work, evaluating data, providing recommended strategies, drafting & implementing policies & procedures, training CoC stakeholders, & setting performance benchmarks. As part of HUD CE Equity TA, the CoC formed a Core Team to assist the CoC to set CE equity goals & work to create long-term strategies to improve equity in the system. To form the Core Team, CoC staff along with RE Subcommittee members directly outreached & engaged a diverse slate of PLE identified by local RC and CE Leads. 43% of the Core Team consists of PLE. It has formed a diverse workgroup, joining researchers & healthcare experts to develop a more equitable CE assessment & prioritization process. The Core Team will recommend the process to the GB for final approval & work with the CoC to implement the new process, train stakeholders, & evaluate effectiveness.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

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.	7	14
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	7	14
3.	Participate on CoC committees, subcommittees, or workgroups.	7	14
4.	Included in the decisionmaking processes related to addressing homelessness.	7	14

5.	Included in the development or revision of your CoC's local competition rating factors.	7	14
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1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC encourages all projects within the CoC geographic area to hire people with lived expertise in direct service roles & to serve as part of agency Boards of Directors. As part of funding competitions, the CoC added two questions to scorecards to incentivize agencies to include PLE. The first question concerns PLE on agency Boards of Directors: How many members of your Board of Directors have experienced homelessness? Agencies with Boards that comprise 20% or more of PLE receive maximum points. The second question concerns hiring PLE to provide direct services to program participants: Does the agency's hiring policy state a value or preference for hiring PLE? Agencies that have a preference receive maximum points. During all training & technical assistance with providers, CoC staff incorporate equity content, which include information about incorporating perspectives from PLE & talk through ways in which they should hire & support this population to work with program participants. In a survey conducted in 05/22, CoC agencies were asked whether they hire/would hire PLE. 65% of responding agencies said they employ PLE to fill a variety of roles including, but not limited to, shelter staff, case managers to conduct intake, provide food, facility maintenance, program management, street outreach, & peer support.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Describe in the field below how your CoC:

1.	how your CoC routinely gathered feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG program on their experience receiving assistance; and
2.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness

(limit 2,500 characters)

1)The CoC approved the formation of a Lived Expertise Advisory Council (LEAC) in 07/21. The CoC created this subcommittee to improve its ability to make governance & funding decisions & provide technical assistance by explicitly incorporating the perspectives of people with lived experience of homelessness (PLE). The LEAC improves the provision of services to PLE, & the policies that govern these services, across the CoC through insights & expertise that come directly from PLE first-hand. The LEAC consists of people who currently experience or have previously experienced homelessness, including people who have received assistance through CoC/ESG projects. The LEAC membership intentionally incorporates diverse perspectives: different races/ethnicities; PLE that work in the field; PLE that have experienced the CoC’s CE system & funded programs; & PLE residing across the CoC’s full geographic area. LEAC members use their experience in the CoC system & interaction with ESG/CoC projects to meet subcommittee goals such as reviewing CoC policies & procedures, providing recommendations to the GB, & determining whether the CoC implements its P&Ps equitably & effectively. 2) The CoC ensures that at least one member of the LEAC also serves on other CoC subcommittees including the CE Council, Funding & Performance, Racial Equity, Governance Nominations, Project Review, & Scorecard. CoC subcommittees handle the day-to-day decision-making & oversight of the CoC’s work, evaluating data, providing recommended strategies, drafting & implementing policies & procedures, training CoC stakeholders, & setting performance benchmarks. As part of HUD CE Equity TA, the CoC formed a Core Team to assist the CoC to set CE equity goals & work to create long-term strategies to improve equity in the system. 43% of the Core Team consists of PLE. The Core Team has formed a diverse workgroup, joining researchers & healthcare experts to develop a more equitable CE assessment & prioritization process. The Core Team will recommend the process to the GB for final approval & work with the CoC to implement the new process, train stakeholders, & evaluate effectiveness. As part of programmatic written standards, CoC- & ESG-funded projects must have a regular process to gather feedback from participants, evaluate their feedback, & incorporate this feedback in updates to services. As part of the ESG competition, projects must address these changes & how they incorporated feedback from participants.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that engage city, county, or state governments that represent your CoC’s geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

The CoC has engaged city, county, & state government in several ways to ensure they understand the impact of the lack of affordable housing on all people, especially people experiencing homelessness. 1) The CoC has had discussions with state officials about overturning current restrictions in NC on inclusionary zoning. This would allow local cities/counties within the CoC to require all developers to include a designated percentage of units in every development as affordable. Specifically, CoC stakeholders have approached officials in the City of Sanford & Lee County to incentivize inclusionary zoning & encouraged working with the NC General Assembly to introduce legislation to change current rules. The CoC has also approached jurisdictional governments to increase housing density, especially in urban areas where households experiencing homelessness need to connect to transportation, behavioral & physical health services, & employment. 2) CoC stakeholders have started quarterly meetings with local elected official & government staff to talk about ways in which local government can support regional issues regarding homelessness. In regular meetings, CoC stakeholders educate elected officials & government staff, sharing data, best practices, & ongoing challenges. This includes advocating for limits on vacation rentals & making income a protected class so that landlords are encouraged to accept 3rd party payments. CoC stakeholders have also approached elected officials & government staff to approve the use of accessory dwellings to increase the development of affordable housing. For the latter, one local city/county government has passed a new Unified Development Ordinance that will allow accessory dwelling units starting on 01/01/2023.

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section VII.B.2.a. and 2.g. You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	
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	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC’s local competition.	08/02/2022
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1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below. NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
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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.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	184
2.	How many renewal projects did your CoC submit?	26
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section VII.B.2.d.	

- Describe in the field below:
- | | |
|----|---|
| 1. | how your CoC collected and analyzed data regarding each project that has successfully housed program participants in permanent housing; |
| 2. | how your CoC analyzed data regarding how long it takes to house people in permanent housing; |
| 3. | how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and |
| 4. | 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 2,500 characters)

1) As part of the CoC competition, renewal applicants submit a prior calendar year APR that staff use to analyze performance measures in the CoC application renewal scorecard. Because of inherent problems with HUD Data Standards that muddle HMIS data on CH, the CoC, in conjunction with the HMIS Lead, developed a custom report to better convey data on total HHs experiencing CH in projects as well as total new HHs experiencing CH entering projects during the CY. CoC staff pull the custom CH report as well as the SPM report on returns to do a full analysis of each renewal. 2) The CoC reviews information from APR Q22C to analyze data on how long it takes for enrolled HHs to move into PH & to understand the # of HHs exited without move-in. 3) The CoC prioritizes projects that serve people with disabling conditions such as substance abuse, mental illness, or other impairments requiring significant support to maintain PH; CH people who may be 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. 4) 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. All but one submitted application met the Housing First standard; the CoC approved the one renewal application missing the standard for reallocation. The CoC also evaluates & 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 & match services to HH needs. Projects meeting more of these standards ranked higher on the final prioritization list. Additionally, the CoC established funding priorities for adequate coverage of PSH in the CoC & to increase the availability of RRH to ensure vulnerable populations across the CoC have access to housing & services. The CoC ranked a PSH project in its geographic area which had never had CoC funding as the highest ranked new project. This ensures that highly vulnerable HHs experiencing homelessness have access to PH resources in this region.

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

Describe in the field below:

1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;
2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;
3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and
4.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

1,2) The CoC uses the 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 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. 46% of members were BIPoC. Staff post scorecards in advance of the GB approval meeting. The CoC holds open GB meetings & encourages members/non-members to ask questions & provide feedback. The GB approved the SC recommendation unanimously. BIPoC comprise 48% of GB membership. 3) 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 prioritization ranking list for the GB to approve. 43% of PRC members were BIPoC. The CoC holds open GB meetings & encourages members/non-members (without a conflict) to ask questions & provide feedback. The GB approved the PRC recommendation unanimously. BIPoC comprise 48% of GB membership. 4) The RES consulted with the SC to create CoC scorecards, originally designing & annually refining an Equity Section to measure how applicants consider populations disproportionately affected by homelessness. The section, which sets standards & benchmarks for equity, measures an agency's ability to provide guidelines in other languages; bilingual staff; interpreter services; inclusion of Anti-Discrimination Policies in programmatic P&Ps; RE staff training; equal access hiring clauses; % of BIPoC Board members & leadership staff; & % PLE on Boards.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	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; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 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. With the help of the established funding priorities, the PRC uses several precedents to order the final ranking list that also helps determine when reallocations happen. The CoC typically uses adherence to several key standards including Housing First, best practice program design elements (SAMHSA’s Key Elements of PSH; USICH’s RRH Program Standards & Benchmarks), & Anti-Discrimination Policy compliance as guiding principles. 2) The PRC identified two renewal projects through its process that deserved further review: Rockingham County Help for Homeless (RCHH) Rapid Rehousing & New Reidsville Housing Authority (NRHA) PSH. The RCHH project missed the RRH Program Benchmarks & Anti-Discrimination standards, scored 0 points in the Equity section of the scorecard, & scored only 27% of possible points in the renewal scorecard. The total number of points for the project was 49% lower than the next highest scoring operating renewal RRH project. The NRHA project missed the Housing First, PSH program design, & Anti-Discrimination Policy standards, scored 0 points in the Equity section of the scorecard, & scored only 22% of possible points in the renewal scorecard. The total number of points for the project was 51% lower than the next highest scoring renewal PSH project. 3) The PRC put the RCHH RRH & NRHA PSH projects at the bottom of the list of potential projects. This action reallocated all of the NRHA PSH project & 50% of the RCHH RRH project. This will allow all new project applications meeting thresholds & scoring higher than both the RCHH RRH & NRHA PSH projects to be listed on the final prioritization ranking list. 4) N/A

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/06/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	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. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/06/2022
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1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
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1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/23/2022
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC’s website or partner’s website.	09/23/2022
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2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.	WellSky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Multiple CoCs
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/28/2022
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2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section VII.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in databases that meet HUD’s comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

1) The CoC’s HMIS Lead maintains knowledge base information for agencies using comparable databases. The CoC provides documents on its website to help determine if an agency or project should enter into an HMIS Comparable Database, understanding the expectations for creating & maintaining an HMIS Comparable Database, & how to leverage Sage to test & submit required HUD reports. This year, the CoC asked ESG returning applicants, many which are VSPs, to submit CoC-APRs rather than the typical CAPERs to better evaluate key performance measures of existing projects. This allowed the CoC to understand the current capability of funded-VSPs to run required reports from their databases. CoC staff will follow-up with VSPs unable to run these reports, assisting them with current database vendors to implement necessary changes to become comparable. The HMIS Lead conducts annual outreach to VSPs & DV targeted projects at the beginning of the federal fiscal year to confirm Comparable Database status, software, & contact information. Additionally, in preparation for the PIT/HIC, the CoC hosts VSP-specific trainings, assigning staff liaisons for every VSP to support accurate data submission. With direct funding of projects serving people fleeing DV, the CoC will integrate compliant VSPs about how they have worked with Comparable Database vendors & share with agencies & the NC Coalition Against Domestic Violence as best practices.

2) The CoC’s HMIS implementation complies with 2022 HMIS Data Standards & can produce CoC-APRs, CoC CE-APRs, ESG-CAPERs, System Performance Measures, Longitudinal System Analysis, & the HUD CSV Export. The CoC & HMIS Lead are currently working with VSPs to have compliant databases, supporting them to produce the reports listed above.

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

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	2,423	625	1,151	64.02%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	446	24	175	41.47%
4. Rapid Re-Housing (RRH) beds	1,192	85	1,107	100.00%
5. Permanent Supportive Housing	1,750	0	1,438	82.17%
6. Other Permanent Housing (OPH)	855	0	0	0.00%

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
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2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.
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(limit 2,500 characters)

1) The CoC’s Funding & Performance Subcommittee (FPS) developed a plan to increase HMIS bed coverage to the minimum 85% coverage rate level. The approved plan, which sets 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 eligible agencies not currently participating in HMIS. The FPS held a training webinar on HMIS recruitment for RLAs on 01/25/22 & provided a range of resources to assist them in their recruitment efforts including the 2021 HIC (later released the 2022 HIC) highlighting agencies not participating in HMIS; sample scripts; a FAQs document; & an HMIS guide to provide to agencies. 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, & providing information. 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 with more detailed information & steps to join the system. RLAs report status of activities by the 15th of each month. The FPS reviews report activities, evaluates progress, discusses challenges, & provides further resources to RLAs as needed. HMIS Lead staff provide regular updates on bed coverage rates & ongoing discussions with interested agencies.

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 February 15, 2022, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	01/26/2022
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	04/28/2022
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2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

	Describe in the field below how during the planning process for the 2022 PIT count your CoC:	
	1. engaged stakeholders that serve homeless youth;	
	2. involved homeless youth in the actual count; and	
	3. worked with stakeholders to select locations where homeless youth are most likely to be identified.	

(limit 2,500 characters)

1) In order to hold the PIT count at times & in locations where youth were most likely to be located, the CoC partnered with local youth programs, including afterschool programs, faith-based programs, LGBTQ+ agencies, & youth housing & services providers to plan & conduct the 2022 PIT count. The CoC also partnered with homeless liaisons to identify school-age youth who may not visit youth service programs. HMIS Lead staff presented to the full contingent of homeless school liaisons in the CoC to discuss & answer questions regarding the 2022 PIT count on 01/04/22. CoC staff provided a training to SEA & LEA staff, including homeless school liaisons on the CoC, its processes, & ways to collaborate including during youth counts in the annual PIT count on 01/27/22. 2) Youth with lived experience participated in PIT planning committees, & the CoC plans to expand the scope of youth participation in the 2023 PIT count. CoC staff will work closely with local Regional Committee stakeholders, including youth-centered programs, to identify youth willing & able to help plan for the annual count. 3) Stakeholders involved in planning the count, brainstormed & implemented specific initiatives to engage youth in locations specific to the population. The CoC advertised on social media to increase & build awareness of youth counts to elicit help in planning. The CoC counted outside school hours & when youth programs were operational to increase opportunities to find youth experiencing homelessness. Regional leaders engaged youth providers that had not counted in prior years & conducted counts in these facilities.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points. NOFO Section VII.B.5.a and VII.B.7.c.	
In the field below:		
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, if applicable; and	
3.	describe how the changes affected your CoC’s PIT count results; or	
4.	state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2022.	

(limit 2,500 characters)

1) The CoC did not make changes to its sheltered PIT count implementation or count methodology between 2021 & 2022. 2) The CoC updated its unsheltered PIT count methodology significantly in 2022 to better understand the scope of unsheltered homelessness & also ensure that people experiencing unsheltered homelessness (PEUH) better connect to services & housing. Traditionally, the CoC spent months planning the unsheltered PIT count, utilizing a myriad of resources including CoC & regional staff time, volunteer groups, donations, & others for one day of the year to identify & count PEUH but not adequately connecting them to services & housing. To ensure it effectively engages PEUH throughout the year & connect them to the resources they need, the CoC launched a new initiative in 06/21, creating a role in each of its 13 Regional Committees (RCs) called an Unsheltered Access Coordinator (UAC). UACs created local subcommittees to develop an unsheltered outreach & engagement plan defining how RCs would identify PEUH through both passive & assertive outreach; the frequency of outreach efforts; & the providers who conduct the CE assessment & enter data into HMIS. Passive outreach occurs daily at agencies participating in CE & weekly at agencies not participating through regional staff/volunteers. Each region defines their frequency of assertive SO but happens no less than quarterly. In 2022, the CoC leveraged this new process to count PEUH by using data through the HMIS CE By Name List (BNL) report. In the 7 days after the PIT count night, the UAC led a team to contact households listed on the BNL, verifying their place of residence on the night of the count. After the 7-day window, HMIS Lead staff pulled the BNL to count PEUH. In its first year under this method, the CoC likely undercounted PEUH due to the intense learning curve of the process. However, data quality on HHs included in the count improved dramatically because UACs & other providers engaging PEUH throughout the year created trusting relationships with HHs, allowing more accurate data collection. 3) Under the new unsheltered count method in 2022, the CoC counted approximately 2/3 of the number of PEUH from the last count in 2020. The CoC believes this is an undercount. However, the CoC has been refining the UAC process throughout the year in anticipation of the 2023 count, & by engaging PEUH throughout the year, more PEUH are engaging in services & accessing PH.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	In the field below:
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1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2.	describe your CoC’s strategies to address 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

(limit 2,500 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 and Diversion Screen and uses the data collected from the tool to evaluate common factors seen in HHs presenting for services. This allows programs to use diversion approaches, assisting people to problem solve to identify other PH resources rather than immediately entering shelter. 2) The CoC actively works to increase resources for diversion activities, including financial assistance & mediation services. The CoC received a multi-year Bezos Day 1 Families Fund (D1FF) grant to pilot diversion practices in three geographically diverse sites in the CoC. The funding targets HHs with children, allowing agencies to provide financial supports (e.g., hotel/motel costs, security deposits, rent arrears, transportation costs) to divert people from congregate shelter. In its second year, the D1FF shifted from a program to a community diversion approach whereby the CoC trained all community providers to understand and implement diversion practices, using a central financial assistance model to pay for needed supports. Funded communities have integrated this important resource into their coordinated entry systems, using case conferencing to prioritize HHs for financial assistance. The CoC contracted with The Listening Group to provide bi-monthly coaching to communities to learn how to successfully engage HHs & divert them from the system. The CoC will continue to evolve the pilot to evaluate strategies so it can leverage the experience & 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 & individual agencies to implement best practices, educate local providers on tools and mediation skills, & seek local resources for diversion efforts to reduce the number of first-time homeless HHs.

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section VII.B.5.c.	
	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe 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 2,500 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 standards focus on program design, ensuring projects follow Housing First tenets & other best practices (SAMHSA's PSH Key Elements, USICH's RRH Program Standards). CoC staff provide ongoing training on standards & pull HMIS data to evaluate progress on turnover rate, targeting, & positive exits. With the release of EHV's, the CoC entered into MOUs with PHAs, defining the following priority populations: a) HHs ready to Move On from PSH & RRH; b) HHs with the longest length of unsheltered homelessness & where documentation is unavailable. Exiting HHs from PSH & RHH creates flow in the system, freeing up program slots for HHs with long histories of homelessness. Prioritizing HHs with the longest LOTH with documentation issues that would prevent them from entering a funded PH program means providers can connect vulnerable HHs to PH resources more quickly. The CoC uses a data dashboard at monthly CoC Governance Board (GB) meetings, highlighting system performance measures, which allows the CoC to track current & historical client counts, system inflow/outflow, exits to PH, demographic breakdowns, HH progress, & others. The dashboard measures CoC-level as well as county data. CoC staff will introduce the dashboard to each of the CoC's 13 Regional Committees (RCs) in 2023. Staff will train local leadership on how to use the dashboard, facilitate discussions to develop local strategies to reduce LOTH, & measure progress over time. 2) CoC staff hold monthly calls with regional CE Leads to review the current regional By Name List (BNL) & discuss challenges. In advance of the meeting, staff pull several data points from the BNL including all HHs with LOTH longer than 364 days, comparing data month-to-month and annually to determine progress. All local CE systems hold regular case conferencing meetings, use BNLs that identify HHs with high vulnerability & long LOTH & connect them to available PH resources. 3) An NCCEH Project Specialist focuses exclusively on the CE system, working with regional 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—CoC's Strategy NOFO Section VII.B.5.d.	
In the field below:		
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.	

(limit 2,500 characters)

1) The CoC uses many strategies to increase the rate at which persons exit ES, TH, & RRH to PH destinations. Through written standards, the CoC sets termination/evaluation procedures, limiting the reasons for ending assistance to clients. CoC staff provide ongoing TA to providers on standards, working with program staff on difficult cases & providing guidance on ways to engage landlords/hard-to-house individuals to improve PH exits. CoC staff provide 6-month ES TA through a cohort model, bringing together ES to focus on NAEH's 5 Keys to Effective Shelter. Staff designed cohorts to educate ES on low-barrier models/housing-focused services; identify barriers needing removal; operationalize new low-barrier, housing-focused policies & procedures, & set bold 3-month goals to increase exits to PH. At the end of a 3-month intensive process, ES begin implementation of updated services, & staff meet with them monthly to evaluate progress on goals using the CAPER. CoC staff conduct 3-4 cohorts annually. The CoC evaluates shelter performance based on the following: 50% of people served by the ES have disabling conditions; median length of project participation is 30-60 days; & 40% of participants exit to permanent destinations. 2) The CoC currently has a 99% PH retention rate or exits to PH destinations in its PSH programs. The high rate is due to the CoC implementing a performance improvement 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 work with program staff to implement action plans, setting goals & timelines for improvement. The CoC has set PSH program benchmarks for all funded programs to evaluate performance: 25% of participants entered from a place not meant for human habitation (for existing projects); 75% of participants entered from a place not meant for human habitation or have a history of unsheltered homelessness (for new projects); 80% of participants exit to permanent destinations. In 2023, staff will begin quarterly calls with programs to evaluate APR performance data & provide TA to improve services, troubleshoot difficult cases, & set additional performance benchmarks & goals. During calls, staff will provide training as needed on Housing First approaches, Harm Reduction, & Trauma-Informed Care. 3) A Project Specialist from NCCEH oversees the CoC's strategy to increase the rate that people exit or retain PH.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe 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 2,500 characters)

1) The CoC used By Name List (BNL) data to identify HHs returning to homelessness. It evaluates HH & program data to determine common factors of HHs returning to the system & use these factors to help develop strategies to decrease returns. 2) The CoC prioritizes & targets limited homelessness prevention funding for return homelessness, meaning HHs that have a history of homelessness or that exited from RRH/PSH projects previously. The CoC advocated for & received support from the NC DHHS 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 funded rehousing programs, working with CE Leads & rehousing agencies to transition higher needs HHs at risk of returning to homelessness without continuing supports from RRH to PSH or available EHV. The CoC's number one priority for use of available EHV is for HHs to move on from PSH/RRH projects. This priority is especially important for RRH participants who cannot access PSH due to eligibility/availability & need continuing housing subsidy & supports to sustain permanent housing long-term. 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 provide 6-month ES TA through a cohort model, bringing together ES programs to focus on NAEH's 5 Keys to Effective Shelter. Staff designed cohorts to educate ES on low-barrier models/housing-focused services; identify barriers needing removal; operationalize new low-barrier, housing-focused policies & procedures, & set bold 3-month goals to increase exits to PH. At the end of a 3-month intensive process, ES begin implementation of updated services, & staff meet with them monthly to evaluate progress on goals using the CAPER. CoC staff conduct 3-4 cohorts annually. Housing-focused services training includes helping ES set-up HHs for long-term PH success, reducing returns to homelessness. 3) An NCCEH Project Director works with PH programs to improve performance. A NCCEH Project Specialist works with CE Leads on local CE implementation & oversees the CoC's BNL.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section VII.B.5.f.	

In the field below:	
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness 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 2,500 characters)

1) The CoC takes a dual approach to help households access employment & increase cash income. First, it has been engaging various stakeholders to help the CoC develop a comprehensive plan. The CoC facilitated a structured conversation with three other Balance of State CoCs to share strategic initiatives & models to connect households to employment. The CoC also has engaged the NCWorks Commission, designated as NC's Workforce Development Board, to discuss strategies that NC can better use to engage service providers in their work to connect households experiencing homelessness to sustainable, living wage employment. The NCWorks Commission can help the CoC connect to local Work Force Development Boards to initiate discussions & new initiatives. Second, the CoC connects locally to employment providers & services. 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 work procurement. In CY21, CoC-funded programs helped 9% of participants increase employment income. The CoC 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. 2) 100% of funded providers connect participants to mainstream employment programs. They collaborate with mainstream services such as VR, NCW, Goodwill, & DSS work programs to increase job placement, improve skills, mentor participants, & decrease barriers to work. The CoC encourages providers to formalize partnerships through MOUs, defining specific services each party will provide. 26% of the CoC funding portfolio lies with Managed Care Organizations (MCO). Each MCO has a Supported Employment program, helping clients with behavioral health issues find & maintain long-term employment. This program provides in-house supports to HHs in their PSH projects as well as to other PSH & RRH programs outside the MCO network. 3) A Project Specialist at NCCEH works with NC Workforce Development & local communities to help HHs increase income & access employment.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section VII.B.5.f.	
	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 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 who assist people with disabilities to navigate the often-complex SSA system to access disability benefits. The CoC sets non-employment cash income benchmarks in funding competitions, maximizing points for projects that increase non-employment cash income for 20% of HHs. 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 CY21, CoC-funded programs helped 35% of stayers & leavers increase non-employment cash income. 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, 21 caseworkers have been SOAR-trained, & the CoC has 16 active SOAR workers. Many CoC providers have formal relationships with local benefit specialists, inviting them into 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. 2) 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 all trained SOAR case workers in the state.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project 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?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	
	If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.	

Project Name	Project Type	Rank Number	Leverage Type
Project LIFE	PH-PSH	27	Both

3A-3. List of Projects.

1. What is the name of the new project? Project LIFE

2. Enter the Unique Entity Identifier (UEI): PAJSZFX6DWC4

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 27

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
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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 2,500 characters)
 N/A

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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
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3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section VII.C.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

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 2,500 characters)

N/A

4A. DV Bonus Project Applicants

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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 2022 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	Yes
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

4A-2.	Information About the Project Applicant for the New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)	

Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:

1.	Applicant Name	North Carolina Coalition to End Homelessness
2.	Project Name	NC BoS CoC DV Bonus SSO-CE
3.	Project Ranking on Priority Listing	31
4.	Unique Entity Identifier (UEI)	DLNXX954H879
5.	Amount Requested	\$500,000

4A-2a.	Addressing Coordinated Entry Inadequacies through the New SSO-CE DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)(c)	
	Describe in the field below:	
	1. the inadequacies of your CoC's current Coordinated Entry that limits its ability to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and	
	2. how the proposed project addresses inadequacies identified in element 1 of this question.	

(limit 2,500 characters)

1) Agencies serving survivors have varying levels of engagement in the CoC & even those agencies that do participate vary in their participation, especially when it comes to the CE system. Almost uniformly for those who do not participate & those with some, but not robust participation, center their concerns around safety & confidentiality. While the CoC's CE system uses a process to mask household identity with an identification number outside of HMIS, many agencies serving survivors hesitate to refer households to the regional CE Lead. CoC staff have found that outreach, handholding, & technical assistance can bring agencies serving survivors to the CE table more regularly. However, the current resources funding regional CE Lead activities across the CoC are not adequate to build the capacity necessary to specifically address survivor agency concerns, train staff, & engage agencies regularly. 2) The DV Bonus SSO-CE project will expand existing services to allow the CoC to better identify & connect survivors to the existing CoC CE system. The project will permit regional CE Leads to provide more ongoing technical assistance; regularly outreach & engage local VSPs; help VSPs to increase the number of survivor households being assessed & connected to CE & the By Name List; work more closely with VSPs to ensure the CoC maintains a safe, confidential, trauma-informed, & survivor-centered CE process; & capture & evaluate survivor data. The project will allow NCCEH to invest more deeply in CE Lead activities, providing enough funding in conjunction with its regular SSO-CE grant to staff a full-time, dedicated CE staff member in each of its 13 Regional Committees.

4A-2b.	Plan to Involve Survivors in Policy and Program Development in the New SSO-CE DV Bonus Project.	
	NOFO Section II.B.11.(e)(2)(d)	
	Describe in the field below how the new project will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.	

(limit 2,500 characters)

As part of its annual CE evaluation, the CoC surveys participating provider agencies, people who have enrolled in rapid rehousing & permanent supportive housing programs in the last year, & people currently experiencing sheltered or unsheltered homelessness. People living in PH have experienced every aspect of the CE system & confidential surveys ask participants to evaluate the services they received through CE, including feedback on how to improve the system. The CoC surveys people experiencing homelessness during the annual evaluation process, offering them an opportunity to highlight the types of assistance that would be most helpful & how well the system provides those services or resources. Surveys for all populations, housed or unhoused, ask questions about the effectiveness of the system to connect people to emergency/permanent housing & services, communication of providers including expectation setting, & the timeframe for connecting to PH resources. VSPs participating in CE survey participants at their shelters & PH providers survey survivors moving into PH over the prior year. As a newly DV Bonus-funded RRH provider, the NC Coalition Against Domestic Violence (NCCADV) will work closely with their subrecipients to gather feedback from survivors moving into PH through their program. As an agency experienced working with survivors with a trauma-informed, survivor-centered approach, NCCADV, as the administrator of the program, will regularly survey survivors, conduct focus groups, & provide other feedback opportunities. NCCADV staff sit on the CoC's CE Council (CEC), which oversees, evaluates, & develops policies & procedures for the system. NCCADV will share feedback & general findings from survivors with the CEC, allowing the subcommittee to reflect survivor input in the ongoing development of the CE system's operation.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section II.B.11.(e)(1)(c)	

1.	Enter the number of survivors that need housing or services:	5,987
2.	Enter the number of survivors your CoC is currently serving:	1,957
3.	Unmet Need:	4,030

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

Describe in the field below:		
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
2.	the data source (e.g., comparable databases, 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 2,500 characters)

1) The North Carolina Council for Women (CFW), a statewide agency advising the Governor’s Office & NC General Assembly on women’s & 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 07/01/20 - 06/30/21 shows 5,987 people in the CoC’s geographic area seeking services & housing due to domestic 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 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 & housing stabilization services to house each survivor household.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	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-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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 2022 Priority Listing:

1.	Applicant Name	North Carolina Coalition Against Domestic Violence
2.	Project Name	Safe at Home Expansion
3.	Project Rank on the Priority Listing	32
4.	Unique Entity Identifier (UEI)	VNQRA1PBV5H6
5.	Amount Requested	\$984,383
6.	Rate of Housing Placement of DV Survivors–Percentage	70%
7.	Rate of Housing Retention of DV Survivors–Percentage	100%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1) In 2020/2021, the NC Coalition Against Domestic Violence (NCCADV), through state funding & private donations, developed a housing assistance programs for survivors. Households worked directly with NCCADV staff to identify their financial assistance & service needs, & the agency provided short-term rent, utility, & other housing financial assistance to place survivors in permanent housing. NCCADV calculated the rate of placement based on the total number of eligible households granted financial assistance divided by the total number of households asking for assistance. NCCADV calculated the rate of retention based on the number of households who re-engaged with NCCADV for additional financial assistance. No households or partners VSPs contacted NCCADV for additional assistance. 2) All households housed through the program were housed in safe locations chosen by the household. 3) NCCADV used an internal database to collect relevant information from households helped through the program. NCCADV used this internal database to aggregate data for reporting this data for the application.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved 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.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,500 characters)

1) The NC Coalition Against Domestic Violence (NCCADV) contacts applicants needing housing assistance, conducting intake to determine the survivors 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. 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. 3,4) NCCADV designed its program using Housing First tenets, not requiring survivors to accept services to receive assistance. However, upon intake, staff worked with survivors to identify which supportive services they needed, including DV services, healthcare, & food assistance. NCCADV worked with local VSPs & other providers in communities in which the survivor lived to make a warm handoff to connect HHs appropriately. 5) NCCADV provided rent & utility assistance to applicants with identified housing, communicating the short-term nature of financial resources. Upon intake, staff worked with survivors to identify which supportive services they needed, including DV services, healthcare, & food assistance. NCCADV worked with local VSPs & other providers in communities in which the survivor lived to make a warm handoff to connect HHs appropriately. Providers connected HHs to longer term housing assistance such as Housing Choice Vouchers, Emergency Housing Vouchers (through the local CE system), 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-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:		
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

1) The NC Coalition Against Domestic Violence (NCCADV) staff conducted intakes virtually & by phone. NCCADV requires all staff to have secure internet connections & use encrypted communications. 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. 2) Eligible applicants chose their own housing, which had been identified at the time of intake. Staff asked questions during intake to determine client safety & appropriateness of chosen housing. 3) Applicants chose their own housing, which had 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 live or congregate. 4) All NCCADV staff working on the housing program received training in & have prior experience in DV safety planning, including attending the Advocate’s Institute. 5) Applicants chose their own housing, which had been identified at the time of intake. Staff asked questions during intake to determine client safety & appropriateness of chosen housing.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

The NC Coalition Against Domestic Violence (NCCADV) prioritizes the safety of survivors in all aspects of its work, from training staff in safety planning & protocols to providing technical assistance to NC VSPs, homeless & housing service providers, & community partners to educate the general public on the scourge of DV & how everyone can assist survivors find safety. To ensure that it provided excellent trauma-informed, survivor-centered services centered around safety, NCCADV evaluated its direct housing assistance program. The agency did this in several ways: gathering direct feedback from people the agency served through conversations, surveys, & focus groups; providing opportunities for anonymous feedback; enlisting feedback from the NC Victim Services Provider Network on NCCADV's strengths & challenges & what the agency could do better to provide services & support; & soliciting feedback from community partners & engaging them directly in planning & program/agency policies & procedures. NCCADV staff, leadership, & Board used this information & feedback in its ongoing evaluation of the effectiveness of programming to provide safety to survivors. The agency continually adjusted, improved, & updated policies, relying on data, feedback, & national best practices to improve safety over time. With the end of this housing assistance program, NCCADV used feedback to inform the next phase of its housing work. NCCADV received a DV Bonus RRH grant in the FY21 CoC competition. The agency's lessons learned providing shallow financial support along with services provided locally with partner agencies not contracted for their work informed NCCADV in how to structure the new RRH project. NCCADV, through an RFP, selected local VSPs to provide housing navigation services, financial assistance, & housing stabilization services locally to permanently house prioritized survivors from the CE system. More structured support from agencies contracted & funded to do the work with HHs locally will provide more robust & tailored services, increasing long-term safety of survivor HHs. NCCADV's new DV Bonus RRH projects will begin 10/01/2022.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:		
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
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 the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

1) Participants secured housing in communities where they felt safe, had support, & could access services. The NC Coalition Against Domestic Violence (NCCADV) provided rent & utility assistance to eligible applicants within 2 weeks of application. 2) NCCADV hires staff with experience providing trauma-informed care & trains them in survivor-driven provisions based on a foundation of respect & valuing survivors' experience, strengths, & agency. The project does not use punitive measures, relying on a Housing First approach that offers services & housing assistance yet allowing households to determine which services & housing to accept based on their own needs & desires. In all of its housing-related work, the provision of housing & services remains separate with households able to access & keep housing whether they accept services or not. 3) NCCADV takes a trauma-informed approach to conversations with survivors, helping them to understand the short- & long-term effects of trauma on themselves, their children, & the decisions they make every day. NCCADV connected participants to local services including trauma-informed, survivor-centered DV services. When needed, NCCADV provided funding for therapy to survivors. 4) NCCADV operates on a foundation of mutual respect with survivors. NCCADV trusts survivors are experts in their own experience, holds space for trauma they have endured, & relies on innate strengths & assets to guide services. NCCADV recognizes that seeking assistance is a brave & vulnerable act, needing acknowledgement & support. NCCADV & its partner VSPs use several tools to help participants identify their strengths including, but not limited to, staff trained in strengths-based coaching; standardized assessment tools; & survivor-centered planning focused on household strengths to guide short- & long-term goals. 5) NCCADV provides services with cultural sensitivity & responsiveness to survivor experiences & integrates strengths-based, survivor-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. NCCADV trains its staff & partner VSPs on equity, cultural responsiveness, safety planning, & trauma-informed care; holds funded agencies to equal access rules, protecting people identifying as LGBTQ+ and gender nonconforming; provides access to differently abled people or non-English speaking people through a language line or local advocates. 6) NCCADV's housing assistance program maintained confidentiality, providing light touch, short-term assistance & services, relying on its network of VSPs across NC to provide trauma-informed, survivor-centered services & connecting survivors to local therapy, mainstream resources, & other assistance in places where survivors live. VSPs provide these services in a variety of ways including, but not limited to, peer support from people with lived experience of interpersonal violence; individual & group therapy sessions & learning opportunities; connections to local faith communities; & opportunities to volunteer in agency programs. 7) NCCADV's housing program connected participants to local services through a network of VSPs & other providers, including but not limited to, funding for family therapy, childcare services, parenting classes, mainstream benefits (TANF, WIC), & homeless school liaisons for educational services.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

(limit 5,000 characters)

The NC Coalition Against Domestic Violence (NCCADV) hires staff with experience providing trauma-informed care & trains them in survivor-driven provisions based on a foundation of respect & valuing survivor’s experience, strengths, skills, & agency. NCCADV takes a trauma-informed approach to conversations with survivors. NCCADV provided rental & utility assistance 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 the household would live, including but not limited to, funding for family therapy, trauma-informed, survivor-centered DV services, childcare services, parenting classes, & mainstream benefits (TANF, WIC, SNAP). Local VSPs through referrals from NCCADV connected families with school age children to the local McKinney-Vento funded homeless 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 household 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, & handle other family justice needs.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

Provide examples in the field below of how the new project will:

- | | |
|----|--|
| 1. | prioritize placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs; |
| 2. | establish 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. | provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma; |
| 4. | emphasize program participants’ strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations; |
| 5. | center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed; |
| 6. | provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 7. | offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services. |

(limit 5,000 characters)

1) After referrals from CE, subrecipient agencies (SA) will conduct intake to discuss survivor needs/preferences regarding location of housing; proximity to jobs, services, schools, & support networks; public transportation; safety/security needs; housing type & size; accessibility needs; needs for children/pets; & others. SA will provide survivor-driven services, collaborating with households to secure services/housing 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 survivor's expertise in their own experiences. SA will try to eliminate barriers, holding space for the trauma survivors have endured, having conversations about the short- & long-term effects of trauma, & helping survivors identify & utilize their strengths to build household agency to make decisions for themselves. SA meet survivors where they are, understanding that valid reasons exist they might remain in an abusive relationship & need to make their own decisions of how & when to make change. NCCADV's project will use a Housing First approach that offers services & housing assistance, allowing households to determine which services & housing to accept based on their own needs & desires. In all of its housing work, the provision of housing & services remains separate with households able to access & keep housing whether they accept services or not. NCCADV & its subrecipients use several tools to help participants identify their strengths including, but not limited to, staff trained in strengths-based coaching; standardized assessment tools; & survivor-centered planning focused on household strengths to guide short- & long-term goals. 3) SA have resources to share with survivors on trauma & local connections to help process it when ready. SA will provide direct & referral resources for therapy, support groups, mental health & substance abuse treatment, & services for children exposed to violence. NCCADV & SA will take a trauma-informed approach to conversations with survivors, helping them to understand the short- & long-term effects of trauma on themselves, their children, & the decisions they make every day. 5) NCCADV will provide training & TA to SA on cultural sensitivity, responsiveness, equity, inclusivity, safety planning & trauma-informed care. 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. NCCADV will provide oversight to ensure SA incorporate these essential components as part of program services; hold them to equal access rules; adequately protect people identifying as LGBTQ+ & gender nonconforming; and provide access & services to differently abled people & non-English speaking persons. 6) SA have strong ties locally with programs & community-based groups that will provide opportunities to help participants form meaningful, healthy relationships. SA will assist survivors to access these opportunities in a variety of ways including, but not limited to, peer support from people with lived experience of interpersonal violence; individual & group therapy sessions; connections to faith communities; & opportunities to volunteer in agency programs. SA with NCCADV's assistance will educate local providers on the specific needs of survivors & how to serve them with a trauma-informed, survivor-centered approach. 7) SA provide or refer survivors with children to local resources, including family therapy; childcare services; parenting classes; & mainstream benefits (TANF, WIC, SNAP). SA also will always connect families with school age children to the local McKinney-Vento funded homeless school liaisons to ensure children have access to eligible services including transportation from home to the child's school of origin.

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(f)		

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

(limit 2,500 characters)

The NC Coalition Against Domestic Violence (NCCADV) understands that including survivors with a range of lived experience in policy & program development is essential to the RRH program success to meet survivor's urgent & long-term needs. To ensure the program provides excellent trauma-informed, survivor-centered services centered around safety, NCCADV evaluates its programs regularly & includes feedback from people with lived experience who have navigated the CoC system & NCCADV's programs. The agency does this in several ways: gathering direct feedback from people the agency served through conversations, surveys, & focus groups; providing opportunities for anonymous feedback; enlisting feedback from the NC Victim Services Provider Network on NCCADV's strengths & challenges & what the agency could do better to provide housing, services, & support; & soliciting feedback from community partners & engaging them directly in planning & program/agency policies & procedures. NCCADV staff, leadership, & Board will use this information & feedback in its ongoing evaluation of the effectiveness of the RRH program. NCCADV will work with its subrecipients to continually adjust, improve, & update policies, relying on the data, feedback, & national best practices to improve safety & effectiveness over time. NCCADV will also work closely with NCCEH, as the Collaborative Applicant, to update the annual CoC CE evaluation process to ensure that survivors who use or have used the system answer questions specific to survivor & DV-targeted programs, including the DV Bonus RRH program. Through some adjustments to surveys & data collection methods, the CE evaluation process will allow NCCADV & CoC to understand how survivors interact with CE, the effectiveness of the assessment & referral process, the prioritization of survivors in the system, & gather data such as the length of time it takes for survivors to access housing. NCCADV staff on the CE Council along with CoC staff will share evaluation results with CE leaders & work to update processes that affect survivors' ability to connect with PH resources & other necessary services to maintain their safety.

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

- | | |
|----|---|
| 1. | You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete. |
| 2. | You must upload an attachment for each document listed where 'Required?' is 'Yes'. |
| 3. | We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube. |
| 4. | Attachments must match the questions they are associated with. |
| 5. | Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. |
| 6. | If you cannot read the attachment, it is likely we cannot read it either. |
| | . 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). |
| | . We must be able to read everything you want us to consider in any attachment. |
| 7. | After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include. |

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/18/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/18/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/18/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/20/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Forms for ...	09/18/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notice to Project...	09/18/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/23/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Projects Sc...	09/18/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting - CoC...	09/27/2022
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/27/2022
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/18/2022

3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/19/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notice to Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Projects Scores for All Projects

Attachment Details

Document Description: Web Posting - CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare 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	09/17/2022
1B. Inclusive Structure	09/23/2022
1C. Coordination and Engagement	09/23/2022
1D. Coordination and Engagement Cont'd	09/23/2022
1E. Project Review/Ranking	09/23/2022
2A. HMIS Implementation	09/19/2022
2B. Point-in-Time (PIT) Count	09/23/2022
2C. System Performance	09/23/2022
3A. Coordination with Housing and Healthcare	09/19/2022
3B. Rehabilitation/New Construction Costs	09/19/2022
3C. Serving Homeless Under Other Federal Statutes	09/19/2022

4A. DV Bonus Project Applicants	09/23/2022
4B. Attachments Screen	09/27/2022
Submission Summary	No Input Required

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 not 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 through 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.

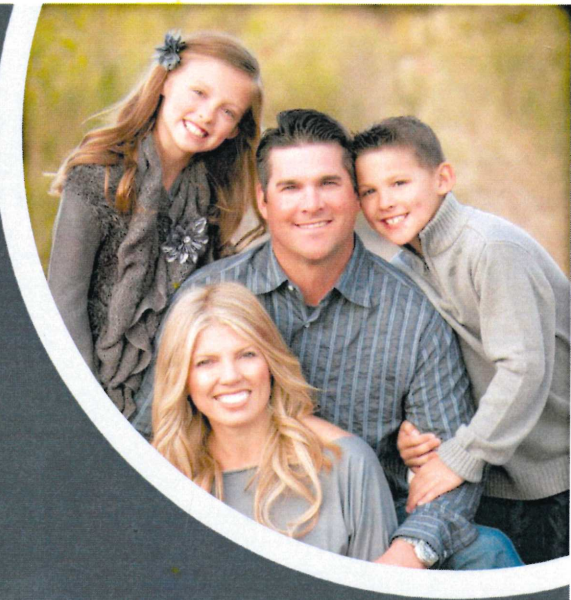
4-III.F. COMPLETING THE APPLICATION PROCESS

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 through 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.

FY22 Continuum of Care Competition Instructions and Timeline



NC Balance of State CoC <bos@ncceh.org>

2:02 PM (0 minutes ago) ☆ ↶ ⋮

to boslist, bos, Tameka, LaTasha, Tujuanda, Michael, Mitch, Teresa, bchartrand, Cassie, Matthew, Teena, Bonnie, Lynne, Amy, Kristen, Kristin, Amy.Modlin@TrilliumNC.org, Talaika, Melissa, Sarah, Lori, Kerry, Trishonda, Emily, tamara

Good afternoon, NC Balance of State CoC Stakeholders!

As mentioned in our previous communication, HUD released the FY22 Continuum of Care Notice of Funding Opportunity (NOFO) yesterday with a final submission date of September 30, 2022.

To prepare you for the competition, CoC staff have posted all instructions and required forms to our website this afternoon at <https://www.ncceh.org/bos/currentcocapplication/> under the Project Application Instructions and Required Forms dropdown menu. Before beginning any application, please read the NOFO posted at <https://www.ncceh.org/files/12441/> and the CoC's project applicant instructions. With less than two months until the final submission date, the CoC has tight timelines for you to complete and submit your applications and supplemental materials.

HUD has not yet opened esnaps for the competition. If you're new to esnaps, you should go ahead and create your agency and user accounts, but you will not have access to the Project Application. No one should wait until esnaps opens to get started. Start working on the other materials and forms that are available for you now on the website. Once the Project Application is open in esnaps open, we will let everyone know so that you begin your online application(s).

The CoC has set the following timeline for this year's competition:

<i>FY22 CoC competition instructions released and posted on the website</i>	<i>08/02</i>
<i>Intent to apply deadline</i>	<i>08/10 at 6 PM</i>
<i>1st submission deadline</i>	<i>08/12 at 6 PM</i>
<i>Project Review Committee Orientation Webinar</i>	<i>08/18 at 10 AM</i>
<i>2nd submission deadline</i>	<i>08/19 at 6 PM</i>
<i>Application Scoring</i>	<i>08/22-08/30</i>
<i>Project Review Committee Selection Meeting</i>	<i>09/02 at 10 AM</i>
<i>Special Steering Committee Approval Meeting</i>	<i>09/06 at 10:30 AM</i>
<i>Applicant Notification</i>	<i>09/06</i>
<i>Appeals Due</i>	<i>09/08 at 12 PM</i>
<i>Project Review Committee Appeals Meeting (tentative)</i>	<i>09/09 at 10 AM</i>
<i>Regular Steering Committee Meeting (Appeals)</i>	<i>09/13 at 10:30 AM</i>
<i>Post FY22 CoC Application (tentative)</i>	<i>09/23</i>
<i>Submit FY22 CoC Application (tentative)</i>	<i>09/27</i>
<i>FY22 CoC Application Deadline</i>	<i>09/30 at 8 PM EST</i>

If you have any questions or need assistance with your application, please reach out to CoC staff at bos@ncceh.org.

Thank you!
NC Balance of State CoC Team
North Carolina Coalition to End Homelessness

Project Application Instructions and Required Forms

[CoC New Application Detailed Instructions](#)
[CoC Renewal Application Detailed Instructions](#)

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
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 NCCOH and then submitted together as one packet by NCCOH staff. Applicants must mail the hard copy of the form to the address below by TBC:
NCCOH, PO Box 27092, Raleigh, NC 27611

Determination of Certification for Non-PIA
Determination of Certification for PIA

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-2990) 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.

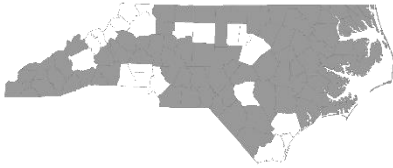
Renewal PSH Applicant Form
Applicants requesting renewal PSH grants must complete this form and submit it with their application.

New RRH Applicant Policies and Procedures Page Reference Form
Applicants requesting new RRH grants must complete this form and submit it with their application.

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

New Project Threshold 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.



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

2022 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:

1. 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).
2. 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.
3. 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).
4. 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)	<input type="checkbox"/> PH:PSH	<input type="checkbox"/> PH:RRH	
	<input type="checkbox"/> TH-RRH (DV)	<input type="checkbox"/> 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: 163
RRH: 144
TH-RRH: 144
SSO-CE: 97

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. The 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? <i>[New Project Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided	
1.1b	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? <i>[New Project Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> 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? <i>[Proj. App: 3B, Project Application Detailed Instructions]</i>	3	
1.2b	PSH, RRH, TH-RRH only: Do the answers regarding services address all parts of the detailed instructions? <i>[Proj. App: 4A, Project Application Detailed Instructions]</i>	3	
1.2c	PSH, RRH, TH-RRH only: Do the answers regarding outreach address all parts of the detailed instructions? <i>[Proj. App: 5C, Project Application Detailed Instructions]</i>	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	<p>New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe:</p> <ul style="list-style-type: none"> • 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 <p><i>[New Project Form]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet</p> <p><input type="checkbox"/> unmet, documentation not provided</p>	
2.1a	<p>SSO-CE only: Will the CE process funded in part by this grant cover the CoCs entire geographic area?</p> <p><i>[Proj. App. Sec. 3B, Q4A]</i></p>	<p>Threshold</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet</p> <p><input type="checkbox"/> unmet, documentation not provided</p>	
2.1b	<p>SSO-CE only: Does the advertisement strategy ensure the CE process reaches survivors of DV with the highest barriers to access?</p> <p><i>[Proj. App. Sec. 3B, Q4C]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet</p> <p><input type="checkbox"/> unmet, documentation not provided</p>	
2.1c	<p>SSO-CE only: Does the CE project indicate that it will tie into the existing NC BoS CoC CE system in each region?</p> <p><i>[Proj. App. Sec. 3B, Q4E]</i></p>	<p>Threshold</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>	
2.1d	<p>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)?</p> <p><i>[Proj. App. Sec. 6]</i></p>		
	Less than 50%	0	
	50-84%	5	
	85-100%	15	
2.1e	<p>SSO-CE only: Does the project maximize the use of cash match versus in-kind match (cash match total / total match amount)?</p> <p><i>[Proj. App. Sec. 6]</i></p>		
	Less than 25%	0	
	25-74%	5	
	75-100%	10	



2.1f	<p>TH-RRH only: Does the New Project Form describe the TH portion of the project as bridge housing (at least monthly offers of PH placement, housing-focused services)? <i>[New Project Form]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
2.1g	<p>TH-RRH only: Does the program adequately demonstrate that both TH and RRH are available to all participants when needed or desired? <i>[Proj. App. Sec. 3B, Q1, Proj. App. Sec. 6]</i></p>	<p>Threshold</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Targeting to Prioritized Subpopulations		
2.2a	<p>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.</p> <p>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?</p> <p>This project targets:</p> <ul style="list-style-type: none"> <input type="checkbox"/> People experiencing chronic homelessness <input type="checkbox"/> People who identify as LGBTQ <input type="checkbox"/> People with histories of institutionalization, incarceration, or foster care <input type="checkbox"/> Veterans <input type="checkbox"/> Survivors of domestic violence <input type="checkbox"/> Unaccompanied or parenting youth 18-24 <p><i>[Program policies and procedures]</i></p>	<p>No specific targeting: 0 points Targeted program: 5 points</p>
2.2b	<p>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. <i>[Written statement for leasing application]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
2.2c	<p>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</p>	<p>Threshold</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>



	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).	
PSH, RRH, TH-RRH Only: Services Resource Leverage Plan		
2.3	<p>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.</p> <p>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:</p> <ul style="list-style-type: none"> • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services specifically 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	<p>Does this project use a Housing First approach? Must meet all statements <i>in 2.1b and 2.1c</i> 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]</p>	<p>Threshold (must meet all statements in 2.1b and 2.1c below)</p> <p><input type="checkbox"/> met (2 of 2 met) <input type="checkbox"/> unmet (1 or more missed)</p>
2.4b	<p>The project does not screen out for:</p> <p><input type="checkbox"/> Having too little or no income <input type="checkbox"/> Active or history of substance abuse <input type="checkbox"/> Having a criminal record (with exceptions for state mandated restrictions)</p>	<p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided</p>



	<input type="checkbox"/> History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement)	
2.4c	<p>Does the project ensure that participants are not terminated from the program for the following reasons:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Failure to participate in supportive services <input type="checkbox"/> Failure to make progress on a service plan <input type="checkbox"/> Loss of income or failure to improve income <input type="checkbox"/> Domestic violence <input type="checkbox"/> Any other activity not covered in a lease agreement typically found in the project's geographic area <input type="checkbox"/> Failure to maintain recovery 	<input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided
<p>PSH Projects Only: Key Elements of Permanent Supportive Housing PSH projects should meet these 9 standards set forth by SAMHSA, however, they do not need to be explicitly outlined in the Program Policies & Procedures in order to meet the standard.¹</p>		
2.5a	<p>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. <i>[Sample lease]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>	
2.5b	<p>Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>	
2.5c	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>	

¹ <https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pdf>



2.5d	<p>Housing is not time-limited, and the lease is renewable at tenants' and owners' option. <i>[Program policies and procedures, sample lease]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		
2.5e	<p>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. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		
2.5f	<p>As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		
2.5g	<p>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. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		
2.5h	<p>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 establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		



2.5i	The provision of housing and the provision of support services are distinct. <i>(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).</i> [Program policies and procedures]	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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 Rapid Re-Housing projects should encompass 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]	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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]	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
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	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A

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



	can negotiate additional supports, as needed, on a case-by-case basis. <i>[Program policies and procedures]</i>	<input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>(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.)</i> <i>[Program policies and procedures]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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



	<p>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. <i>[Program policies and procedures]</i></p>	<input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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	<p>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. <i>(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).</i> <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c2	<p>When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. <i>(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).</i> <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c3	<p>Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6c4	<p>Program has clearly defined policies and objective standards for when case management should continue and end. These</p>	Standard



	<p>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. <i>[Program policies and procedures]</i></p>	<input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d2	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d3	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.6d4	<p>Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. <i>[Program policies and procedures, sample lease]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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: 16 SSO-CE: 6 Minimum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 10 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? <i>[PSH, RRH, TH-RRH Proj. App: 4A Question 2; SSO-CE Proj. App: 3B, Q4E]</i>	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? <i>[Proj. App: 4A Question 3]</i>	5	
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? <i>[Proj. App: 4A Question 3]</i>	5	



Section IV: Equity

Section IV Score

Possible Points: 29			
Minimum Points Required or Review is Triggered: 16			
4.1	Does the applicant provide guidelines/program rules in other languages besides English? <i>[Guidelines/Program Rules in another language]</i>	5	
4.2	Does the applicant have client-facing bilingual staff? <i>[New Project Form]</i>	5	
4.3	Does the applicant have an arrangement for interpreter services? <i>[Provide a MOA/MOU or other agreement with interpreter service]</i>	5	
4.4	Does the applicant have an Anti-discrimination Policy in full compliance with the NC BoS CoC? <i>[Program policies and procedures]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
4.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? <i>[New Project Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
4.6	Has the agency sent staff to an external training for Racial Equity or Anti-Discrimination in the last 12 months? Examples include the Racial Equity Institute trainings or United Way's 21 Day Challenge for Racial Equity. Attending The NC BoS CoC Racial Equity Dialogue Series is encouraged but does not count as an external staff training. 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). <i>[New Project Form]</i>	5	
4.7	Does the applicant have an equal access hiring clause in job postings? <i>[Example Job Posting]</i>	2	
4.8	(For nonprofit agencies only) Do individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of your Board of Directors? <i>[New Project Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
4.9	(For nonprofit agencies only) How many members of your Board of Directors have experienced homelessness? <i>[New Project Form]</i>		
	20% or Above	2	
	Less than 20%	0	



4.10	What percentage of managers or director-level positions are Black, Indigenous, or People of Color? Position descriptions must include supervising other staff, payroll, or HR duties. [New Project Form]		
	20% or above	5	
	Between 10 - 20%	2	
	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? <i>[Priority 1, 2, 3, or no priority, based on the 2019 CoC Funding Priorities document]</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 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)? <i>[Proj. App: 3B; New Project Form]</i>	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? <i>[Proj. App: 3B; New Project Form; New Project Form]</i>	2	
Agency Stability			
5.3	Non-profits only: Has the agency been in operation for at least three years? <i>[Proj. App: 3B; non-profit documentation]</i>	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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 demonstrate instability may result in the agency not meeting requirements). <i>[Budget vs actual profit and loss statement for the last two fiscal years; agency detailed budget]</i>	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided	
5.5	Non-profits only: Does the agency have the financial capacity to operate this project on a reimbursement basis? <i>[Agency detailed balance sheet]</i>	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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? <i>[Board list and minutes]</i>	<p style="text-align: center;">Threshold</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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? <i>[Proj. App: 3B and 4A; organizational chart; New Project Form]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided	
5.8	Does the agency have at least one active SOAR case manager? <i>[NC SOAR program records]</i>	2	
Administrative Capacity		Possible Score	Project Score
5.9	Is the administrative staff separate from the services staff? <i>[Organizational chart: where does the CoC grant get executed and what staff is working on it; New Project Form]</i>	3	
5.10	Is funding for the administrative staff stable? Is there adequate administrative staff to ensure agency stability throughout program implementation? <i>[New project form; Budget vs actual profit and loss statement]</i>	3	



Section VI: Project Performance

Section VI Score

Possible Points Added: PSH: 65 RRH and TH-RRH: 46

Possible points subtracted: -15

Minimum Points Required or Review is Triggered: PSH: 33

RRH and TH-RRH: 24 (if section is scored)

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2021 to December 31, 2021, 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? <i>[Q13a2 divided by total enrolled]</i>		
	Less than 25%	0	
	25%-49%	5	
	Above 50%	10	
6.1b	PSH Projects: What percentage of households served by the project were chronically homeless? <i>[Custom HMIS Report]</i>		
	Less than 50%	0	
	50-74%	2	
	75-100%	4	
6.1c	Did 100% of program participants enter the program from an eligible situation? <i>[CoC APR Q15 - if participants found ineligible, staff will follow up with grantee to determine eligibility]</i>		
	No	-5	
	Yes	0	
6.1d	RRH projects: what percentage of exits were to a permanent housing destination? <i>[CoC-APR 23a/b]</i>		
	Less than 70%	0	
	70-80%	5	
	Above 80%	15	
6.1e	What percentage of exits were to a known destination? <i>[CoC-APR 23a/b]</i>		
	0-94%	0	
	95 or higher%	1	
6.1f	PSH projects: what percentage of exits were to a permanent housing destination? <i>[CoC-APR 23c.]</i>		
	No exits	5	
	Below 80%	0	
	80% or higher	15	



6.1g	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
		<10%	0
		10-15%	5
		15-20%	10
		Above 20%	15
6.1h	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
		<10%	0
		10-15%	5
		15-20%	10
		Above 20%	15
6.1i	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%	2
		15-20%	5
		20+%	10
HMIS/Comparable Database Participation		Possible Score	Project Score
6.2	Are all of the agency's projects that are listed in the 2021 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 <input type="checkbox"/> met <input type="checkbox"/> unmet	
6.3b	Previous Project Spending Rates These questions are for agencies with CoC projects that have been operating for at least one year at the time of the NOFO 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 <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided



Section VII: Agency's Relationship to Community		Section VII Score	
Possible Points: 15 Minimum Points Required or Review is Triggered: 5			
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? <i>[Regional Lead verification, Steering Committee minutes]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> 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 <i>[Minutes, Regional Lead verification]</i>	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided	
6.3	Currently or within past year, serves/served in one of the regional leadership roles or Steering Committee leadership.	5	
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. <i>[New Project Form]</i>	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided	
6.5	Applicant accurately describes the process to take referrals through coordinated entry. <i>[New Project Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A	
6.6	Do all of applicant's projects on the 2021 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. <i>[Interview with region's Coordinated Entry Lead and applicant]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A	



Current PSH, RRH Grantees: VI-SPDAT		
6.7	Does the program have a VI-SPDAT score for every new admission during the 2021 calendar year? <i>[New project form]</i>	
	Yes	5
	No/N/A	0
6.8	Does the program have VI-SPDATs for all new admissions during the 2021 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? [<i>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.</i>]	Standard <input type="checkbox"/> met <input type="checkbox"/> 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 NOFO 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 <input type="checkbox"/> met <input type="checkbox"/> unmet	
7.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold <input type="checkbox"/> met <input type="checkbox"/> unmet	





North Carolina Balance of State Continuum of Care

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2022 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:

1. 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).
2. 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.
3. 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).
4. 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)	<input type="checkbox"/> PH:PSH	<input type="checkbox"/> 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 for the project to be eligible for funding.	Maximum Score Possible:
	PSH: 184 RRH: 156
	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. The 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? <i>[Proj. App: 3B, Project Application Detailed Instructions]</i>	3	
1.2	Do the answers regarding services address all parts of the detailed instructions? <i>[Proj. App: 4A, Project Application Detailed Instructions]</i>	3	
1.3	Do the answers regarding outreach address all parts of the detailed instructions? <i>[Proj. App: 5C, Project Application Detailed Instructions]</i>	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	<p>Does this project use a Housing First approach? <i>Must meet all statements in 2.1b and 2.1c below to meet standard. Program should not have any policies 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.</i> <i>[Program policies and procedures; sample lease]</i></p>	<p>Standard (must meet all statements in 2.1b and 2.1c below)</p> <p><input type="checkbox"/> met (2 of 2 met) <input type="checkbox"/> unmet (1 or more missed)</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.1b	<p>The project does not screen out for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Having too little or no income <input type="checkbox"/> Active or history of substance abuse <input type="checkbox"/> Having a criminal record (with exceptions for state mandated restrictions) <input type="checkbox"/> History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement) 	<p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.1c	<p>The project does not terminate people from the program for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Failure to participate in supportive services <input type="checkbox"/> Failure to make progress on a service plan <input type="checkbox"/> Loss of income or failure to improve income <input type="checkbox"/> Domestic violence <input type="checkbox"/> Any other activity not covered in a lease agreement typically found in the project's geographic area <input type="checkbox"/> Failure to maintain recovery 	<p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		



Key Elements of Permanent Supportive Housing		
PSH projects should meet these 9 standards set forth by SAMHSA . However, they do not need to be explicitly outlined in the Program Policies & Procedures in order to meet the standard. ¹		
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. <i>[Sample lease]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures, sample lease]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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. <i>[Program policies and procedures]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
Reviewer Notes (if unmet or documentation not provided, note why):		

¹ <https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pdf>



2.2g	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.2h	<p>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 establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.2i	<p>The provision of housing and the provision of support services are distinct. <i>(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).</i></p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
<p>Rapid Re-Housing Performance Benchmarks and Program Standards</p> <p>Rapid Re-Housing projects should encompass 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.</p>		
2.3a	<p>Core Program Standard: Housing Identification</p>	
2.3a1	<p>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,</p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>

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



	<p>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. <i>[Program policies and procedures]</i></p>	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a2	<p>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. <i>[Program policies and procedures]</i>.</p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a3	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a4	<p>Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		
2.3b2	<p>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. <i>(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).</i> <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
<p>Reviewer Notes (if unmet or documentation not provided, note why):</p>		



2.3b3	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3c	Core Program Standard: Rapid Re-Housing Case Management and Services	
2.3c1	<p>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. <i>(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).</i></p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3c2	<p>When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. <i>(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).</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>



	<i>[Program policies and procedures]</i>	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c3	<p>Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3c4	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> 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	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3d2	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A <input type="checkbox"/> unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



2.3d3	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3d4	<p>Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed.</p> <p><i>[Program policies and procedures, sample lease]</i></p>	<p style="text-align: center;">Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
PSH and RRH: Services Resource Leverage Plan		
2.4	<p>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.</p> <p>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:</p> <ul style="list-style-type: none"> • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services specifically 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

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.³

2.5	<p>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:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; <input type="checkbox"/> A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); <input type="checkbox"/> A method to prepare tenants to move-on and exit planning procedures; <input type="checkbox"/> A method to link moving-on tenants to mainstream services and supports; <input type="checkbox"/> Procedures to provide step-down services after exit; and <input type="checkbox"/> A strategy to evaluate the effectiveness of moving-on strategies. <p><i>[Program policies and procedures]</i></p>	
	Program meets all bulleted points above	15
	Program meets 4-5 of the above bulleted points	10

³ https://www.usich.gov/resources/uploads/asset_library/PHA_MovingUp.pdf



	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.			
	<p>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?</p> <p>This project targets:</p> <ul style="list-style-type: none"> <input type="checkbox"/> People experiencing chronic homelessness <input type="checkbox"/> People who identify as LGBTQ <input type="checkbox"/> People with histories of institutionalization, incarceration, or foster care <input type="checkbox"/> Veterans <input type="checkbox"/> Survivors of domestic violence <input type="checkbox"/> Unaccompanied or parenting youth 18-24 <p><i>[Program policies and procedures]</i></p>		
		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: 29			
Minimum Points Required or Review is Triggered: 16			
3.1	Does the applicant provide guidelines/program rules in other languages besides English? <i>[Guidelines/Program Rules in another language]</i>	5	
3.2	Does the applicant have client-facing bilingual staff? <i>[Renewal Application Form]</i>	5	
3.3	Does the applicant have an arrangement for interpreter services? <i>[Provide a MOA/MOU or other agreement with interpreter service]</i>	5	
3.4	Does the applicant have an Anti-discrimination Policy in full compliance with the NC BoS CoC? <i>[Program policies and procedures]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
3.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? <i>[Renewal Application Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
3.6	Has the agency sent staff to an external (outside of the agency and NCCEH) training for Racial Equity or Anti-Discrimination in the last 12 months? Examples include the Racial Equity Institute trainings or United Way's 21 Day Challenge for Racial Equity. Attending the NC BoS CoC Racial Equity Dialogue Series is encouraged but does not count as an external staff training. 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). <i>[Renewal Application Form]</i>	5	
3.7	Does the applicant have an equal access hiring clause in job postings? <i>[Example Job Posting]</i>	2	



3.8	(For nonprofit agencies only) individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of your Board of Directors. <i>[Renewal Application Form]</i>	Standard <input type="checkbox"/> met <input type="checkbox"/> unmet	
3.9	(For nonprofit agencies only) How many members of your Board of Directors have experienced homelessness? <i>[Renewal Application Form]</i>		
	20% or above	2	
	Less than 20%	0	
3.10	What percent of managers or director-level positions are BIPOC? <i>[Renewal Application Form]</i>		
	Above 20%	5	
	Between 10 - 20%	2	
	Less than 10%	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: 101 RRH: 88 Minimum Points Required or Review is Triggered: PSH: 52 RRH: 42			
The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2021 to December 31, 2021, 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? <i>[Q13a2 divided by total enrolled]</i>		
	Less than 25%	0	
	25%-49%	5	
	Above 50%	15	
4.1b	PSH Projects: What percentage of new household admissions during the 2021 calendar year were chronically homeless? <i>[Custom HMIS Report]</i>		
	100%	11	
	Less than 100%	0	
4.1c	PSH Projects: What percentage of households served by the project were chronically homeless? <i>[Custom HMIS Report]</i>		
	Less than 50%	0	
	50-74%	5	
	75-100%	10	
4.1d	RRH Projects: What percentage of households served by the project were chronically homeless? <i>[CoC-APR Q26a]</i>		
	Less than 25%	0	
	25%-49%	2	
	50-74%	4	
	75-100%	8	
4.1e	RRH projects: what percentage of exits were to a permanent housing destination? <i>[CoC-APR 23a/b]</i>		
	<i>No Exits or Less than 70%</i>	0	



	70-80%	7	
	Above 80%	15	
4.1f	What percentage of exits were to a known destination? [CoC-APR Q23a/b]		
	95% or higher	5	
	0-94%	0	
4.1g	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	15	
4.1h	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
	<10%	0	
	10-15%	5	
	15-20%	10	
	Above 20%	15	
4.1i	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
	<10%	0	
	10-15%	5	
	15-20%	10	
	Above 20%	15	
4.1j	(PSH Only) What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2019-12/31/2020]		
	0-20%	10	
	Above 20%	0	
4.1k	(RRH Only) What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2019-12/31/2020]		
	>20%	0	
	10-20%	10	
	0-10%	3	



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 <i>[CoC-APR Q6a-6d]</i>		
	0-10%	5	
	Above 10%	0	
4.2b	Are all of the agency's projects that are listed in the 2021 HIC participating in HMIS (or a comparable database if VSP)? <i>[HIC]</i>		
	Yes	10	
	No	0	
4.2c	Did the program submit their APR on or before the designated deadline? <i>[Sage]</i>		
	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. <i>[Renewal application form]</i>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet</p>	
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 NOFO 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.) <i>[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.]</i>	<p>Standard</p> <p><input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> unmet, documentation not provided</p>	



Section V: Coordinated Entry and Prioritization

Possible Points: 10

Minimum score or review triggered: 5

Section V Score

5.1	Does the program have a VI-SPDAT score for at least 97% of new admissions during the 2021 calendar year? <i>[Renewal Application Form; tab 1, A19 report]</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet <input type="checkbox"/> N/A	
5.2	What percentage of new admissions during the 2021 calendar year have a VI-SPDAT in HMIS or comparable database? <i>[Renewal Application Form; tab 1, HMIS A19 Report]</i>		
		Possible score	Project score
	100%	10	
	90%-99%	5	
	80-89%	2	
	Below 80%	0	



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? <i>[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].</i>	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> 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 NOFO 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.	<p style="text-align: center;">Standard</p> <input type="checkbox"/> met <input type="checkbox"/> unmet	
6.2b	Was the signed NC BoS CoC Grantee Agreement submitted?	<p style="text-align: center;">Threshold</p> <input type="checkbox"/> met <input type="checkbox"/> unmet	





North Carolina Balance of State Continuum of Care

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2022 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:

1. 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).
2. 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.
3. 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).
4. 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:	Project Review Committee and CoC staff member		
Applicant:	Vaya Health		
Project Name:	Vaya Health PSH Central Combo		
Project Type (select one)	<input type="checkbox"/> PH:PSH	<input type="checkbox"/> PH:RRH	PSH
Reviewer Signature:		Date:	09/06/2022

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 for the project to be eligible for funding.	Maximum Score Possible: PSH: 184 RRH: 156
	Project Score: 158

Combined Scoring

This section is scored by two reviewers, a member of the NC BoS CoC Project Review Committee and an NCCEH staff person. The 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? <i>[Proj. App: 3B, Project Application Detailed Instructions]</i>	3	3
1.2	Do the answers regarding services address all parts of the detailed instructions? <i>[Proj. App: 4A, Project Application Detailed Instructions]</i>	3	3
1.3	Do the answers regarding outreach address all parts of the detailed instructions? <i>[Proj. App: 5C, Project Application Detailed Instructions]</i>	3	0



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	<p>Does this project use a Housing First approach? <i>Must meet all statements in 2.1b and 2.1c below to meet standard. Program should not have any policies 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.</i> <i>[Program policies and procedures; sample lease]</i></p>	<p style="text-align: center;">Standard (must meet all statements in 2.1b and 2.1c below) met 2 of 2 met</p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.1b	<p>The project does not screen out for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Having too little or no income <input type="checkbox"/> Active or history of substance abuse <input type="checkbox"/> Having a criminal record (with exceptions for state mandated restrictions) <input type="checkbox"/> History of domestic violence (e.g. lack of protective order, or separation from abuser, or law enforcement involvement) 	<p>met</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.1c	<p>The project does not terminate people from the program for:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Failure to participate in supportive services <input type="checkbox"/> Failure to make progress on a service plan <input type="checkbox"/> Loss of income or failure to improve income <input type="checkbox"/> Domestic violence <input type="checkbox"/> Any other activity not covered in a lease agreement typically found in the project's geographic area <input type="checkbox"/> Failure to maintain recovery 	<p>met</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p>
Reviewer Notes (if unmet or documentation not provided, note why):		



Key Elements of Permanent Supportive Housing

PSH projects should meet these 9 standards set forth by [SAMHSA](https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pdf). However, they do not need to be explicitly outlined in the Program Policies & Procedures in order to meet the standard.¹

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. <i>[Sample lease]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/>
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. <i>[Program policies and procedures]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/>
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. <i>[Program policies and procedures]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/>
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. <i>[Program policies and procedures, sample lease]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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. <i>[Program policies and procedures]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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. <i>[Program policies and procedures]</i>	<div style="text-align: right;">Standard</div> <input type="checkbox"/> met <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Reviewer Notes (if unmet or documentation not provided, note why):		

¹ <https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pdf>



2.2g	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> met</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.2h	<p>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 establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. <i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> met</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.2i	<p>The provision of housing and the provision of support services are distinct. <i>(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).</i> <i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> met</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
<p>Rapid Re-Housing Performance Benchmarks and Program Standards Rapid Re-Housing projects should encompass 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.</p>		
2.3a	<p>Core Program Standard: Housing Identification</p>	
2.3a1	<p>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,</p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> N/A <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p>

² <http://www.endhomelessness.org/page/-/files/Rapid%20Re->





	<p>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. <i>[Program policies and procedures]</i></p>	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a2	<p>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. <i>[Program policies and procedures]</i>.</p>	<p>Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>N/A</p>
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a3	<p>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. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>N/A</p>
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.3a4	<p>Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. <i>[Program policies and procedures]</i></p>	<p>Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>N/A</p>
	Reviewer Notes (if unmet or documentation not provided, note why):	



2.3b	Core Program Standard: Rent and Move-In Assistance	
2.3b1	<p>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. <i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> N/A</p> <p><input type="checkbox"/></p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3b2	<p>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. <i>(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).</i> <i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> N/A</p> <p><input type="checkbox"/></p>
Reviewer Notes (if unmet or documentation not provided, note why):		



2.3b3	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> N/A</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3c	Core Program Standard: Rapid Re-Housing Case Management and Services	
2.3c1	<p>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. <i>(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).</i></p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> N/A</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3c2	<p>When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. <i>(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).</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> N/A</p>



	<i>[Program policies and procedures]</i>										
	Reviewer Notes (if unmet or documentation not provided, note why):										
2.3c3	<p>Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate.</p> <p><i>[Program policies and procedures]</i></p>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Standard</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">N/A</td> <td></td> </tr> </table>		Standard		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	
	Standard										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<input type="checkbox"/>	N/A										
	Reviewer Notes (if unmet or documentation not provided, note why):										
2.3c4	<p>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. <i>[Program policies and procedures]</i></p>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Standard</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">N/A</td> <td></td> </tr> </table>		Standard		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	
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<input type="checkbox"/>	N/A										
	Reviewer Notes (if unmet or documentation not provided, note why):										
2.3d	Core Program Standard: Program Philosophy and Design										
2.3d1	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Standard</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">N/A</td> <td></td> </tr> </table>		Standard		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	
	Standard										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<input type="checkbox"/>	N/A										
	Reviewer Notes (if unmet or documentation not provided, note why):										
2.3d2	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%; text-align: center;">Standard</td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">N/A</td> <td></td> </tr> </table>		Standard		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	
	Standard										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<input type="checkbox"/>	N/A										
	Reviewer Notes (if unmet or documentation not provided, note why):										



2.3d3	<p>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.</p> <p><i>[Program policies and procedures]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> N/A</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
2.3d4	<p>Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed.</p> <p><i>[Program policies and procedures, sample lease]</i></p>	<p style="text-align: right;">Standard</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/></p> <p style="text-align: center;">N/A</p>
Reviewer Notes (if unmet or documentation not provided, note why):		
PSH and RRH: Services Resource Leverage Plan		
2.4	<p>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.</p> <p>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:</p> <ul style="list-style-type: none"> • It currently has formal relationships with another agency (at least MOUs or MOAs in place) or a dedicated funding stream to provide some services specifically 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	0

Permanent Supportive Housing: Moving-on Strategy

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.³

2.5	<p>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:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; <input type="checkbox"/> A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); <input type="checkbox"/> A method to prepare tenants to move-on and exit planning procedures; <input type="checkbox"/> A method to link moving-on tenants to mainstream services and supports; <input type="checkbox"/> Procedures to provide step-down services after exit; and <input type="checkbox"/> A strategy to evaluate the effectiveness of moving-on strategies. <p><i>[Program policies and procedures]</i></p>	
	Program meets all bulleted points above	15
	Program meets 4-5 of the above bulleted points	10

³ https://www.usich.gov/resources/uploads/asset_library/PHA_MovingUp.pdf



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.			
	<p>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?</p> <p>This project targets:</p> <ul style="list-style-type: none"> <input type="checkbox"/> People experiencing chronic homelessness <input type="checkbox"/> People who identify as LGBTQ <input type="checkbox"/> People with histories of institutionalization, incarceration, or foster care <input type="checkbox"/> Veterans <input type="checkbox"/> Survivors of domestic violence <input type="checkbox"/> Unaccompanied or parenting youth 18-24 <p><i>[Program policies and procedures]</i></p>		
		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	10



Section III: Equity

Section III Score

Possible Points: 29 Minimum Points Required or Review is Triggered: 16			
3.1	Does the applicant provide guidelines/program rules in other languages besides English? <i>[Guidelines/Program Rules in another language]</i>	5	5
3.2	Does the applicant have client-facing bilingual staff? <i>[Renewal Application Form]</i>	5	5
3.3	Does the applicant have an arrangement for interpreter services? <i>[Provide a MOA/MOU or other agreement with interpreter service]</i>	5	4.5
3.4	Does the applicant have an Anti-discrimination Policy in full compliance with the NC BoS CoC? <i>[Program policies and procedures]</i>	<input type="checkbox"/>	Standard met <input type="checkbox"/>
3.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? <i>[Renewal Application Form]</i>	<input type="checkbox"/>	Standard 0 <input type="checkbox"/>
3.6	Has the agency sent staff to an external (outside of the agency and NCCEH) training for Racial Equity or Anti-Discrimination in the last 12 months? Examples include the Racial Equity Institute trainings or United Way's 21 Day Challenge for Racial Equity. Attending the NC BoS CoC Racial Equity Dialogue Series is encouraged but does not count as an external staff training. 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). <i>[Renewal Application Form]</i>	5	5
3.7	Does the applicant have an equal access hiring clause in job postings? <i>[Example Job Posting]</i>	2	1.5



3.8	(For nonprofit agencies only) individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of your Board of Directors. <i>[Renewal Application Form]</i>	Standard 0 <input type="checkbox"/> <input type="checkbox"/>	
3.9	(For nonprofit agencies only) How many members of your Board of Directors have experienced homelessness? <i>[Renewal Application Form]</i>		0
	20% or above	2	
	Less than 20%	0	
3.10	What percent of managers or director-level positions are BIPOC? <i>[Renewal Application Form]</i>		0
	Above 20%	5	
	Between 10 - 20%	2	
	Less than 10%	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: 101 RRH: 88 Minimum Points Required or Review is Triggered: PSH: 52 RRH: 42			
The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2021 to December 31, 2021, 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? <i>[Q13a2 divided by total enrolled]</i>		
	Less than 25%	0	N/A
	25%-49%	5	
	Above 50%	15	
4.1b	PSH Projects: What percentage of new household admissions during the 2021 calendar year were chronically homeless? <i>[Custom HMIS Report]</i>		
	100%	11	11
	Less than 100%	0	
4.1c	PSH Projects: What percentage of households served by the project were chronically homeless? <i>[Custom HMIS Report]</i>		
	Less than 50%	0	10
	50-74%	5	
	75-100%	10	
4.1d	RRH Projects: What percentage of households served by the project were chronically homeless? <i>[CoC-APR Q26a]</i>		
	Less than 25%	0	N/A
	25%-49%	2	
	50-74%	4	
	75-100%	8	
4.1e	RRH projects: what percentage of exits were to a permanent housing destination? <i>[CoC-APR 23a/b]</i>		
	<i>No Exits or Less than 70%</i>	0	



	70-80%	7	N/A
	Above 80%	15	
4.1f	What percentage of exits were to a known destination? [CoC-APR Q23a/b]		
	95% or higher	5	5
	0-94%	0	
4.1g	PSH projects: what percentage of exits were to a permanent housing destination? [CoC-APR 23a/b]		
	No exits	5	15
	Below 80%	0	
	80% or higher	15	
4.1h	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]		
	<10%	0	15
	10-15%	5	
	15-20%	10	
	Above 20%	15	
4.1i	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].		
	<10%	0	15
	10-15%	5	
	15-20%	10	
	Above 20%	15	
4.1j	(PSH Only) What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2019-12/31/2020]		
	0-20%	10	10
	Above 20%	0	
4.1k	(RRH Only) What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2019-12/31/2020]		
	>20%	0	N/A
	10-20%	10	
	0-10%	3	



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 [CoC-APR Q6a-6d]		
	0-10%	5	5
	Above 10%	0	
4.2b	Are all of the agency's projects that are listed in the 2021 HIC participating in HMIS (or a comparable database if VSP)? [HIC]		
	Yes	10	10
	No	0	
4.2c	Did the program submit their APR on or before the designated deadline? [Sage]		
	Yes	5	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 <input type="checkbox"/> <input type="checkbox"/>
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 NOFO 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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



Section V: Coordinated Entry and Prioritization

Possible Points: 10

Minimum score or review triggered: 5

Section V Score

5.1	Does the program have a VI-SPDAT score for at least 97% of new admissions during the 2021 calendar year? <i>[Renewal Application Form; tab 1, A19 report]</i>	<input type="checkbox"/>	Standard <input type="checkbox"/> met <input type="checkbox"/>
5.2	What percentage of new admissions during the 2021 calendar year have a VI-SPDAT in HMIS or comparable database? <i>[Renewal Application Form; tab 1, HMIS A19 Report]</i>		
		Possible score	Project score
	100%	10	10
	90%-99%	5	
	80-89%	2	
	Below 80%	0	



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	0
6.1b	Does the project demonstrate they have 25% match and all match funds are eligible? <i>[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].</i>	<input type="checkbox"/>	Standard <input type="checkbox"/> met
		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 NOFO timeline is discerned or published).	-10	0
6.1d	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	0
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.	<input type="checkbox"/>	Standard <input type="checkbox"/> met
6.2b	Was the signed NC BoS CoC Grantee Agreement submitted?	<input type="checkbox"/>	Threshold <input type="checkbox"/> met





Brian Alexander <brian@nccoh.org>

Coc Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State Coc equ@nccoh.org
To: Amy Steele <amy.steele47@gmail.com>
Cc: brian@nccoh.org

The Sun, Sep 18, 2022 at 3:28 PM

Dear Rockingham County Help for Homeless,

The NC Balance of State Coc Steering Committee met this morning 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 Rockingham County Help for Homeless projects:

- RCHH - RCHH Permanent Supportive Housing - \$154,088 - Rank 25 (standing Tiers 1 and 2)
- RCHH - RCHH Rapid Rehousing - \$107,582 - Rank 30 in Tier 2

Unfortunately, \$106,404 of the RCHH Rapid Rehousing project was reallocated.

This year's Coc funding process was very competitive. The Coc received \$1,083,925 in requests for new projects with only \$742,192 in Coc funds available. The Steering Committee considered both funding priorities for new projects as well as the quality of renewal applications to make final decisions. The Coc decided to reduce the RCHH RRH application due to missing several key standards and the quality of the overall application and to make room for new projects in the final ranking list.

Please find attached the spreadsheet 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.nccoh.org/media/files/pages-page/7d8925d8b7ea4b22-coo-ranking-list.pdf>

If you would like to appeal the decision of partial reallocation of the RCHH RRH 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 that the RRH project was partially reallocated, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion. Staff will be in touch soon about next steps on your project applications. We look forward to continuing to work with you.

NC Balance of State Coc Team

North Carolina Coalition to End Homelessness

(818) 788-4383

www.nccoh.org/boos

brian@nccoh.org

NCCOH staffs the NC Balance of State Continuum of Care

3 attachments

1 NC BoS Coc Appeal Process_2022 final.pdf
223K

1 RCHH RRH Renewal Spreadsheet 2022.pdf
489K

1 RCHH RRH Renewal Spreadsheet 2022.pdf
489K

9/18/22, 10:01 AM

North Carolina Coalition to End Homelessness Mail - COC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccoh.org>



COC Application: Project Prioritization Ranking List Notification

7 messages

Tue, Sep 6, 2022 at 3:29 PM

NC Balance of State COC <nccoh@ncch.org>
To: **Mich Faber <mfaber@newma.org>**, **Teresa Allen <tallen@newma.org>**
Cc: **brian@nccoh.org**

Dear New Raleigh Housing Authority,

The NC Balance of State COC Steering Committee met this morning 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 projects were not included in the final ranked list of projects:

New Raleigh Housing Authority - 2021 Application for 2022-2023 COC Renewal

This year's COC funding process was very competitive. The COC received \$1,083,925 in requests for new projects with only \$742,159 in COC funds available. The Steering Committee considered both funding priorities for new projects as well as the quality of renewal applications to make final decisions. The COC decided to reallocate all funding in the NCHA PSH application due to missing several key standards and the quality of the overall application and to make room for new projects in the final ranking list.

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.nccoh.org/new/submit/survey-2022/>

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 help more discussion.

NC Balance of State COC Team
North Carolina Coalition to End Homelessness
(919) 784-4883
www.nccoh.org/ncos
brian@nccoh.org

NECENH seeks the NC Balance of State Continuum of Care

2 attachments

NC Bal COC appeals process_2022 final.pdf
22K

New Raleigh Housing Authority Renewal Scorecard 2022.pdf
489K

Wed, Sep 7, 2022 at 12:07 PM

Mich Faber <mfaber@newma.org>
To: **NC Balance of State COC <nccoh@ncch.org>**
Cc: **Brian Alexander <brian@nccoh.org>**, **starr@nccoh.org**, **Wicklow73@helsoluh.net**, **clulbert73@helsoluh.net**

So let me see if I understand correctly.... The 2021 application for the 2022-2023 grant year was not funded.

Presumably then, our program simply comes to a close at the end of October 2022....

What will happen to the families and individuals we are currently serving when our current year funding runs out? Will they be absorbed into another program or do they just go back to being homeless once again?

Mich Faber, Executive Director

The New Raleigh Housing Authority

924 Third Avenue

Raleigh, NC 27620

Phone: 336-791-4079

Fax: 336-450-1002

www.newma.org

MAILING LIST: ALL COC MAILING LIST: This e-mail message and any files transmitted with it are confidential and intended only for the individual named. If you are not the named addressee you should not disseminate, distribute or copy this e-mail. Please notify the sender immediately by e-mail if you have received this e-mail by mistake. Copying, forwarding or distributing this e-mail is prohibited. If you have received this e-mail in error, please notify the sender immediately by e-mail so that we can correct the error. If you are not the named addressee you should not disseminate, distribute or copy this e-mail. Please notify the sender immediately by e-mail if you have received this e-mail by mistake. Copying, forwarding or distributing this e-mail is prohibited. If you have received this e-mail in error, please notify the sender immediately by e-mail so that we can correct the error.

(Quoted text hidden)

9/18/22, 10:11 AM

North Carolina Coalition to End Homelessness Mail - COC Application: Project Prioritization Ranking List Notification



Brian Alexander <brian@ncccah.org>

COC Application: Project Prioritization Ranking List Notification

3 messages

NC Balance of State COC enat@ncccah.org
To: Matthew McDowell enat@ncccah.org, Ryan Fehrmann ryan.fehrmann@ncccah.org
Cc: brax@ncccah.org

Tue, Sep 13, 2022 at 3:22 PM

Dear North Carolina Coalition to End Homelessness,

The NC Balance of State COC Steering Committee met this morning 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 NCCCEH projects:

- NCCCEH - BOS HAYS - \$519,299 - Rank 1 in Tier 1
- NCCCEH - BOS Coordinated Entry - \$423,767 - Rank 2 in Tier 1
- NCCCEH - NC BOS COC DV BARRIS SSO CE - \$500,000 - Rank 31 in Tier 2

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.ncccah.org/media/attachments/purpos-page/7/d902e8d1ba1422-con-ranking-list.png>

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

(818) 764-4383

www.ncccah.org/bos

info@ncccah.org

NCCCEH staffs the NC Balance of State Continuum of Care

NCCCEH DV Barris SSO CE New Scorecard 2022.pdf

Tue, Sep 13, 2022 at 7:53 AM

Brian Alexander brian@ncccah.org
To: Matthew McDowell enat@ncccah.org, Ryan Fehrmann ryan.fehrmann@ncccah.org

Good morning, Matt

You are ready to submit the NCCCEH applications in eSims. Please submit all three applications as soon as possible and confirm when the submission is complete.

Please let me know if you have any questions. Thank you so much for your hard work on these applications.

Brian Alexander | brian@ncccah.org | [8187717840](tel:8187717840)
North Carolina Coalition to End Homelessness | www.ncccah.org | info@ncccah.org

BOS/CE not ranked

Tue, Sep 13, 2022 at 8:53 AM

Matthew McDowell enat@ncccah.org
To: Brian Alexander brian@ncccah.org
Cc: Ryan Fehrmann ryan.fehrmann@ncccah.org

Hi Brian,

Thanks! I can confirm. I've just submitted the following three NCCCEH applications in eSims:

- NCCCEH - BOS HAYS - \$519,299 - Rank 1 in Tier 1
- NCCCEH - BOS Coordinated Entry - \$423,767 - Rank 2 in Tier 1
- NCCCEH - NC BOS COC DV BARRIS SSO CE - \$500,000

Kindly,
Matt

Matt McDowell, CPA, CFE | enat@ncccah.org | Finance and Operations Director | enat@ncccah.org
North Carolina Coalition to End Homelessness | www.ncccah.org | 818.776.4380 ext.606

Ranked list attached

9/18/22, 10:12 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccch.org>



CoC Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 8, 2022 at 3:23 PM

NC Balance of State CoC Steering Committee
To: Lari White <lari@vayhealth.com>, Sarah <Sarah.Linnear@vayhealth.com>
Cc: brian@nccch.org

Dear Vaya Health Resources,

The NC Balance of State CoC Steering Committee met this morning 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 - Vaya Health PSH Central Combo - \$495,134 - Rank 3 in Tier 1
- Vaya Health - Vaya Health PSH Western Combo - \$435,580 - Rank 4 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.nccch.org/media/files/pages-page/71902548/final-fy22-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) 758-4393
www.nccch.org/foa
brian@nccch.org

NCCCH and the NC Balance of State Continuum of Care

2 Attachments

- 1 Vaya Health PSH Central Combo Renewal Scorecard 2022.pdf 498K
- 2 Vaya Health PSH Western Combo Renewal Scorecard 2022.pdf 488K

9/18/22, 10:13 AM

North Carolina Coalition to End Homelessness Mail - Coc Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccoh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State Coc <nccoh.org>
To: Tijuana Sanders <sanders@chnc.ncf>, moyes@chnc.ncf

Tue, Sep 8, 2022 at 3:24 PM

Dear Greenville Housing Authority,

The NC Balance of State Coc Steering Committee met this morning 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 - \$70,491 - Rank 5 in Tier 1
- GHA - Solid Ground - \$74,026 - Rank 9 in Tier 1
- GHA - Seeds of Change - \$355,560 - Rank 11 in Tier 1
- GHA - Project Hope - \$408,016 - Rank 12 in Tier 1
- GHA - Project LIFE - \$469,720 - Rank 27 in Tier 2

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.nccoh.org/media/files/pages/page/739025487/hat/y22-ccc-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
(810) 756-4393
www.nccoh.org/ncos
info@nccoh.org

NCCEH utilizes the NC Balance of State Continuum of Care

8 attachments

- 1) HACC Project Hope Renewal Scorecard 2022.pdf 489K
- 2) HACC Project Stable Solution Renewal Scorecard 2022.pdf 489K
- 3) HACC Seeds of Change Renewal Scorecard 2022.pdf 489K
- 4) HACC Solid Ground Renewal Scorecard 2022.pdf 489K
- 5) GHA Project Life New Scorecard 2022.pdf 695K



COC Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 20, 2022 at 3:23 PM

NC Balance of State COC <boe@nccelh.org>
to: "AmyVahedi@TrilliumCo.org" <amy.vahedi@trilliumco.org>, Talika Williams <talika.williams@trilliumco.org>
Cc: boe@nccelh.org

Dear Trillium Health Resources,

The NC Balance of State COC Steering Committee met this morning 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 #2 - 5122,632 - Rank 6 in Tier 1
- Trillium Health Resources - Trillium PSH #3 - 5103,860 - Rank 8 in Tier 1
- Trillium Health Resources - Trillium PSH #1 - 5900,492 - Rank 10 in Tier 1
- Trillium Health Resources - Trillium RRH - 5212,039 - Rank 24 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.nccelh.org/media/files/pages-page/74902548/inat-ky22-coc-ranking-list.png>

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) 755-4383
www.nccelh.org/boe

boe@nccelh.org

4 attachments

- Trillium PSH#1 Renewal Scorecard 2022.pdf 489K
- Trillium PSH#2 Renewal Scorecard 2022.pdf 489K
- Trillium PSH#3 Renewal Scorecard 2022.pdf 489K
- Trillium RRH Renewal Scorecard 2022.pdf 489K

9/18/22, 10:13 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <bnam@nccelh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 6, 2022 at 3:24 PM

NC Balance of State CoC <bnam@nccelh.org>
To: Kristen Martin <kmartin@thrive4health.org>, Kristin Skidum <kskidum@thrive4health.org>
Cc: bnas@nccelh.org

Dear Thrive,

The NC Balance of State CoC Steering Committee met this morning 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 Combo - \$328,341 - Rank 7 in Tier 1
- Thrive - Thrive RRH - \$180,884 - Rank 16 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.nccelh.org/media/files/projects-2022-2023-ranking-list.png>

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) 758-4393
www/nccelh.org/pos
bnam@nccelh.org

NCCEH staff, the NC Balance of State Continuum of Care

2 attachments

Thrive Pathways Renewal Scorecard 2022.pdf
439K

Thrive RRH Renewal Scorecard 2022.pdf
489K

9/18/22, 10:14 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@ncech.org>



CoC Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State CoC <bos@ncech.org>
To: "Quan, Tameka" <tmiller-gunn@communitylink-nc.org>
Cc: bos@ncech.org

Thu, Sep 8, 2022 at 3:23 PM

Dear Community Link,

The NC Balance of State CoC Steering Committee met this morning 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 - CL Northern PSH Combo - \$1,338,019 - Rank 13 in Tier 1
- Community Link - CL Piedmont 1 PSH - \$1,099,209 - Rank 14 in Tier 1
- Community Link - CL PRC RRH - \$348,032 - Rank 23 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.ncech.org/media/files/pages-page/719025d8/inak-fy22-coc-ranking-list.png>

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
(819) 764-4893

www.ncech.org/bos

NCECH staffs the NC Balance of State Continuum of Care

3 attachments

- 1 CL Northern PSH Combo Renewal Scorecard 2022.pdf 489K
- 1 Community Link Piedmont 1 PSH Renewal Scorecard 2022.pdf 489K
- 1 CL PRC RRH Renewal Scorecard 2022.pdf 489K

9/18/22, 10:15 AM

North Carolina Coalition to End Homelessness Mail - Coc Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccceh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

NG Balance of State Coc <bos@nccceh.org>
To: brianand@nccadv.org; Cassia Rowe <rowe@nccadv.org>
Cc: bos@nccceh.org

Tue, Sep 6, 2022 at 3:25 PM

Dear NCCADV,

The NC Balance of State Coc Steering Committee met this morning 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* - \$2,139,002 - Rank 15 in Tier 1
- NCCADV - *Safe at Home Expansion* - \$984,383 - Rank 32 in Tier 2

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.nccceh.org/media/files/pages-page/749025d9/final-fy22-coc-ranking-list.png>

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.nccceh.org/bos

bos@nccceh.org

NCCCEH staffs the NC Balance of State Continuum of Care

2 attachments

1 NCCADV Safe at Home Renewal Scenario 2022.pdf
499K

1 NCCADV Safe at Home New Scenario 2022.pdf
456K

9/18/22, 10:15 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccch.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State CoC <bos@nccch.org>
To: Luraysha McNair <lmcnair@eastpointehomeless.org>
Cc: bos@nccch.org

Tue, Sep 6, 2022 at 3:25 PM

Dear Eastpointe,

The NC Balance of State CoC Steering Committee met this morning 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 Southeast - \$80,287 - Rank 17 in Tier 1
- Eastpointe - Eastpointe SPC3 - \$228,568 - Rank 19 in Tier 1
- Eastpointe - Eastpointe SPC Combined - \$199,127 - Rank 20 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.nccch.org/media/files/pages-page/719025d48/mrak-fy22-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) 765-4383
www.nccch.org/bos
bos@nccch.org

NCCCH staffs the NC Balance of State Continuum of Care

3 attachments

- 1 Eastpointe Shelter Plus Care 3 Renewal Scorecard 2022.pdf
439K
- 1 Eastpointe Shelter Plus Care Combined Renewal Scorecard 2022.pdf
439K
- 1 Eastpointe Shelter Plus Care Southeast Renewal Scorecard 2022.pdf
439K

9/18/22, 10:16 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccceh.org>



CoC Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State CoC <brian@nccceh.org>
To: Taura Willis <willis@partnersphm.org>
Cc: brian@nccceh.org

Tue, Sep 6, 2022 at 3:28 PM

Dear Partners Health Management,

The NC Balance of State CoC Steering Committee met this morning 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 Health Management projects:

Partners Health Management - Partners Consolidated RSH - \$273,381 - Rank 18 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.nccceh.org/media/files/pages-2/page/749025d8/tnak-Y22-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
(818) 764-4393
www.nccceh.org/hos
brian@nccceh.org

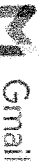
NCCCEH staffs the NC Balance of State Continuum of Care

Partners Consolidated Renewal Scorecard 2022.pdf
489K

9/18/22, 10:16 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@ncccbh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 6, 2022 at 3:28 PM

NC Balance of State CoC <boc@ncccbh.org>
To: Malissa Mckeown <malissamckeown@unionshelter.org>
Cc: brian@ncccbh.org

Dear Union County Community Shelter,

The NC Balance of State CoC Steering Committee met this morning 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 projects:

UCCS - Coc Rapid Rehousing UCES - \$202,148 - Rank 21 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.ncccbh.org/media/files/pages-pages-page/769025d4f9a1-f22-coc-rankin-g-ls.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

(819) 768-4393

www.ncccbh.org

[coc@ncccbh.org](mailto:boc@ncccbh.org)

NCCCBH staffs the NC Balance of State Continuum of Care

UCCS RHH Renewal Secorcard 2822.pdf
489K

9/18/22, 10:16 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccelh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 6, 2022 at 3:28 PM

NC Balance of State CoC <bos@nccelh.org>
To: "Lynne, Lynn" <lynnel.james@pittcountync.gov>
Cc: bos@nccelh.org

Dear Pitt County Planning,

The NC Balance of State CoC Steering Committee met this morning 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 - PRRRH2021 - \$123,278 - Rank 22 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.nccelh.org/media/files/pages/page/749025d8final-fy22-coc-ranking-list.png>

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
(819) 765-4383
www.nccelh.org/bos

NCCELH staffs the NC Balance of State Continuum of Care

[PRRRH2021 Renewal Statement 2022.pdf](#)
489K

9/18/22, 10:16 AM

North Carolina Coalition to End Homelessness Mail - COC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccch.org>



COC Application: Project Prioritization Ranking List Notification

1 message

Tue, Sep 6, 2022 at 3:26 PM

NC Balance of State COC <noc@nccch.org>
To: Korry Bashaw <kbashaw@br-code.org>
Cc: brian@nccch.org

Dear Brick Capital Community Development,

The NC Balance of State COC Steering Committee met this morning 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 projects:

Brick Capital - Region 7 PSH - \$298,658 - Rank 26 in Tier 2

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.nccch.org/media/files/projects-page/719025d8/final-fy22-coc-ranking-list.png>

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) 758-4383

www.nccch.org/pos

pos@nccch.org

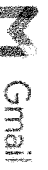
NCCCH Met the NC Balance of State Continuum of Care

[Brick Capital Region 7 PSH New Scorecard 2022.pdf](#)
1893K

9/18/22, 10:17 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccceh.org>



Coc Application: Project Prioritization Ranking List Notification

1 message

The, Sep 8, 2022 at 3:26 PM

NC Balance of State CoC <nbos@nccceh.org>
To: Michele Knapp <mknapp@riththeadminstias.com> <dmjlin@riththeadminstias.com>
Cc: bax@nccceh.org

Dear Dialonors,

The NC Balance of State CoC Steering Committee met this morning 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 Dialonors projects:

Dialonors - FY22-23 PSY CoC Initiative - \$140,000 - Rank 28 in Tier 2

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.nccceh.org/media/files/pages/page/48025d8/na1-fy22-pros-ranking-list.png>

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
(819) 754-4393
www.nccceh.org/bos
bos@nccceh.org

NCCCEH staffs the NC Balance of State Continuum of Care

[Dialonors PSY CoC Initiative New Scorecard 2022.pdf](#)
565K

9/18/22, 10:17 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander <brian@nccceh.org>



CoC Application: Project Prioritization Ranking List Notification

2 messages

NC Balance of State CoC <bos@nccceh.org>
To: Natasha Elliott <natejackson@openc.org>
Cc: bos@nccceh.org

Tue, Sep 6, 2022 at 3:27 PM

Dear Central Piedmont Community Action,

The NC Balance of State CoC Steering Committee met this morning 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 Central Piedmont Community Action projects:

Central Piedmont Community Action - Breaking Barriers - \$275,547 - Rank 29 in Tier 2

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.nccceh.org/media/files/pages-1pages-1page/49025d87final-y22-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
(819) 755-4383
www.nccceh.org/bos
bos@nccceh.org

NCCCEH staffs the NC Balance of State Continuum of Care

COCA Breaking Barriers New Scorecard 2022.pdf
569K

Tue, Sep 6, 2022 at 3:38 PM

Natasha Elliott <natejackson@openc.org>
To: NC Balance of State CoC <bos@nccceh.org>

Thank you!

Natasha J. Elliott, MBA, CCAP, NCFRI
Executive Director
Central Piedmont Community Action, Inc.
1481 Ross Avenue
Post Office box 626
Sliver City, NC 27244
(P) 919.742.2377 (F) 919.742-2399
Website: www.cocnc.org

From: NC Balance of State CoC <bos@nccceh.org>
Sent: Tuesday, September 6, 2022 3:27 PM
To: Natasha Elliott <natejackson@openc.org>
Cc: bos@nccceh.org <bos@nccceh.org>
Subject: CoC Application: Project Prioritization Ranking List Notification

Original text hidden
This message contains information that may be confidential and privileged. Unless you are the addressee (or authorized to receive for the addressee), you may not use, copy, print or disclose to anyone the message or any information contained in the message. If you have received this message in error, please advise the sender by reply and delete the message.

9/18/22, 10:02 AM

North Carolina Coalition to End Homelessness Mail - CoC Application: Project Prioritization Ranking List Notification

Brian Alexander - abian@nccoh.org



CoC Application: Project Prioritization Ranking List Notification

1 message

NC Balance of State CoC stuart@nccoh.org
To: Amy Steele samyweld87@gmail.com
Cc: bian@nccoh.org

Tue, Sep 8, 2022 at 3:29 PM

Dear Rockingham County Help for Homeless,

The NC Balance of State CoC Steering Committee met this morning 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 Rockingham County Help for Homeless projects:

- REHM - RCHH Permanent Supportive Housing - \$150,000 - Rank 25 (redlined Tiers 1 and 2)
- REHM - RCHH Rapid Rehousing - \$107,502 - Rank 30 in Tier 3

Unfortunately, \$108,404 of the RCHH Rapid Rehousing project was reallocated.

This year's CoC funding process was very competitive. The CoC received \$1,083,935 in requests for new projects with only \$743,192 in CoC funds available. The Steering Committee considered both funding priorities for new projects as well as the quality of renewal applications to make final decisions. The CoC decided to reduce the RCHH RRH application due to missing several key standards and the quality of the overall application and to make room for new projects in the final ranking list.

Please find attached the redacted for your corresponding projects. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee website at: <https://www.nccoh.org/project/ranking-list.pdf>

If you would like to appeal the decision of partial reallocation of the RCHH RRH 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 that the RRH project was partially reallocated, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion. Staff will be in touch soon about next steps on your project applications. We look forward to continuing to work with you.

NC Balance of State CoC Team

North Carolina Coalition to End Homelessness

(919) 753-4380

www.nccoh.org

bian@nccoh.org

NCCOEH alerts the NC Balance of State Continuum of Care

3 attachments

1 **NC BoS CoC appeals process_2022 final.pdf**

223K

1 **RCHH RRH Renewal Redacted 8/22.pdf**

490K

1 **RCHH RRH Renewal Redacted 8/22.pdf**

498K

Rank	Grant Number	Funding Priority	Agency	Project Name	ARA / Request	Running Balance	App Type	Project Type	TOTAL	Accepted/Rejected
1	NC0035L4F032114		North Carolina Coalition to End Homelessness	2021 HMIS Renewal Balance of State	\$519,299	\$519,299	Renewal	HMIS	0	A
2	NC0384L4F032104		North Carolina Coalition to End Homelessness	2021 SSO CE Renewal Balance of State	\$423,767	\$943,066	Renewal	SSO-CE	0	A
3	NC0240L4F032106		Vaya Health	Vaya Health PSH Central Combo	\$495,134	\$1,438,200	Renewal	PSH	158	A
4	NC0255L4F032109		Vaya Health	Vaya Health PSH Western Combo	\$435,590	\$1,873,790	Renewal	PSH	153	A
5	NC0239L4F032108		Housing Authority of City of Greenville	Project Stable Solution Renewal 2021	\$70,491	\$1,944,281	Renewal	PSH	119	A
6	NC0204L4F032107		Trillium Health Resources	Trillium PSH #2	\$121,632	\$2,065,913	Renewal	PSH	115	A
7	NC0281L4F032108		Sixth Avenue Psychiatric	Pathways to Permanently Housed Consolidated	\$328,141	\$2,394,054	Renewal	PSH	114	A
8	NC0185L4F032112		Trillium Health Resources	Trillium PSH #3	\$103,860	\$2,497,914	Renewal	PSH	114	A
9	NC0183L4F032112		Housing Authority of City of Greenville	Solid Ground Renewal 2021	\$74,028	\$2,571,942	Renewal	PSH	107	A
10	NC0040L4F032114		Trillium Health Resources	Trillium PSH #1	\$900,492	\$3,472,434	Renewal	PSH	104	A
11	NC0159L4F032108		Housing Authority of City of Greenville	Seeds of Change Renewal 2021	\$355,560	\$3,827,994	Renewal	PSH	98	A
12	NC0237L4F032106		Housing Authority of City of Greenville	Project Hope Renewal 2021	\$508,016	\$4,336,010	Renewal	PSH	98	A
13	NC0221L4F032111		Community Link, Programs of	Community Link Northern PSH Combo	\$1,338,019	\$5,674,029	Renewal	PSH	92	A
14	NC0045L4F032114		Community Link, Programs of	Community Link Piedmont 1 PSH	\$1,099,209	\$6,773,238	Renewal	PSH	87.5	A
15	NC0465D4F032100		NC Coalition Against Domestic Violence	Safe at Home	\$2,139,002	\$8,912,240	Renewal	RRH	43	A
16	NC0466L4F032100		Sixth Avenue Psychiatric Rehabilitation Partners, Inc, DBA Thrive	Thrive Rapid Rehousing	\$180,824	\$9,093,064	Renewal	RRH	33.5	A
17	NC0358L4F032105		Eastpointe	Eastpointe Shelter Plus Care Southeast - Renewal 2021	\$80,287	\$9,173,351	Renewal	PSH	126	A
18	NC0042L4F032114		Partners Health Management	Partners Consolidated Renewal 2021	\$273,381	\$9,446,732	Renewal	PSH	114	A
19	NC0238L4F032106		Eastpointe	Eastpointe Shelter Plus Care 3 - Renewal 2021	\$228,568	\$9,675,300	Renewal	PSH	107	A
20	NC0262L4F032110		Eastpointe	Eastpointe Shelter Plus Care Combined - Renewal 2021	\$199,127	\$9,874,427	Renewal	PSH	106	A
21	NC0410L4F032103		Union County Community Shelter	COC Rapid Rehousing UCCS Renewal FY2023	\$200,148	\$10,074,575	Renewal	RRH	77	A
22	NC0409L4F032103		Pitt County	PittRRH2021	\$123,278	\$10,197,853	Renewal	RRH	88	A
23	NC0125L4F032113		Community Link, Programs of Travelers Aid	CL PRC RRH	\$348,037	\$10,545,890	Renewal	RRH	79.5	A
24	NC0446L4F032102		Trillium Health Resources	Trillium RRH	\$212,039	\$10,757,929	Renewal	RRH	116	A

25	NC0198L4F032109	Rockingham County Help for Homeless, Inc.	RCHH Permanent Supportive Housing Renewal Grant 2021	TIER 1 Portion	\$194,068	\$10,951,997	Renewal PSH	82	A
				TIER 2 Portion	\$75,132	\$11,027,129			A
26	New	1 Brick Capital Community Development	Region 7 Permanent Supportive Housing		\$298,658	\$11,325,787	New PSH	59+20	A
27	New	3 Greenville Housing Authority	Project LIFE		\$369,720	\$11,695,507	New PSH	77	A
28	New	3 Diakonos, Inc.	FY22-23 PSH CoC Initiative		\$140,000	\$11,835,507	New PSH	73	A
29	New	3 Central Piedmont Community Action, In	Breaking Barriers		\$275,547	\$12,111,054	New RRH	52	A
30	NC0174L4F032112	Rockingham County Help for Homeless, Inc.	RCHH Rapid Re-Housing Renewal Grant 2021 NC0174L4F032011	TIER 2 Portion	\$107,582	\$12,218,636	Renewal RRH	42.5	A
				NOT FUNDED BELOW THIS LINE	\$106,404	\$12,325,040			R
x	NC0176L4F032112	The New Reidsville Housing Authority	2021 Application for 2022-2023 CoC Renewal Tier One		\$287,303	\$12,612,343	Renewal PSH	41	R
				DV BONUS					
31	New	0 NCCEH	NC BoS CoC DV Bonus SSO-CE		\$500,000		New SSO-CE	63.5	A
32	New	0 North Carolina Coalition Against Domes	Safe at Home Expansion		\$984,383		New RRH	62	A
				DV Bonus Total	\$1,484,383				

FY22 CoC Consolidated Application Has Been Posted! Inbox x



NC Balance of State CoC <bos@ncceh.org>
to boslist, bos

11:28 AM (0 minutes ago) ☆ ↶ ⋮

Good morning, NC Balance of State CoC Stakeholders.

CoC staff have completed the FY22 CoC Application and Project Priority List. They have now been posted to the website for your review at: <https://www.ncceh.org/bos/currentcocapplication/>

Please let us know if you have any questions. As part of the process to get maximum points, we must have the posting up and available to CoC stakeholders two days in advance of the published deadline. Staff will submit the final application to HUD this Wednesday, September 28th on the CoC's behalf.

Thank you to everyone who played a role in this year's application.

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

↶ Reply

↷ Forward



Development Dir....docx ^

Int Questions for....docx ^

GHA Solid Ground....xlsx ^

Project LIFE Correc....pdf ^

HMIS@NCCEH_O....docx ^

Homelessness 101.docx ^

Show all X

11:28 AM
9/27/2022

Gwendolyn Greene, Chairperson
Luke Stavish, Vice-Chairperson
Jumail Blount, Commissioner



Gary Davis, Commissioner
Joann Harkley, Commissioner
Garrett Taylor, Commissioner
Shirley Williams, Commissioner

Wayman A. Williams,
Executive Director/CEO

August 19, 2022

Re: FY 2022 *Project LIFE*

To Whom It May Concern:

This is to certify that Greenville Housing Authority agrees to set-aside seven Housing Choice Vouchers. These Housing Choice Vouchers will be available to eligible Project LIFE participants. The Housing Choice Vouchers will provide housing subsidies in the amount of \$ 61,656. The Housing Choice Vouchers will be available during Project LIFE's grant year beginning July 1, 2023, through June 30, 2024.

Sincerely,

Shanetta Moyer
Deputy Executive Director/COO



Paul P. Cook, MD, FACP, FIDSA
Division Chief
Professor of Medicine
Director, Antibiotic Utilization and
Health Systems

**Jeffrey F. Thomas, PhD, LMHC,
LCAS, CCMHC, CRC, CCS-I, NCC**
Ryan White Program Director
Interim Ryan White Program
Administrator
Director of Behavioral Health

Chaundra Wiggins, RN, BSN
Director of Clinical Operations; Nurse
Manager

Dean F. Markham, MD
Clinical Associate Professor of
Medicine
Fellowship Program Director

Alicia Lagasca, MD
Clinical Assistant Professor of
Medicine

Dora Lebron, MD
Clinical Assistant Professor
of Medicine

Rabindra Ghimire, MD
Clinical Assistant Professor of
Medicine

Alexandra Stang, MD
Clinical Assistant Professor
of Medicine

Jennifer Emberger, MD, MPH
Clinical Assistant Professor
of Medicine

Michael Robinson, MD
Clinical Assistant Professor
of Medicine

Grace Wilkins, MPA, MSN, FNP-BC
Family Nurse Practitioner

Manal Elnabity, PharmD
Adherence Pharmacist

Tracy Perry, PharmD
Adherence Pharmacist

Nan Ma, MBA
Grants Program Coordinator

Sharla Whitehurst, MBA
Social Work Program Manager

Qiana Simmons, MA
Social Work Program Manager

Diana Goodie, BS
Social Work Program 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 \$ 100,000 to the GHA
- Provide said services for the Project LIFE grant period of July 1, 2023, to June 30, 2024
- 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 Region 10 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.

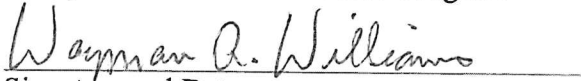


Signature and Date

Jeff Thomas Ph.D.

Ryan White Program Director Division of Infectious Disease

Brody School of Medicine HIV Program



Signature and Date

Wayman A. Williams

Executive Director/CEO