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 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2024 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 2024 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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;
 FY 2024 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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2024 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 1B-1. | Inclusive Structure and Participation–Participation in Coordinated Entry. |
|-------|---|
| | NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p. |
| | |
| | In the chart below for the period from May 1, 2023 to April 30, 2024: |
| 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. | CDBG/HOME/ESG Entitlement Jurisdiction | Yes | Yes | Yes | |
| 3. | Disability Advocates | Yes | Yes | Yes | |
| 4. | Disability Service Organizations | Yes | Yes | Yes | |
| 5. | EMS/Crisis Response Team(s) | Yes | Yes | Yes | |
| 6. | Homeless or Formerly Homeless Persons | Yes | Yes | Yes | |
| 7. | Hospital(s) | Yes | Yes | No | |
| 8. | Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations) | Yes | Yes | Yes | |
| 9. | Law Enforcement | Yes | Yes | Yes | |
| 10. | Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates | Yes | Yes | Yes | |
| 11. | LGBTQ+ Service Organizations | Yes | Yes | Yes | |
| 12. | Local Government Staff/Officials | Yes | Yes | Yes | |
| 13. | Local Jail(s) | Yes | Yes | No | |
| 14. | Mental Health Service Organizations | Yes | Yes | Yes | |
| 15. | Mental Illness Advocates | Yes | Yes | Yes | |
| 16. | Organizations led by and serving Black, Brown, Indigenous and other People of Color | Yes | Yes | Yes | |
| | | | | | |

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|--|------------------------|

| 17. | Organizations led by and serving LGBTQ+ persons | Yes | Yes | Yes |
|-----|---|-----|-----|-----|
| 18. | Organizations led by and serving people with disabilities | Yes | Yes | Yes |
| 19. | Other homeless subpopulation advocates | Yes | Yes | Yes |
| 20. | Public Housing Authorities | Yes | Yes | Yes |
| 21. | School Administrators/Homeless Liaisons | Yes | Yes | Yes |
| 22. | Street Outreach Team(s) | Yes | Yes | Yes |
| 23. | Substance Abuse Advocates | Yes | Yes | Yes |
| 24. | Substance Abuse Service Organizations | Yes | Yes | Yes |
| 25. | Agencies Serving Survivors of Human Trafficking | Yes | Yes | Yes |
| 26. | Victim Service Providers | Yes | Yes | Yes |
| 27. | Domestic Violence Advocates | Yes | Yes | Yes |
| 28. | Other Victim Service Organizations | Yes | Yes | Yes |
| 29. | State Domestic Violence Coalition | Yes | Yes | Yes |
| 30. | State Sexual Assault Coalition | No | No | No |
| 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-1a. Experience Promoting Racial Equity.

NOFO Section III.B.3.c.

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

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|--|

The CoC addresses underserved communities' needs in multiple ways: governance infrastructure with decision-making power represented by BIPOC & other marginalized populations; conversations & collaboration with marginalized communities to address emerging challenges to ensure equitable distribution of resources; & direct engagement & TA to BIPOC-led agencies. The RE Subcommittee (RES) leads education & engagement efforts across the geographic area. Through its RE Dialogue series, it engages BIPOC leaders to present on diverse subjects such as language access for Hispanic/Latino/e/a people & the impact of declining affordable housing on marginalized homeless populations. The RES engages private funders such as the NC Network of Grantmakers & United Way affiliates to fund organizations serving people experiencing homelessness (PEH) & to hold grantees accountable to CoC RE benchmarks, ensuring providers equitably serve marginalized populations & employ staff reflecting populations served (BIPOC, LGBTQ+, PLE). Since participating in HUD's CE Equity CoP in 2022, the CoC has maintained a CE Equity Core Team (CEECT) focused on developing an equitable CE assessment tool. The CoC intentionally selected a diverse membership to bring multiple perspectives (54% BIPOC; 30% PLE; & representation from behavioral health advocates, state staff, faith-based entities, VSPs, PLE of interpersonal violence; Veterans with lived experience; & people identifying as LGBTQ+). The CoC piloted the new assessment in 3 of the CoC's regions in 2023, evaluating its ability to equitably prioritize marginalized populations for housing resources. After gathering pilot area feedback, reviewing demographic & other data, & making updates, the CoC launched the new assessment in 06/24. The CEECT regularly evaluates whether the assessment meets the CoC's equity prioritization goals. The CoC also engages directly with BIPOC communities & agencies to address emerging issues & collaborate on practices to serve underserved populations. In 2024 after an unexpected motel closure in a majority BIPOC community, 50 families (90% BIPOC) immediately became homeless. The CoC worked closely with local government, SO, ES, & PH providers, volunteers, & PHAs (led by BIPOC leadership) to troubleshoot issues, make connections to resources at NC DHHS, & develop procedures based on their & the HHs needs. The CoC facilitated weekly meetings with partners to quickly address interim & permanent housing needs.

| 1B-2. | Open Invitation for New Members. | |
|-------|---|--|
| | NOFO Section V.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 and access for persons with disabilities, including the availability of accessible electronic formats; and | |
| 3. | invited organizations serving culturally specific communities experiencing homelessness in your CoC's geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities). | |

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1) The CoC holds monthly virtual Governance Board (GB) meetings, & our 13 Regional Committees (RCs) also hold regular, local meetings, inviting stakeholders to attend. Any person may attend, ask questions, & provide input on agenda items. The CoC maintains an email distribution list, regularly encouraging stakeholders to join (current list has 424 stakeholders). Emails deliver news, ask for feedback, connect people to resources, & announce policy updates/funding opportunities. Staff regularly engage agencies interested in deeper involvement, inviting them to attend GB & RC meetings & brainstorming ways to build partnerships. 2) The CoC communicates in multiple ways to ensure people have access to relevant information, including recorded webinars, phone calls, posted website materials in multiple formats, & 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 stakeholders & peers to invite/encourage involvement. The GB Nominations Committee engages PLE to join the GB as voting members annually. The CoC's Lived Expertise Advisory Council (LEAC) regularly engages PLE across the CoC's geographic area to join the LEAC, which reviews, evaluates & creates policies & procedures (P&Ps) to decrease disparities & increase project effectiveness & opportunities to educate stakeholders & elected officials. The CoC uses Closed Captioning on web platforms & has engaged ALS interpreters for meetings to ensure hearing impaired individuals can fully participate. 3) Staff have engaged multiple LGBTQ+ organizations in 2024, inviting them to RC meetings to introduce their services & participate in CE & local initiatives. Staff also outreached the Eastern Band of Cherokee Tribe to introduce the CoC & opportunities to form or join the CoC. Staff worked with the NC Commission of Indian Affairs to connect with other state-recognized tribes to invite them to local RC meetings & find ways to work together. The RE Subcommittee (RES) regularly outreaches agencies led by &/or serving BIPOC to join ongoing initiatives such as the subcommittee's RE dialogue series & a burgeoning storytelling project. The most recent RE dialogue series highlighted topics such as language access for Hispanic/Latino/e/a people & the impact of declining affordable housing on marginalized homeless populations.

| 1B-3. | CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. |
|-------|--|
| | NOFO Section V.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; |
| 3. | ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and |
| 4. | took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness. |

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 The CoC has an inclusive governance structure with open meetings to solicit feedback, coordinating multiple participation opportunities through regional & CoC-wide groups & collecting & incorporating diverse thinking into strategy in 3 ways: subcommittees, training, & direct outreach. The GB includes representation from the CoC's RCs & at-large members (representing PLE sector leaders, & NC govt depts (DV, affordable housing, healthcare, DHHS, DPS, DEdu). Membership breadth ensures the CoC considers diverse perspectives in all planning & policy making. Subcommittees include people across the CoC to share local efforts & engage directly in planning to recommend strategies/priorities to the GB. The RES & LEAC bring perspectives from BIPOC & PLE. The CE Council holds listening sessions to gather feedback from PLE who participated in CE as part of its annual evaluation. The CoC vets every policy through subcommittees, surveys, &/or stakeholder conversations, integrating ideas prior to GB approval. In regular training, the CoC educates agencies on policy/strategy & offers opportunities for participants to express local challenges to help the GB update direction to better serve HHs for greater impact. 2) The CoC uses its website/email list to advertise CoC meetings. It publishes all materials prior to GB meetings & includes a feedback loop, typically presenting policies several times prior to approval, soliciting feedback during meetings & encouraging members to gather feedback during RC meetings. All GB & subcommittee meetings are public, allowing anyone with interest to participate virtually or by phone. 3) The CoC communicates in many ways to ensure people have access to relevant information, including recorded webinars, phone calls, posted website materials in multiple formats, & an email address to contact staff directly to connect to resources. The CoC uses Closed Captioning on web platforms & engages ALS interpreters for in-person meetings to ensure hearing impaired individuals can fully participate. 4) The CoC's inclusive design allows input throughout the process to improve its approaches. Subcommittees create & recommend policies & strategies. They regularly report to the GB, asking for feedback & approval. The GB tasks subcommittees to develop procedures for approved policies & strategies, evaluating progress through local data & stakeholder reporting, allowing the CoC to nimbly shift direction based on feedback from people implementing strategies.

| 1B-4. | Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding. | |
|-------|--|--|
| | NOFO Section V.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. | ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats. | |

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1,3) Staff emailed stakeholders upon release of the FY24 NOFO that opened the competition & updated the CoC's website with competition information, instructions, & how to apply for funding. RC leadership forwarded this email to their local email distribution lists. The CoC advertises funding opportunities on its website year-round with CoC staff available for consultation. The CoC announced its intent to apply (ITA) process at public, monthly GB meetings (February-August 2024), on its website, through its email distribution list (424 stakeholders). & in RC meetings & local email lists. CoC staff held a webinar for agencies interested in applying for new FY24 CoC Program projects on 03/13/24, recording & posting the webinar on the CoC website. The webinar explained eligible activities, provided an overview of the application process, defined CoC & HUD thresholds & standards, & encouraged new agencies to submit ITAs & schedule calls to discuss proposed projects. The CoC had individual conversations with 25+ organizations interested in funding that had never been funded through the CoC Program before. The CoC posted approved new & renewal scorecards (on 03/05/24) & FY24 CoC Program Funding Priorities (on 04/02/24) to the website prior to the FY24 NOFO release. Staff assisted agencies to understand project eligibility, CoC priorities, & regional needs. 2) The CoC posted instructions for new & renewal applicants on 08/02/24, highlighting required documents, timelines, & links for submission. Staff emailed stakeholders on 08/02/24 through its email distribution list with links to FY24 CoC Program competition materials & timelines, encouraging RC leadership to forward information to stakeholders & add the topic to meeting agendas. 4) The CoC communicates in many 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 address where people can contact staff directly to schedule meetings/access resources. The CoC uses Closed Captioning on web platforms & engages ALS interpreters for in-person meetings to ensure hearing impaired individuals can fully participate.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2024 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 1C-1. | Coordination with Federal, State, Local, Private, and Other Organizations. |
|-------|--|
| | NOFO Section V.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. | Organizations led by & serving people experiencing interpersonal violence | Yes |

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| | 1C-2. | CoC Consultation with ESG Program Recipier | nts. | | |
|---|--------------------------|---|--|--------------|------------|
| | | NOFO Section V.B.1.b. | | | |
| | | | | | _ |
| | | In the chart below select yes or no to indicate | whether your CoC: | | |
| 1. Consulted wit | th ESG Pr | ogram recipients in planning and allocating ES | G Program funds? | | Yes |
| 2. Provided Poir | nt-in-Time | (PIT) count and Housing Inventory Count (HIC |) data to the Consolidated Plan jurisdic | tions within | Yes |
| | | ness information is communicated and addres | sed in the Consolidated Plan updates? | • | Yes |
| 4. Coordinated v | with ESG I | ecipients in evaluating and reporting performar | nce of ESG Program recipients and sul | orecipients? | Yes |
| | | | | | |
| 1C-3. | | Ensuring Families are not Separated. | | | |
| | | NOFO Section V.B.1.c. | | | |
| | | | | | ¬ |
| | | Select yes or no in the chart below to indicate transitional housing, and permanent housing (family members regardless of each family meidentity: | (PSH and RRH) do not deny admission | or separate | |
| I. Conducted management | andatory t | raining for all CoC- and ESG-funded service pr | roviders to ensure families are not | Yes | |
| <u> </u> | otional trai | ning for all CoC- and ESG-funded service provi | iders to ensure family members are | Yes | |
| 3. Worked with CoC and ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients? Yes | | | | | |
| 4. Worked with I area that migl compliance? | ESG recip ht be out o | ent(s) to identify both CoC- and ESG-funded fa f compliance and took steps to work directly wi | acilities within your CoC's geographic ith those facilities to bring them into | Yes | |
| 5. Sought assist | ance from | HUD by submitting questions or requesting tecce providers? | chnical assistance to resolve | Yes | |
| | | | | | |
| | 1C-4. | CoC Collaboration Related to Children and You | outh–SEAs, LEAs, School Districts. | | |
| | | NOFO Section V.B.1.d. | | | |
| Select yes or no in the chart below to indicate the entities your CoC collaborates with: | | | | | |
| ا د | Vandt E ! | raction Provides | | | lv |
| | | cation Provider | | | Yes Yes |
| - | | cation Agency (SEA) | | | Yes |
| | School Di | | | | No |
| | | | | | 1 |
| | 1C-4a. | Formal Partnerships with Youth Education Pro | oviders, SEAs, LEAs, School Districts. | | |
| | | NOFO Section V.B.1.d. | | | |
| | | | | | _ |
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| | 1 1202 | T OOO Application | raye 10 | 10 | JI 1012024 |

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 stakeholders & 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 RC meetings to share resources & connect with providers serving families with school-age children. The CoC currently funds three CAA to provide RRH resources to families with children. CoC staff participate on statewide committees to provide homeless children access to development resources, childcare, & PH. State-level professionals from the 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 of the CoC GB, providing resources/training to members & connecting RCs to LEAs. CoC staff participate in SEA monthly & annual meetings, providing information to LEAs on CoC processes, resources, & CE education, highlighting ways to connect families with children to housing & services. In 01/24, staff provided an overview of the annual PIT count & solicited feedback & volunteers on locating youth experiencing homelessness on the night of the count. RCs invite LEAs to play a role in the Unsheltered Access Coordination planning & implementation process to identify, engage, & connect people experiencing unsheltered homelessness to services & housing through the CE system. LEAs play an essential role in locating homeless youth, conducting CE assessments, & making referrals to regional by-name lists (BNLs). LEAs serve on committees, provide 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. The CoC collaborates with the NC Dept. of Public Instruction (DPI) which oversees the state's Head Start, Early Head Start, & Public Pre-K programs. Per a CoC agreement, the Head Start Coordinator at DPI provided an initial training to the GB in 10/23 & met with RCs to provide more detailed, geographic resources. She has continued to make herself available for ongoing technical assistance as needed to ensure strong local connections to these programs.

1C-4b. Informing Individuals and Families Who Have Recently Begun Experiencing Homelessness about Eligibility for Educational Services.

NOFO Section V.B.1.d.

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who have recently begun experiencing homelessness of their eligibility for educational services.

| E) (000 (0 0 A 11 11 | 5 44 | 10/10/0001 |
|---------------------------|---------|------------|
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In its programmatic written standards, the CoC adopted specific language to guide funded projects about their responsibilities to connect families with school-age children to available education services. In the service section of the SO, ES, TH, RRH, HP, & PSH written standards, the following guidance 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, & others. Staff will liaise with the local homeless school liaison to ensure coordination, allowing youth to attend their school of origin & receive eligible educational & other services allowable under McKinney-Vento." The CoC's Anti-Discrimination Policy includes a Family Separation Policy, clearly prohibiting children of any gender from separation from their parent(s) despite their age. This allows parents to care for, make decisions, & oversee their children's education. The NC SEA Director serves as an at-large member of the CoC GB. The Head Start Coordinator at DPI provided an initial training to the GB in 10/23 & met with RCs to provide more detailed, geographic resources. She has continued to make herself available for ongoing technical assistance as needed to ensure strong local connections to these programs. She has provided CoC stakeholders local Early Head Start, Head Start, & Public Pre-K contacts & the appropriate referral process for eligible children living in ES or places not meant for human habitation.

C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section V.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 | Yes | 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 | Yes | Yes |
| 9. | Tribal Home Visiting Program | No | No |
| | Other (limit 150 characters) | | |
| 10. | | | |

1C-5. Addressing Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking-Collaboration with Federally Funded Programs and Victim Service Providers.

NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

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|------------------------|---------|------------|

| | Organizations | | | |
|-----------------------|--|-------|--|--|
| 1. | State Domestic Violence Coalitions | Yes | | |
| 2. | State Sexual Assault Coalitions | Yes | | |
| 3. | Anti-trafficking Service Providers | Yes | | |
| | Other Organizations that Help this Population (limit 500 characters) | | | |
| 4. | Rape Prevention Education Coordinator at NC DHHS | Yes | | |
| 1C-5a. | Collaborating with Federally Funded Programs and Victim Service Providers to Address Need Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking. | ds of | | |
| NOFO Section V.B.1.e. | | | | |
| | Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to: | | | |
| 1. | update CoC-wide policies; and | | | |
| 2. | ensure all housing and services provided in the CoC's geographic area are trauma-informed can meet the needs of survivors. | and | | |

1,2) The CoC regularly collaborates with federally-funded projects & VSPs to address the needs of people experiencing interpersonal violence (PEIPV). The CoC has a strong partnership with the NČ Coalition Against Domestic Violence (NCCADV). NCCADV staff (with IPV experience) serve as members of the CoC GB & the CE Council (CEC), which provides opportunities for feedback, support, & survivor perspectives on policies, strategies, procedures, & practices. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure IPV & homeless systems work closely together: NCCADV provides training, focusing on survivor needs, trauma-informed care (TIC), & safety planning. NCCEH provides training & TA to NC VSPs, focusing on homelessness/housing resources & best practices such as Housing First & Harm Reduction. To update its standardized CE assessment, the CoC formed a CE Equity Core Team (CEECT) with diverse membership including VSP staff & PEIPV. The CEECT developed a new assessment to eliminate disparities present in data with the VI-SPDAT. As part of its work, the CEECT engaged stakeholders, including VSPs, to vet, provide feedback, & pilot the new assessment to ensure it met the needs of all people experiencing homelessness (PEH), including PEIPV. From the CEECT's assessment work & in conjunction with staff at NCCADV, the CoC updated its approach to CE for survivors, which increased access, alleviated safety concerns, & accelerated survivor move into PH. The CoC will continue to evolve its CE system for survivors in 2025 by centralizing CE activities at the CoC-level supported by a planned SSO-CE DV Bonus project. NCCEH staff serve as a member of NCCADV's CDC-funded Delta State Steering Committee (SSC). The SSC brings together voices from VSPs, survivors, the NC Coalition Against Sexual Assault (NCCASA), NC DHHS' Rape Prevention Education (RPE) dept. & others to oversee the NC IPV prevention plan. The SSC provides a framework to collect data, engage with state/local prevention programs, & document & plan for best practice training such as TIC. The CoC is currently working with NCCADV, NCCASA, & RPE to hold a kick-off roundtable with the DV, SA, & human trafficking coalitions in 2025 as a mechanism to develop a comprehensive housing plan for survivors centered in TIC practices by the end of 2025. CoC staff, with the assistance of NCCADV, provides 1:1 training/TA to PH & service providers to incorporate TIC practices to meet the needs of all PEH including PEIPV.

| 1C-5b. | Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking. | |
|--------|---|---|
| | NOFO Section V.B.1.e. | |
| | | • |
| | Describe in the field below how your CoC's coordinated entry addresses the needs of DV survivors by including: | |
| 1. | safety planning protocols; and | |
| 2. | confidentiality protocols. | |

| | | • |
|------------------------|---------|------------|
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1,2) CoC staff provide ongoing TA that includes trauma-informed, survivorcentered services & partners with NCCADV, NCCASA, & NC DHHS' RPE Dept to enhance training & connect providers to ongoing resources to operationalize practice for survivors. NCCEH staff serve as a member of NCCADV's CDCfunded Delta State Steering Committee (SSC). The SSC provides a framework to collect data, engage with state/local prevention programs/activities, & document & plan for best practice training/TA such as TIC, safety planning, & confidentiality protocols. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure IPV & homeless systems work closely together: NCCADV provides training, focusing on survivor needs, trauma-informed care (TIC) safety planning, & confidentiality protocols. NCCEH provides training & TA to NC VSPs, focusing on homelessness/PH resources & best practices such as Housing First & Harm Reduction. NCCEH & NCCADV record trainings & post recordings/resources 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 where confidentiality remains paramount & consults with individual CE Leads to discuss local challenges & form baselines to use for individual TA with VSPs, homeless service providers. & CE staff. With a funded DV Bonus RRH project called Safe at Home, NCCADV & CoC staff have regularly provided training to CE staff on practices such as trauma-informed, survivor-centered approaches, safety planning, & confidentiality protocols. CoC staff, during monthly calls with CE Leads, have a standing agenda item to discuss survivor connections to the CE system, challenges local communities face with providing access & services to survivors, & resources needed to improve survivor success. CoC staff routinely partner with regional CE Leads to engage VSPs unwilling to participate in CE due to safety & other concerns. This provides an opportunity for staff to educate VSPs & for VSPs to provide insight to the CoC about how to better partner & evolve approaches to be more trauma-informed. The CoC with its partners provide TA, training, & resources to project staff on trauma-informed, survivorcentered practices multiple times each week.

1C-5c. Coordinated Annual Training on Best Practices to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

NOFO Section V.B.1.e.

In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

| | | Project Staff | Coordinated Entry Staff |
|----|---|---------------|----------------------------|
| 1. | Training Occurs at least annually? | Yes | Yes |
| 2. | Incorporates Trauma Informed best practices? | Yes | Yes |
| 3. | Incorporates Survivor-Centered best practices? | Yes | Yes |
| 4. | Identifies and assesses survivors' individual safety needs? | Yes | Yes |
| 5. | Enhances and supports collaboration with DV organizations? | Yes | Yes |
| 6. | Ensures survivors' rights, voices, and perspectives are incorporated? | Yes | Yes |
| | Other? (limit 500 characters) | | |

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| 7. VAWA Emergency T | ransfer Plan training | Yes | Yes |
|---------------------|---|----------------------|-----|
| | | | |
| 1C-5d. | Implemented VAWA-Required Written Emergency Transfer Plan Policies an Domestic Violence, Dating Violence, Sexual Assault, and Stalking. | nd Procedures for | |
| | NOFO Section V.B.1.e. | | |
| | | | _ |
| | Describe in the field below: | | |
| 1. | whether your CoC's written policies and procedures include an emergency t | transfer plan; | |
| | how your CoC informs all households seeking or receiving CoC Program as | sistance about their | |
| 2. | rights to an emergency transfer; | | |
| | | | _ |

1) The CoC updates its VAWA Emergency Transfer Plan (VETP) & provides a training webinar for all providers across the geographic area annually. CoC staff record & post the webinar for people unable to attend the live event & require all funded projects to confirm they have reviewed the training. The CoC collaborates with partner VSPs as well as NCCADV to ensure that the plan continues to take a trauma-informed, survivor-centered, low-barrier approach & meets the needs of survivors. The CoC GB approved the updated VETP at its 05/07/24 meeting & held a mandatory training for project staff on 05/24/24. 2) The VETP requires all projects to provide a Notification of Occupancy Rights Under VAWA at the time they are admitted into the project, when physically housed in PH, and with any notification of eviction or termination of assistance. 3) The VETP requires all agencies to 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 on their behalf to secure a safe & timely transfer. To request an emergency transfer, a participant shall notify their housing provider's management office, submitting a written self-certification & request for transfer. For people with disabilities or who are unable to provide a written self-certification, projects must adjust their requirements to allow for verbal communication of the need for a transfer. The VETP prohibits projects from requiring third party documentation to approve an emergency transfer. 4) Upon an emergency transfer request, agencies must inform CoC staff of any request, providing relevant, de-identified information about the HH. Staff log all requests, periodically following up on the status of the transfer. Providers work with HHs to determine next steps based on the safety needs & desires of the HH, working to find another suitable, safe unit within their catchment area or working with CoC staff to connect to other areas within or outside the CoC upon request by the participant. Once the transfer is complete or the HH indicates they do not desire a transfer, providers inform the CoC of the transfer outcome.

| 1C-5e. | Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking. | |
|--------|---|--|
| | NOFO Section V.B.1.e. | |
| | | |
| | Describe in the field below how your CoC ensures households experiencing trauma or a lack of | |

Describe in the field below how your CoC ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

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|------------------------|---------|------------|

Since 2014, NCCADV staff has served as a CE Council (CEC) member. The CEC developed P&Ps in conjunction with a variety of stakeholders including VSPs & PLEIPV, providing feedback, support, & perspective. NCCEH & NCCADV collaborate on a variety of initiatives. The CoC relies heavily on NCCADV's expertise on trauma-informed care (TIC), survivor-centered services, & safety & confidentiality protocols, ensuring the CoC-level & programmatic P&Ps integrate these approaches. As part of CE, providers conduct a Prevention & 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 HH who threatens or makes you feel fearful?" Upon yes, the CoC immediately refers the HH to a local VSP. ČE accounts for survivor HHs referred through VSPs outside HMIS with CE Leads manually adding HHs with a unique code to the BNL. VSPs participate in local case conferencing meetings, providing relevant (sans PII) & serving as liaisons when CE makes referrals for survivor HHs to PH providers. The CoC launched a CoC-wide, DV Bonus RRH project in 10/22. Under NCCADV's oversight, 9 selected VSPs & 4 homeless service providers accept referrals from local BNLs for HHs meeting category 4 of the homeless definition, providing housing location, financial assistance, & housing stabilization services. This project expands the capacity of the CoC to serve survivor HHs, specifically utilizing providers dedicated to helping survivors. NCCEH, as the Collaborative Applicant, will apply for a new SSO-CE DV Bonus project in the FY2024 competition to create a separate, survivor-centered CE system, complementary to the current CE system. The survivor-centered system will centralize all aspects of the system to provide better service & housing referral coordination & address key concerns from non-participating VSPs about the safety & confidentiality of CE. Added NCCEH CE staff will engage non-participating VSPs & work closely with NCCADV, NCCASA, & RPE staff to develop updated protocols for the new system & encourage deeper CE participation. NCCEH will contract with a comparable database provider to house all data related to the new survivor-centered CE system, allowing for more seamless, comprehensive data collection & evaluation.

| 1C-5f. | Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking. | |
|--------|--|--|
| | NOFO Section V.B.1.e. | |
| | | |
| | Describe in the field below how your CoC ensures survivors receive safe housing and services by: | |
| 1. | identifying barriers specific to survivors; and | |
| 2. | working to remove those barriers. | |

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|------------------------|---------|------------|

1,2) CoC staff serve as a member of NCCADV's CDC-funded Delta State Steering Committee (SSC). The SSC brings together voices from VSPs. survivors, NCCASA, NC DHHS' RPE dept, & others to oversee the NC IPV prevention plan. The SSC provides a framework to collect data, engage with state/local prevention programs/activities, & document & plan for best practice training such as trauma-informed care & safety planning. The SSC plays a key role in identifying barriers survivors experience when seeking safe housing & survivor-centered services. The CoC uses information culled from the SSC to understand where these identified barriers exist in the homeless service system & collaborate with VSPs, non-VSPs, the CE Council (CEC), & CE Leads to eliminate barriers. CoC staff hold monthly calls with regional CE Leads. Staff & CE Leads discuss ongoing access & capacity challenges with a special focus on survivors. Staff brainstorm solutions to these challenges & organize them for discussion at CEC meetings, which uses the brain trust of all regional CE Leads & statewide members, including staff from NCCADV. Challenge discussions & potential solutions at the CEC inform ongoing updates to CE P&Ps to improve safe, comprehensive access for survivors. While the CE system continues to evolve to increase the safety & improve confidentiality protocols for survivors, the majority of VSPs within the CoC's geographic area decline to participate or limit their participation in CE because of ongoing safety concerns. With the help of NCCADV, NCCASA, RPE staff, & participating & non-participating VSPs, the CoC has approved NCCEH, as the Collaborative Applicant, to apply for an SSO-CE DV Bonus project in the FY2024 competition. This new project will create a separate, survivor-centered CE system, complementary to the current CE system. The survivor-centered system will centralize all aspects of the system to provide better service & housing referral coordination & address key concerns from non-participating VSPs about survivor safety & confidentiality. A separate, centralized, survivor-specific CE system will incorporate key protocols important to non-participating VSPs, reducing survivor barriers to access safe housing & services based on their immediate & long-term needs.

| 1C-6. | | Addressing the Needs of Lesbian, Gay, Bisex Policy and Equal Access Trainings. | kual, Transgender and Queer+–Anti-Di | scrimination | | |
|-------|-------|---|--|-----------------------------------|--------------------------|-----|
| | | NOFO Section V.B.1.f. | | | | |
| | | | | | | |
| | | Did your CoC implement a written CoC-wide and families receive supportive services, shelter, and | | .GBTQ+ individ | uals and | Yes |
| | 2. | Did your CoC conduct annual CoC-wide trainin to Housing in HUD Programs Regardless of Se | ng with providers on how to effectively i exual Orientation or Gender Identity (E | mplement the E qual Access Fin | qual Access al Rule)? | Yes |
| | | Did your CoC conduct annual CoC-wide trainin Accordance With an Individual's Gender Identil Identity Final Rule)? | g with providers on how to effectively i ty in Community Planning and Develop | mplement Equa ment Programs | l Access in Gender | Yes |
| | | | | | | - |
| | 1C-6a | Anti-Discrimination Policy–Updating Policies–Compliance–Addressing Noncompliance. | -Assisting Providers–Evaluating | | | |
| | | NOFO Section V.B.1.f. | | | | |
| | | Describe in the field below: | | | | |
| | 1. | how your CoC regularly collaborates with LGI wide anti-discrimination policy, as necessary CoC are trauma-informed and able to meet the | to ensure all housing and services pro | vided in the | | |
| | FY202 | 24 CoC Application | Page 18 | 10/ | 16/2024 | |

2. how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;

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 annually, providing training to providers & stakeholders. It uses 2 subcommittees, RE & Lived Expertise Advisory Council (LEAC), to review & update current policies. They gather feedback through surveys on challenges, consider other CoC policies, engage LGBTQ+ & other organizations serving marginalized populations, & research emerging best practices to inform updates. The GB approved the annual ADP update at its 10/1/24 meeting & staff held a mandatory training for providers on 10/7/24. Staff recorded & posted the training on the CoC website immediately after. The CoC requires all funded agencies not in attendance at the live training to confirm that project staff watched the recorded webinar. The ADP requires providers to include a compliant ADP as part of project P&Ps. This includes a plan to train new staff & an annual training on the ADP; intake procedures that provide the plan to all participants; reference to HUD's Equal Access Rule, privacy laws, & other federal, state, and local laws; an equal access policy that includes LGBTQ+, transgender, & gender non-confirming 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 to help agencies ensure they have all required elements in their ADP. 3) Upon initial adoption of the CoC-wide ADP, all funded agencies submitted P&Ps demonstrating compliance. Since initial review, the CoC evaluates project P&Ps as part of the annual CoC & ESG competitions. The CoC prioritizes agencies for funding having compliant ADPs. Agencies approved without a compliant ADP must show proof of the addition of an ADP policy 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 cites administration, the agency must identify a neutral body, such as a Board subcommittee, to make decisions about any grievance; c) if the client is not satisfied with an outcome or fears retaliation, a complaint may be filed with NCCEH. NCCEH follows up, collecting client & agency documentation. If an agency has disregarded the ADP, staff will work on a performance improvement plan, &/or in the most egregious situations, inform the GB to take remedial action up to and including terminating funding.

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

NOFO Section V.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 current 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:

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| Public Housing Agency Name | Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 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 | 30% | No | Yes |
| Western Piedmont Council of Governments | 24% | Yes-HCV | No |

| 10.70 | Written Policies on Homeless Admission Preferences with PHAs. | |
|-------|--|--|
| | | |
| | NOFO Section V.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. | |

1) 104 PHAs provide public housing units or vouchers in the CoC. The CoC regularly engages PHAs, including two of the largest, to adopt preferences. Western Piedmont Council of Governments (WPCOG), the CoC's fourth largest PHA, has adopted a preference for people experiencing homelessness. & the Greenville Housing Authority (GHA), the CoC's third largest PHA, has adopted a preference for Moving On clients from PSH. Both WPCOG & GHA have a history of leadership in their respective Regional Committees (RC) & partner with the CoC & its providers to provide & secure affordable units for people experiencing homelessness. The CoC invites PHAs to regular RC meetings, provides information/data about homelessness in their catchment areas. & works with PHA staff to adopt preferences for HHs experiencing homelessness. CoC staff, with local stakeholders, educate & assist PHAs to implement preferences in their Admin Plans. CoC staff collaborate with PIH & CPD staff at the HUD Field Office in Greensboro, engaging individual PHAs together when challenges & questions arise & regularly hold training/informational webinars for PHAs across the CoC to understand CoC work, goals, & local collaborations in which they can get involved. The CoC has built strong relationships with the majority of PHAs that received EHVs & Stability Vouchers. CoC staff have begun to have conversations with these PHAs about the next phase of our collaboration now that EHVs have been leased & a plan for Stability Vouchers has been launched. This includes applying for & incorporating preferences for any available mainstream, FUP, FYI, & other voucher opportunities. CoC staff worked with RC leadership to identify PHAs already involved in CoC work but do not have a preference. In fall 2024, CoC staff will partner with local housing providers to schedule introductory conversations with identified PHAs to discuss potential collaborations, including the adoption of preferences for general, family, &/or Veteran homelessness &/or Moving On from PSH/RRH. Staff will assist PHAs to update their Admin Plans & provide TA to local providers & PHAs upon launch of any preference, addressing referral challenges, barriers, & lease up issues. 2) N/A.

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| | 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 | Multifami | ly assisted housing owners | | Yes |
| 2 | + | • | | Yes |
| 3 | | me Housing Tax Credit (LIHTC) developments | | Yes |
| 4 | ļ | /-income housing programs | | Yes |
| | | nit 150 characters) | | |
| 5 | NC DHH | S Targeted/Key Program | | Yes |
| | 1C-7c | Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. | | |
| | | NOFO Section V.B.1.g. | | |
| | | In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process: | r | |
| | 1. | Emergency Housing Vouchers (EHV) | Yes | |
| | | Family Unification Program (FUP) | No | |
| | | Housing Choice Voucher (HCV) | Yes | |
| | 4. | HUD-Veterans Affairs Supportive Housing (HUD-VASH) | Yes | |
| | | Mainstream Vouchers | Yes | |
| | 6. | Non-Elderly Disabled (NED) Vouchers | No | |
| | 7. | Public Housing | Yes | |
| | 8. | Other Units from PHAs: | | |
| | | Stability Vouchers | Yes | |
| | 1C-7d | . Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessne | ss. | |
| | | | | |
| | | NOFO Section V.B.1.g. | | |
| | | | | |
| | 1 | | Yes | |
| | 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 | | ram Funding Sour |

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| 1C-7e. | Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). | |
|--------------------|---|-----|
| | NOFO Section V.B.1.g. | |
| | | |
| Did Vou Plar | your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice chers dedicated to homelessness, including vouchers provided through the American Rescue | Yes |

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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide; Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| | 1D-1 | 1. Preventing People Transitioning from Public Systems from Experiencing | Homelessness. | |
|---|--|--|---|------------|
| | | NOFO Section V.B.1.h. | | |
| | | Select yes or no in the chart below to indicate whether your CoC actively public systems listed to ensure persons who have resided in them longe discharged directly to the streets, emergency shelters, or other homeles | r than 90 days are not | |
| 1 | . Prisons | s/Jails? | Yes | |
| 2 | . Health | Care Facilities? | Yes | |
| 3 | . Reside | ential Care Facilities? | Yes | |
| 4 | . Foster | Care? | No | |
| | 1D-2 | 2. Housing First–Lowering Barriers to Entry. | | |
| | 1D-2 | Housing First–Lowering Barriers to Entry. NOFO Section V.B.1.i. | | |
| | 1. E | , | H, SSO non-coordinated for in FY 2024 CoC | 20 |
| | 1. [| NOFO Section V.B.1.i. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying | for in FY 2024 CoC H. SSO non-coordinated | |
| | 1. I F | NOFO Section V.B.1.i. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition. | for in FY 2024 CoC H, SSO non-coordinated for in FY 2024 CoC RH, SSO non- has ranked in its CoC they are lowering | 20 |
| | 1. I F | NOFO Section V.B.1.i. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition that have adopted the Housing First approach. This number is a calculation of the percentage of new and renewal PSH, R Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC Priority Listing in the FY 2024 CoC Program Competition that reported that | for in FY 2024 CoC H, SSO non-coordinated for in FY 2024 CoC RH, SSO non- has ranked in its CoC they are lowering | 20 20 100% |
| | 1. I E E E E E E E E E E E E E E E E E E | NOFO Section V.B.1.i. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition. Enter the total number of new and renewal CoC Program-funded PSH, RRIentry, Safe Haven, and Transitional Housing projects your CoC is applying Program Competition that have adopted the Housing First approach. This number is a calculation of the percentage of new and renewal PSH, R Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC Priority Listing in the FY 2024 CoC Program Competition that reported that | for in FY 2024 CoC H, SSO non-coordinated for in FY 2024 CoC RH, SSO non- has ranked in its CoC they are lowering | 20 |

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

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Describe in the field below:

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| 1. | how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach; |
|----|---|
| 2. | the list of factors and performance indicators your CoC uses during its evaluation; |
| | how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach; and |
| 4. | what your CoC has done to improve fidelity to Housing First. |

1,3) The CoC ensures Housing First (HF) compliance in 3 key ways: a) staff hold monthly calls with CE Leads, reviewing BNLs, ensuring CE prioritizes HHs & confirming agencies take prioritized HHs. CE Leads provide insight on referrals to funded agencies, identifying challenges or issues with providers who might be in violation of HF approaches by declining to accept HHs because of no income, criminal history, substance use, treatment or service compliance, or other issues that would be a barrier to PH. When identified, staff schedule calls with providers to develop a plan to adjust practices to meet HF standards; 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 with an exhibit identifying areas of improvement, meeting with staff to discuss challenges & timelines; c) the CoC reviews applicant P&Ps during funding competitions to ensure fidelity to HF. The CoC only approves new applicants that adhere to HF approaches. Returning applicants with updated P&Ps that no longer follow a HF approach must accept TA & update any non-HF P&Ps as a condition of future funding; 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 (high #s of terminations or for reasons other than those outlined in written standards could indicate using non-HF approaches); the # & types of participant disabling conditions (low/no disabilities could indicate projects screen our high need HHs); HH #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 people); cash income at enrollment (large #s of HHs with income could indicate income requirements); & length of participation (PSH: HHs exiting <2 years could indicate wrongful termination; RRH: HHs with à similar length of participation could indicate a standard package rather than a progressive approach based on HH need).

| 1D-3. | Street Outreach-Data-Reaching People Least Likely to Request Assistance. | |
|-------|--|---|
| | NOFO Section V.B.1.j. | |
| | Describe in the field below how your CoC tailored its street outreach to people experiencing | 1 |

homelessness who are least likely to request assistance.

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To ensure full SO coverage to engage people experiencing unsheltered homelessness (PEUH), especially people least likely to request assistance, the CoC has implemented an unsheltered access coordination initiative. Each Regional Committee (RC) elects an Unsheltered Access Coordinator (UAC) who works with stakeholders to develop plans that outline: a) the SO plan including frequency/ownership of services; b) ID of basic needs resources such as food, tents, all-weather gear; c) the process to make referrals to the CE system, & enter HMIS data; d) ID of responsible parties to navigate PEUH through CE to access services & PH; e) ES engagement to access ES until PH becomes available & f) plan to involve PLEH to provide peer & other supports. Currently, 23% of UACs have experienced homelessness with 67% of them having a history of unsheltered homelessness. UACs work closely with Back@Home BoS (B@H BoS) rehousing teams. Launching in 01/24, the SNOFO-funded B@H BoS program uses multi-disciplinary teams to provide a continuum of services to people with severe service needs, targeting PEUH. B@H BoS staff provide all levels of services, engaging PEUH where they live or gather; providing basic needs; enrolling them into supportive services; conducting CE assessments; navigating them through CE to access ES, supportive services, income supports, mainstream benefits, & other services; & helping them locate/maintain PH. B@H BoS staff help PEUH transition from homelessness to PH, providing housing stabilization services until they successfully stabilize & exit the PH program. 22% of B@H BoS direct service staff have experienced homelessness with 90% of this staff experiencing unsheltered homelessness. 78% of B@H BoS supervisory staff have lived experience of homelessness, which helps rehousing teams better understand the special needs of PEUH, especially people least likely to request assistance. The CoC provides ongoing training, holding webinars for UACs & other SO staff to understand the approach working with PEUH, especially people with the greatest vulnerabilities & who have not historically accessed the system. Webinars focus on best practices such as Harm Reduction, Housing First, & Trauma-Informed Care, outlining basic principles & providing scenarios from experienced SO staff on how to successfully work with disenfranchised HHs. CoC staff hold monthly implementation meetings with UACs to discuss ongoing initiatives, brainstorm challenges, & share data.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

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

| | Your CoC's Strategies | Engaged/Educated Legislators and Policymakers | Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness |
|----|---|---|--|
| 1. | Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness? | Yes | Yes |
| 2. | Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places? | Yes | Yes |

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| | Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places? | Yes | Yes |
|----|--|-----|-----|
| 4. | Other:(limit 500 characters) | | |
| | N/A | No | No |

| Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS. | |
|---|--|
| NOFO Section V.B.1.I. | |

| | HIC Longitudinal HMIS Data | 2023 | 2024 |
|--|----------------------------------|------|------|
| Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR. | HIC | 515 | 592 |

| 1D-6. | Mainstream Benefits-CoC Annual Training of Project Staff. | |
|-------|---|--|
| | NOFO Section V.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:

| | | CoC Provides Annual Training? |
|----|--|----------------------------------|
| 1. | Food Stamps | Yes |
| 2. | SSI–Supplemental Security Income | Yes |
| 3. | SSDI–Social Security Disability Insurance | Yes |
| 4. | TANF-Temporary Assistance for Needy Families | Yes |
| 5. | Substance Use Disorder Programs | Yes |
| 6. | Employment Assistance Programs | Yes |
| 7. | Other (limit 150 characters) | |
| | Medicaid | Yes |

| 1D-6a. | Information and Training on Mainstream Benefits and Other Assistance. |
|--------|---|
| | NOFO Section V.B.1.m |
| | |
| | Describe in the field below how your CoC: |
| 1. | works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and |
| 2. | promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff. |

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1) NC became a Medicaid expansion state in 12/23. CoC staff sit on subcommittees overseeing the expansion implementation, offering insight into the rollout plan for vulnerable populations. The CoC partnered with the NC DHHS Medicaid Office & the NC Interagency Council on Coordinating Homeless Programs to train (in 07/24) all providers in the CoC on expansion. The webinar provided access to resources providers can use to engage vulnerable populations; information on how to help PEH apply for, & once approved, access local healthcare resources; & ways to join NC's Medicaid ambassador program to assist local stakeholders navigate the system when helping PEH apply for Medicaid. CoC staff integrate healthcare engagement best practices into all TA activities with project staff, helping them identify local healthcare resources such as FQHCs, hospitals, & public health departments. As needed, CoC staff work with them to hold conversations with these entities to identify ways to collaborate. NC recently moved to a Tailored Plan model, shifting long-time Managed Care Organizations to Medicaid-supported organizations tailored to meet the needs of the most vulnerable populations with behavioral health issues, including PEH, 3 of 4 Tailored Plan Organizations have CoC-funded PSH & RRH projects & serve as subrecipients in the CoC's recently launched SNOFO-funded Back@Home BoS (B@H BoS) rehousing program. The B@H BoS recipient, the NC Office of Recovery & Resiliency (NCORR), worked closely with the CoC during the application, planning, & program implementation processes to engage the NC DHHS Medicaid office to increase access to Medicaid services for participating HHs. CoC staff present at B@H BoS training webinars & have 1:1 TA conversations with subgrantees that focus on improving practice, including connections to healthcare services. 2) NCCEH serves as the NC SOAR Lead, promoting SOAR as a best practice to access SSA benefits & Medicaid. NCCEH employs a Project Specialist who engages communities & providers to educate them on SOAR, help them access certification training, provide TA, liaise with local SSA & DDS staff who accept & make decisions on cases. In 2024, SOAR staff has presented at the CoC's 13 RCs to introduce SOAR & engaged interested agencies wanting more information. CoC & SOAR staff engaged NC's largest hospital provider, which indicated an interest in funding dedicated SOAR workers in NC communities where their 15 major hospitals reside.

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

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 While people in the sector have long known that homelessness is a public health crisis, the pandemic underscored for the larger community how precarious the lives of PEH can be. The pandemic forced CoCs & 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, NC DHHS, FQHCs, hospital systems, & others. These relationships forged during the crisis allowed communities to bring experts to the table to discuss, plan for. & develop P&Ps to respond to emerging infectious disease outbreaks but also institutionalize P&Ps for future outbreaks as well. Having state & local public health partners at the table on a regular basis helps the CoC & its partners create & update policies, especially important with the emergence of future public health emergencies. This assists the CoC to divert HHs presenting for services; problem solve other, safer options for ES; identify potential funding sources to quickly implement safety initiatives; & highlight other resources local providers need to ensure continued service delivery while maintaining staff & participant safety. 2) During the pandemic, NCCEH held weekly COVID local leadership calls, inviting NC leaders including staff from NC DHHS & NC Dept. of Public Safety to share resources, address challenges, & work on protocols for safety of PEH. As the pandemic became endemic, NCCEH shifted to monthly calls & set agendas focused on long-term system planning, offering examples of emerging best practices; space for state & local experts & homeless providers & leaders to share & develop ideas; & time to build stronger relationships. Calls reflect ongoing system challenges, including ongoing/emerging public health issues, with call participants brainstorming ideas, developing solutions, & creating new, stronger infrastructure to address future disease outbreaks.

| ID-7a. | Collaboration With Public Health Agencies on Infectious Diseases. |
|--------|---|
| | NOFO Section V.B.1.n. |
| | |
| | Describe in the field below how your CoC: |
| 1. | effectively shared information related to public health measures and homelessness; and |
| | facilitated 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. |

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1, 2) Since 03/20, NCCEH has held regular local leadership calls. While initially a response to the COVID-19 outbreak to bring together state & local leaders to share updates, resources, & emerging trends, as the pandemic became endemic. NCCEH shifted to monthly calls & set agendas focused on long-term system planning, offering examples of emerging best practices; space for state & local experts & homeless providers & leaders to share & develop ideas; & time to build stronger relationships. Calls reflect ongoing system challenges, including ongoing/emerging public health issues, with call participants brainstorming ideas, developing solutions, & creating new, stronger infrastructure to address future disease outbreaks. Upon updates to CE assessment & prioritization due to public health emergencies, CoC staff train stakeholders about new prioritization protocols & update resources on the CoC website for regional CE Leads to use as they organize local BNLs & facilitate discussions during case conferencing to prioritize HHs. With a CoC-wide email distribution list. CoC staff forward public health news & resources to stakeholders & connect them to emerging public health best practices & initiatives, highlighting upcoming trainings & TA opportunities to help communities & providers develop strong, pro-active plans to address public health emergencies before crises emerge. As communities & providers seek resources, CoC staff schedule individual calls to discuss public health initiatives, connect them to local & state resources through NC DHHS, NC Dept. of Public Safety (NC DPS), health departments, FQHCs, & hospital systems, & facilitate conversations to plan for future public health emergencies. During the pandemic, CoC staff helped Regional Committees (RC) & individual SO/ES providers connect to Emergency Management Departments, hospital systems, & FQHCs. The partnerships formed during the pandemic have continued to play a key role in ongoing conversations & planning for future public health emergencies. CoC staff bring providers, RC leadership, & local emergency service personnel together to have conversations to discuss challenges, connections to resources, & planning. When difficulties arise where provider agencies & CoC staff cannot adequately connect to local emergency resources, CoC staff use connections at the state level with the NC DHHS and NC DPS to liaise with county emergency management personnel.

| 1D-8. | Coordinated Entry Standard Processes. |
|-------|---|
| | NOFO Section V.B.1.o. |
| | |
| | Describe in the field below how your CoC's coordinated entry system: |
| 1. | can serve everybody regardless of where they are located within your CoC's geographic area; |
| 2. | uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC; |
| 3. | collects personal information in a trauma-informed way; and |
| 4. | is updated at least annually using feedback received from participating projects and households that participated in coordinated entry. |

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 The CoC uses a decentralized approach to CE, dividing into 13 local referral zones, which the Regional Committees (RC) facilitate with oversight by the CEC. These zones designate access points, hold case conferencing, populate BNLs. & facilitate referrals to providers. Every RC implements a local plan based on the CoC's CE written standards overseen & facilitated by a CE Lead. They ensure that all counties within the RC conducts regular engagement of providers, comprehensively advertise the system to guarantee community-wide access, & work closely with elected UACs & B@H BoS providers to outreach PEUH. 2,3) The CoC currently uses 2 standardized assessments. The first, called the Prevention & Diversion Screen, uses front door providers to divert HHs to safe, natural resources, when possible, rather than entering the system. The tool begins with a question on HH safety; if the HH is experiencing IPV, it is immediately referred to a local VSP. The second, called HART (Homeless Assessment & Referral Tool), measures vulnerability & assists CE to determine HH prioritization & PH intervention. The CoC formed a CE Equity Core Team (CEECT) with diverse membership including VSP staff & PEIPV. The CEECT developed HART to address disparities present in VI-SPDAT data. The CEECT engaged stakeholders to vet, provide feedback, & pilot HART to ensure it collected the minimal amount of personal information with a trauma-informed approach. Prior to HART launch, the CoC provided extensive training to assessors, explaining all questions & how to approach interviews with a traumainformed approach. The CoC developed a detailed guide for assessors, outlining ways to build rapport, gently explain questions, & help participants understand data collection, confidentiality protocols, & uses of information. 4) The CoC conducts an annual CE evaluation. The CoC surveys participating project staff & HHs that currently use or recently experienced CE. The CEC uses evaluation feedback to identify annual goals to improve CE, setting timelines for updates & communicating using a continuous feedback loop to system leaders & providers about changes in implementation. The CEECT, as part of HART rollout, developed an evaluation plan to analyze progress. The plan uses both quantitative & qualitative data (gathered from HMIS, surveys, & focus groups) to identify challenges & quickly address issues, making assessment updates when necessary to better serve HHs presenting for services.

| | Coordinated Entry-Program Participant-Centered Approach. | |
|----|--|--|
| | NOFO Section V.B.1.o. | |
| | 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; | |
| | ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and | |
| 4. | takes steps to reduce burdens on people seeking assistance. | |

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1) The CoC works with SSVF providers, VAMCs, law enforcement, health care systems, DSS, local govt depts, & others to identify HHs who may have trouble accessing CE. The CoC partners with healthcare care systems & VSPs to provide language lines & communication options for people with disabilities or use ESL. Each Regional Committee (RC) elects an Unsheltered Access Coordinator (UAC) to facilitate a local plan to identify & connect all PEUH to CE. Plans outline procedures for assertive & passive outreach; agencies responsible for providing basic needs, ongoing services, conducting the CE assessment, & entering HMIS data; & outreach frequency. Plans also define how RCs will navigate PEUH through the system, highlighting how they would work with local ES for access to interim housing. With the launch of the SNOFO-funded Back@Home BoS (B@H BoS) rehousing program in 01/24, all regions have dedicated, funded outreach services. Targeting HHs with severe service needs, B@H BoS providers conduct outreach services across their catchment areas & serve as a point of contact for community stakeholders to call when a PEUH has been identified. 2) ES use the Prevention & Diversion Screen to divert HHs when applicable so as to prioritize beds for HHs with no other options. The CoC uses the Homeless Assessment & Referral Tool (HART) along with a prioritization schedule to prioritize HHs most in need of assistance. B@H BoS targets HHs with severe service needs for housing navigation & PH placement, both assessing high needs HHs for CE connection & taking all referrals from CE identified with highest service needs on the BNL. 3,4) The CoC uses local case conferencing meetings to refer HHs with severe service needs for services & PH. Upon launch in 01/24, B@H BoS providers began accepting referrals of HHs with severe service needs, engaging them in places convenient for them, providing regular outreach & navigation services, & assisting them to access PH resources. While experiencing homelessness, B@H BoS providers assist PEUH access interim housing through local ES or pay for temporary stays in hotels while searching for PH; help HHs apply for public benefits; collect documentation needed for PH access (e.g., birth certificates, social security cards); & access other services HHs self-identify. Since launch, B@H BoS has enrolled & provided navigation services to 1,047 HHs with severe service needs & permanently housed 221 HHs.

| 1D-8b. | Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations. |
|--------|---|
| | NOFO Section V.B.1.o. |
| | |
| | Describe in the field below how your CoC through its coordinated entry: |
| 1. | affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness; |
| 2. | informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and |
| 3. | reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan. |

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 The CoC uses multiple strategies to affirmatively market housing & services across the geographic area to ensure it reaches all PEH. Each Regional Committee has a specific advertising & outreach plan to educate homeless providers, non-homeless human service providers, local government staff, libraries, & faith communities to understand the CE system & how to access it. They provide educational materials to partners to post in their facilities &/or on online platforms. CoC staff & regional CE Leads maintain website information where PEH can connect to services & PH. CoC staff regularly update CE contact information with state agencies & elected official offices so they can redirect calls from PEH quickly & appropriately. Regional CE Leads & local providers outreach & engage property providers to discuss the homeless service system, including CE, the services it offers, & the HHs it supports. They work extensively across the CoC, including geographic areas not usually available to PEH, to encourage property providers to work with programs supporting PEH. The CoC works closely with the NC Coalition Against DV. VAMCs, SSVF programs, youth programs, Child Protective Services Depts, & school liaisons to address the specific needs of PEIPV, Vets, & youth experiencing homelessness to ensure they have the tools & means to connect their prioritized populations to services & PH. 2,3) The CoC developed & approved a Fair Housing Policy (FHP) in 10/24, which provides an overview of the Fair Housing Act, defines affirmative outreach & engagement, recordkeeping requirements, & CE & provider requirements. Per the FHP, regional CE Leads & all participating SO, ES, TH, RRH, & PSH programs provide Fair Housing (FH) information to every HH seeking services. This information includes FH basics, ways to connect to CE or provider staff to seek assistance when HHs believe their FH rights have been violated, & information on filing a FH complaint. Each agency providing CE &/or housing services post basic information on FH rights & remedies in facilities where they would be conducting intakes or assessments. CE & provider staff assist HHs to request reasonable accommodations & modifications when seeking PH, assist HHs to file FH complaints, refer HHs to legal services, & notify the PJ & the CoC when a FH complaint has been filed. CoC staff use data collected through submissions to collaborate with PJs to understand FH violations & develop & update strategies to address issues.

| 1D-9 | Advancing Racial Equity in Homelessne | ess-Conducting Assessment. | |
|-------|--|--|------------|
| | NOFO Section V.B.1.p. | | |
| | | | |
| | | | |
| 1. Ha | s your CoC conducted a racial disparities | assessment in the last 3 years? | Yes |
| 2. En | ter the date your CoC conducted its lates | t assessment for racial disparities. | 10/01/2024 |
| | | | |
| 1D-9a | Using Data to Determine if Racial Dispa Program-Funded Homeless Assistance | urities Exist in Your CoC's Provision or Outcom | nes of CoC |
| 1D-9a | Using Data to Determine if Racial Dispa Program-Funded Homeless Assistance NOFO Section V.B.1.p. | urities Exist in Your CoC's Provision or Outcom | nes of CoC |
| 1D-9a | Program-Funded Homeless Assistance | urities Exist in Your CoC's Provision or Outcom. | nes of CoC |

- the data your CoC used to analyze whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance; and
- how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.

1)The CoC used three quantitative sources to analyze racial disparities across the NC BoS CoC when comparing against the most recent Census data (American Community Survey 2022) for the 79-county geographic area: the Longitudinal System Analysis data from Stella P (using annual HMIS data); the 2024 Point-in-Time count to account for HMIS bed coverage gaps; & data pulled using the CoC's new CE assessment called the Homeless Assessment & Referral Tool (HART). 2) The CoC manually pulled the 2022 American Community Survey data to analyze the general population across the CoC's 79 counties & compare this Census information with the number & percentage of people experiencing homelessness of different demographics counted in the PIT (for one-night) & in the LSA (annualized HMIS data), reviewing people sheltered & unsheltered. The CoC also evaluated the percentage of people accessing CoC services & interventions such as shelter, street outreach programs, & permanent housing programs, comparing Census data versus data culled from the PIT count & the LSA to determine how people of different races/ethnicities access emergency & long-term housing interventions. The CoC analyzed information from its new CE assessment, HART, to determine how the assessment prioritized people of different races/ethnicities for permanent housing interventions & BNL data to determine the percentages of people of different races/ethnicities referred to available permanent housing resources & whether these referrals turned into permanent housing placements. The CoC compared data on prioritization & referrals made using HART with historical data from the prior CE assessment (VI-SPDAT) to determine whether the prioritization/referral processes provided more equitable practices, access, & placement of BIPOC households proportionate to the percentage of BIPOC people in the homeless service system. The CoC also compared the number of referrals & placements into permanent housing units for different demographics against the percentages of people of those races/ethnicities in the Census & the general homeless population enumerated in the annual PIT count & the LSA from Stella P.

| 1D-9b. | Implemented Strategies to Prevent or Eliminate Racial Disparities. | |
|--------|--|--|
| | NOFO Section V.B.1.p | |

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

| 1. | Are your CoC's board and decisionmaking bodies representative of the population served in the CoC? | Yes |
|----|--|-----|
| | 2. Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC? | |
| | Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups? | Yes |
| | Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups? | Yes |

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| 5. | Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness? | Yes |
|-----|---|-----|
| 6. | Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector? | Yes |
| 7. | Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness? | Yes |
| 8. | Is your CoC 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. | Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness? | Yes |
| 10. | Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system? | Yes |
| 11. | Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness? | Yes |
| | Other:(limit 500 characters) | |
| 12. | N/A | No |

| 1D-9c. Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity. | | |
|---|-----------------------|--|
| | NOFO Section V.B.1.p. | |

Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

The CoC piloted its new CE assessment, the Homeless Assessment & Referral Tool (HART), as a replacement for the prior standardized assessment, the VI-SPDAT, in 5 of its 13 Regional Committees in summer 2023. After initial data evaluation of its ability to provide more equitable prioritization of BIPOC HHs for PH resources & making some key updates, the CoC fully launched use of HART in 06/24. The CoC will continue to monitor assessment data on a quarterly basis throughout the next year, using data to adjust questions, redistribute weighting of points. & update training/TA to ensure HART equitably prioritizes resources for BIPOC & proportionally matches the percentages of different races/ethnicities of people seeking services in the CoC. The CoC GB, RE Subcommittee, CE Council, & Funding & Performance Subcommittee will continue to encourage & support better data quality to ensure that the CoC can comprehensively capture the full scope of services being provided & the number & types of HHs seeking them. Ongoing evaluations will begin to include deeper analysis of HHs & people experiencing homelessness according to age. prevalence of LGBTQ+ populations, & gender. The CoC hopes to also incorporate more robust qualitative research to enhance the current analysis work undertaken by the CoC to understand the experience of people accessing the system. The CoC has begun to develop a series of questions with support from the CoC's CE Equity Core Team to better understand the rates of chronic homelessness experienced by HHs of different races/ethnicities; racial/ethnic disparities within different regions of the CoC (particularly important since it's such a large geographic area); & how prevention/diversion enrollments might show disparities. The CoC will also begin to deepen its analysis of System Performance Measures by focusing on HH race/ethnicity to understand how these key measures show the CoC's performance amongst BIPOC populations. Beyond the HHs served by the CoC, the RE Subcommittee wants to study the demographics of agency staff providing services to better understand how well the provider network matches its staff with the population being served. After three years of overseeing the inclusion of a wide-ranging equity section in CoC/ESG Program competition scorecards, the subcommittee will analyze how well applicants meet the CoC's equity benchmarks & evaluate whether the push to move agencies toward more equitable practices are improving over time.

| 1D-9d. | Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities. |
|-----------------------|--|
| NOFO Section V.B.1.p. | |
| | |
| | Describe in the field below: |
| 1. | the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and |
| 2. | the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance. |

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 The CoC will continue to track several measures to determine its progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance. These include: comparing the number & percentages of people of different races/ethnicities counted & served by the CoC in comparison with the Census of people across the CoC's 79 counties; the number & percentages of people of different races/ethnicities accessing key interim & permanent housing interventions such as emergency shelter, rapid rehousing, & permanent supportive housing versus the number of people in the Census of people across the CoC's 79 counties & the number of people & percentages of people of different races/ethnicities counted in the annual PIT count & in the LSA showing annualized data; the number of people of different races/ethnicities accessing the CE system versus the total number/percentage of people of different races counted in the annual PIT count & in the LSA showing annualized data; the percentage of people of different races/ethnicities prioritized for different levels of permanent housing interventions in the CE system using the new CE assessment, HART, & the number/percentage of people of different races/ethnicities referred through CE that move into permanent housing after referral. 2) The CoC will continue to use the most upto-date American Community Survey to compare against other CoC data sets including the annual PIT count, the Longitudinal System Analysis through Stella P, & CE system data from the HART & the BNL pulled from HMIS. In the coming year, the CoC will use these tools to evaluate the measures outlined in part 1 of this question & begin breaking down the CoC data to show regional evaluations in the 13 Regional Committee planning areas, which show vastly different demographic breakdowns depending on which part of the state the CoC evaluates.

D-10. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.

NOFO Section V.B.1.q.

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 decisionmaking processes.

The CoC has a Lived Expertise Advisory Council (LEAC) 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 (PEUH). 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 with lived experience of interpersonal violence; & people residing across the CoC's full geographic area. LEAC members participated in the NC Conference on Ending Homelessness in 06/24, using the forum to educate but also encourage PLE in attendance to join the LEAC &/or other CoC subcommittees. LEAC members also attend Regional Committee (RC) meetings, working alongside RC leadership to identify & engage other PLE currently in or have recently been housed through CE. individual LEAC members in conjunction with CoC staff schedule calls or virtual meetings with interested PLE to discuss the CoC's & LEAC's work, recruiting them to join the LEAC. The CoC ensures that at least one member of the LEAC serves on other CoC subcommittees, including the CEC, Funding & Performance Subcommittee, RES, GB Nominations Committee, Veterans Subcommittee, & funding competition committees. CoC subcommittees manage day-to-day decision-making & oversight of the CoC's work, evaluating data, providing recommended strategies, drafting & implementing P&Ps, training CoC stakeholders, & setting performance benchmarks. The CoC formed a CE Equity Core Team (CEECT) to oversee the development & implementation of a new CE assessment. The CEECT focuses on implementing a long-term strategy to improve equity in the system, including continual engagement of potential new members with lived expertise. 43% of the CEECT consists of PLE. In summer 2024, the LEAC began a new initiative to form regional LEACs, identifying & engaging 3 RCs to create plans & begin outreach activities to PLE in the region.

1D-10a. Active CoC Participation of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.q.

You must upload the Lived Experience Support Letter attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four 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. | Routinely included in the decisionmaking processes related to addressing homelessness. | 9 | 16 |
| 2. | Participate on CoC committees, subcommittees, or workgroups. | 4 | 10 |
| 3. | Included in the development or revision of your CoC's local competition rating factors. | 1 | 3 |
| 4. | Included in the development or revision of your CoC's coordinated entry process. | 1 | 2 |

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|------------------------|---------|------------|

| | Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness. | |
|--|--|--|
| | NOFO Section V.B.1.a. | |

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)

FY2024 CoC Application

The CoC encourages all agencies within its geographic area to hire PLE in direct service & leadership roles including agency management & Boards of Directors. The CoC incentivizes agencies to employ & include PLE in decisionmaking by the inclusion of equity benchmarks in competition scorecards. The first benchmark concerns agency Boards of Directors (BOD): at least 20% of an applicant's BOD have experienced homelessness. The second & third benchmarks concern hiring PLE in all aspects of an agency's work: at least 10% of staff involved in operating/administering activities have experienced homelessness & at least 20% of the applicant's managers/director-level positions are BIPOC. Agencies meeting CoC benchmarks receive maximum points. CoC staff serve on the NC Conference on Ending Homelessness Conference planning committee. Staff encourage decision-makers to include opportunities for PLE to participate as speakers/panelists in the conference as well as providing scholarships to PLE to attend & learn. RC leadership & providers encourage PLE to attend RC meetings to participate in conversations, provide feedback, & ask questions. These connections allow providers to form relationships with PLE interested in deeper involvement, which often leads to job & professional development opportunities. In a recent survey of CoC service providers, 65% of responding agencies said they hire/would hire PLE to fill a variety of roles in their agencies including, but not limited to, shelter & case management staff, food services, facility maintenance, street outreach services, & peer support. Providers reported offering training & professional development opportunities that included PLE employees such as RE/cultural competency training, peer support training, trauma-informed care, safety planning, & confidentiality training, Anti-Discrimination Policy & VAWA Emergency Transfer Plan training, amongst others. NCCEH, as the Collaborative Applicant, hired 3 new employees with lived experience in 2024 that play a role in CoC & HMIS Lead activities such as data evaluation, staffing the RE Subcommittee & LEAC, & co-facilitating the CoC's work with unsheltered access coordination. The CoC offered a range of training & professional development opportunities to LEAC members in the last year including CoC101; collective impact training with the National Low Income Affordable Housing Coalition; & scholarships to attend the state and NAEH homelessness conferences.

| 1D-10c. | Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness. | |
|---------|--|--|
| | NOFO Section V.B.1.q. | |
| | | |
| | Describe in the field below: | |
| 1. | how your CoC gathers feedback from people experiencing homelessness; | |
| 2. | how often your CoC gathers feedback from people experiencing homelessness; | |
| | | |

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| | how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program; |
|----|--|
| | how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and |
| 5. | steps your CoC has taken to address challenges raised by people with lived experience of homelessness. |

1) The CoC has a Lived Expertise Advisory Council (LEAC) to improve its ability to make governance & funding decisions & provide TA. The LEAC improves the provision of services to PLE, & the policies that govern these services, across the CoC through first-hand insights & expertise. The LEAC includes people who currently experience or have previously experienced homelessness. LEAC membership incorporates diverse perspectives: different races/ethnicities; field staff with LE; CE system & programs participants; experience of interpersonal violence; & geographic diversity. At least one LEAC member serves on other CoC subcommittees, including the CEC, GB Nomination, Funding & Performance, RE, & Veterans Subcommittees. They manage day-to-day decision-making & oversight for the CoC, evaluating data, recommending strategies, drafting & implementing P&Ps, training stakeholders, & setting performance benchmarks. 2) The LEAC & subcommittees meet monthly but come together on an ad hoc basis to address/plan for emerging issues. 3) As part of CE evaluation, the CoC develops surveys to gather feedback from a range of stakeholders, including PEH entering the CE system & PLE in PSH & RRH that experienced CE in the prior year. Since all ESG & CoC-funded projects participate in CE, surveys capture a range of qualitative data including how projects assisted PLE to access services & PH; the types & quality of services received; challenges faced while in projects; & changes they would make to their experience. Many LEAC & CE Core Team members received assistance through CoC/ESG projects. They played a crucial role in the development of the CoC's Client Bill of Rights & HART, the new CE assessment, respectively. Their experience & feedback shaped these key documents in the CoC. 4) The CoC conducts an annual CE evaluation. The LEAC & Core Team meet monthly; 5) Through feedback & highlighted challenges, the LEAC developed a CBoR that applies to all providers in the CoC. The CBoR sets clear guidance & expectations for providers & the role they play to assist PEH with the greatest amount of respect & humility. It includes a robust grievance policy, allowing participants to file grievances when they believe their rights have been violated. Grievances received at the CoClevel allow the GB to form an ad hoc committee to hear evidence, make violation determinations, & in violation cases, potentially de-fund &/or censure agencies with the most egregious behavior toward clients.

| 1D-11. | Increasing Affordable Housing Supply. |
|--------|---|
| | NOFO Section V.B.1.s. |
| | |
| | Describe in the field below at least two steps your CoC has taken in the past 12 months to 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. |

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|----------------------------|----------|------------|
| 1 1202 1 000 7 ppilodilo11 | 1 490 00 | 10/10/2021 |

The CoC has engaged municipal, county, & state government in multiple ways to educate, advocate, & partner on local affordable housing initiatives for all people, especially people experiencing homelessness. 1) CoC staff have had discussions with state officials about overturning NC restrictions on inclusionary zoning. This would allow cities/counties within the CoC to require local developers to designate a specific percentage of units in all housing developments to be affordable. Local stakeholders throughout the CoC have worked closely with city/county elected officials & staff to understand the devastating effects of the lack of affordable housing locally & have advocated for & proposed changes to current ordinances that would change zoning districts & increase density limits that would allow more affordable housing. especially with the addition of accessory dwelling units. 2) The CoC has encouraged local stakeholders to get more involved in local affordable housing efforts & planning. CoC stakeholders have attended meetings of local housing consortiums to assist lead agencies plan for & develop strategies as part of annual Consolidate Plan updates. They have led efforts to form diverse affordable housing planning groups inclusive of nonprofit leaders, education system staff, business leaders, elected officials, & municipal & county government department staff to share ideas, discuss best practices, identify regulatory barriers to housing development, & develop strategies & potential solutions to reduce barriers. Local CoC stakeholders have increased attendance at local town & county council meetings, speaking during public comment periods, advocating for increased funding in the production of affordable housing & the reduction of regulatory barriers such the elimination of permit & other fees for developers who agree to increase the number of affordable units &/or earmark a % of units for PEH. CoC stakeholders have also utilized awareness built during events like Hunger & Homelessness & Mental Health Awareness weeks to bring together municipal, county, & state government officials & staff to learn about ways to incentivize affordable housing production through the reduction of regulatory barriers.

Yes

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide; Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 1E- | 1. Web Posting of Advance Public Notice of Your CoC's Local Competition Deadline, Scoring and Rating Criteria. | |
|------|--|------------|
| | NOFO Section V.B.2.a. and 2.g. | |
| | | |
| 1. E | inter the date your CoC published its submission deadline and scoring and rating criteria for New roject applicants to submit their project applications for your CoC's local competition. | 08/02/2024 |
| 2 F | inter the date your CoC published its submission deadline and scoring and rating criteria for Renewal | 08/02/2024 |
| P | roject applicants to submit their project applications for your CoC's local competition. | 00/02/202- |
| P | roject applicants to submit their project applications for your CoC's local competition. 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. | 00/02/202- |
| P | 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 | 00/02/202- |
| P | 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. | 00/02/202- |

| | 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 |

1. Established total points available for each project application type.

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| 6. | Provided points for projects based on the degree the projects 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. | 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 V.B.2.a., 2.b., 2.c., and 2.d. | |
| | | ٦ |
| | 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)? | 198 |
| 2. | How many renewal projects did your CoC submit? | 19 |
| 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 V.B.2.d. | |
| | | _ |
| | Describe in the field below: | |
| | how your CoC 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 | |
| | | 1 |

 As part of the CoC Program competition, renewal applicants submit a prior calendar year APR, which 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 represent the total HHs experiencing CH in projects as well as the total new HHs experiencing CH entering projects during the CY. CoC staff pull the custom CH report as well as the SPM returns report to analyze each renewal project. 2) The CoC reviews information from Q22C to analyze data on the length of time between project enrollment & HH move into PH. This question also helps the CoC understand the # of HHs that exit without move into PH. 3,4) The CoC prioritizes projects that serve people with disabling conditions such as substance use disorders, mental illness, & others requiring significant support to access & maintain PH; people experiencing chronic homelessness who may be more susceptible to victimization, illness, & death; HHs experiencing interpersonal violence; people identifying as LGBTQ+; & unaccompanied or parenting youth 18-24. The CoC prioritizes projects that follow a Housing First approach & serve low- or noincome HHs or people who have difficulty engaging in services. Projects that serve vulnerable populations receive additional points on the CoC-approved scorecards. Projects with more points rank higher on the final prioritization list. The CoC historically ranks projects following Housing First tenets higher on the ranked list. All new & renewal projects on the final ranked list met Housing First standards this year. The CoC also evaluates & ranks projects based on their adherence to SAMHSA's Key Elements of PSH & USICH's RRH Program Standards & Benchmarks, which prioritize services to vulnerable populations with severe barriers & pair services to HH needs. Projects meeting more programmatic standards rank higher on the final prioritization list. Additionally, the CoC establishes annual funding priorities to ensure adequate geographic coverage of PSH in the CoC & to scale up RRH services & financial assistance to ensure high barrier populations have access to housing & appropriate services.

| 1E-3. | Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process. | |
|-------|---|--|
| | NOFO Section V.B.2.e. | |
| | Describe in the field below: | |
| 1. | how your CoC used input from persons of different races and ethnicities, particularly those over- represented in the local homelessness population, to determine the rating factors used to review project applications; | |
| 2. | how your CoC included persons of different races and ethnicities, particularly those over- represented in the local homelessness population in the review, selection, and ranking process; and | |
| 3. | how your CoC rated and ranked projects based on the degree that proposed projects 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 steps the projects took or will take to eliminate the identified barriers. | |

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1,2) The CoC uses a Scorecard Committee (SC) to develop CoC competition scorecards. The SC meets in advance of the competition to determine factors needed to evaluate applications, using the CoC's & HUD's priorities to shape recommended scorecards for the CoC GB to approve. For this year's competition, the SC included representatives from each of the CoC's 13 RCs as well as members of the CoC's RES & LEAC. SC members share information locally, gathering input from fellow CoC stakeholders in their RCs. 54% of members were BIPOC. Staff post scorecards in advance of the GB approval meeting. The CoC holds open GB meetings & encourages members/nonmembers to ask questions & provide feedback. The GB approved the SC recommendation unanimously on 03/05/24. BIPOC comprise 42% of GB membership. 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 sum a total application score. The PRC creates options for ranking project applications, discussing CoC precedents, priorities, geographic coverage, performance, & spending. The PRC produces a recommended prioritization ranking list for the GB to approve. 58% of PRC members were BIPOC. The GB approved the PRC ranking recommendation unanimously on 09/24/24. 3) The RES & LEAC consult with the SC annually to develop an Equity Section in CoC scorecards which sets key equity benchmarks to measure agency commitment to & implementation progress to serve populations disproportionately affected by homelessness. The section includes benchmarks for 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 opportunity hiring clauses; % of BIPOC Board members, project staff, & organizational leadership; % of PLE on Boards & staff. Agencies failing to fully comply with the Anti-Discrimination Policy in programmatic P&Ps were pulled down on the final ranking list.

| 1E-4. | Reallocation–Reviewing Performance of Existing Projects. | |
|-------|---|--|
| | NOFO Section V.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 low performing or less needed projects through the process described in element 1 of this question during your CoC's 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. | |

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 The CoC established funding priorities for the competition with a primary priority to ensure funding is being used well, including reallocating funding from projects with patterns of low spending & poor performance. These priorities quide the CoC's Project Review Committee's (PRC) work, which scores applications & recommends project ranking & reallocation to the CoC GB. With the help of established funding priorities, the PRC uses several precedents to order the final ranking list that also helps determine when reallocation happens. The CoC 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. 2,3) Two agencies with three projects decided not to apply in the FY24 competition & those projects have been reallocated. The PRC identified four additional renewal projects through its process that deserved consideration for reallocation all from one agency, Greenville Housing Authority (Seeds of Change, Project HOPE, Solid Ground, & Project Stable Solutions). The PRC reallocated these projects due to several factors: during the competition, the agency neglected to submit several required materials including match documentation; the projects' scored only 24%, 19%, 17% & 17% of possible points in the renewal scorecard & the top scoring project of the four was 44% lower than the next highest scoring operating renewal PSH project; the PRC reviewed spending over the last 3 fiscal years and saw chronic underspending of allocated funding with declining spending for 3 of the 4 currently operating projects; & the agency exhibited poor grant administration over the last year, turning in APRs almost a year late, operating for several months without a licensed HMIS user, & neglecting to maintain a quarterly draw schedule from eLOCCS. The PRC decided due poor performance & grant administration as well as chronic underspending of grants that it would reallocate the four projects so that the CoC could expand funding for a new PSH project that would cover the entire CoC's geographic area. 4) N/A.

| 1E-4a. | Reallocation Between FY 2019 and FY 2024. | |
|--------|--|------|
| | NOFO Section V.B.2.f. | |
| | Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024? | No |
| | Did your Ooo cumulatively reallocate at least 20 percent of its AND between 1 1 2019 and 1 1 2024: | 1140 |
| | | |
| | | _ |
| 1 | E-5. Projects Rejected/Reduced–Notification Outside of e-snaps. | |
| | NOFO Section V.B.2.g. | |
| | You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen. | |
| | | _ |
| 1. | Did your CoC reject any project application(s) submitted for funding during its local competition? | Yes |
| 2. | Did your CoC reduce funding for any project application(s) submitted for funding during its local competition? | No |
| | competition: | |

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| app If yo | olicants that their project ou notified applicants o | ement 1 or element 2 of this question, enter the date ct applications were being rejected or reduced, in wo on various dates, enter the latest date of any notifica 26/2024, 06/27/2024, and 06/28/2024, then you mus | riting, outside of e-snaps. ition. For example, if you | 09/24/2024 |
|--------------------------------------|--|--|---|------------|
| | | | | |
| 1E-5a. | Projects Accepted-N | otification Outside of e-snaps. | | |
| | NOFO Section V.B.2 | .g. | | |
| | You must upload the | Notification of Projects Accepted attachment to the | 4B. Attachments Screen. | |
| rani app | ked on the New and R dicants on various date | notified project applicants that their project application enewal Priority Listings in writing, outside of e-snap es, enter the latest date of any notification. For exar , 06/27/2024, and 06/28/2024, then you must enter | s. If you notified mple, if you notified | 09/24/2024 |
| 1F-5h | Local Competition Se | election Results for All Projects. | | |
| 00. | NOFO Section V.B.2 | • | | |
| | | Local Competition Selection Results attachment to | the 4B. Attachments | |
| 1. F 2. F 3. F 4. F 5. A | es your attachment ind Project Names; Project Scores; Project Status—Accepte Project Rank; Amount Requested fro Reallocated Funds +/ | ed, Rejected, Reduced Reallocated, Fully Reallocate | ed; | |
| 1E-5c. | NOFO Section V.B.2 | Approved Consolidated Application 2 Days Before of ion Submission Deadline. g. and 24 CFR 578.95. Web Posting–CoC-Approved Consolidated Application | | |
| part 1. ti | tner's website–which i he CoC Application; aı | | | 10/16/2024 |
| | 1E-5d. | Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website. | | |
| | | NOFO Section V.B.2.g. | | |
| | | You must upload the Notification of CoC- | | |

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Applicant: North Carolina Balance of State CoC **Project:** NC-503 CoC Registration FY 2024

NC-503 COC_REG_2024_214769

| Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website. | 10/16/2024 |
|---|------------|
|---|------------|

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide; Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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| 2A-1. | HMIS Vendor. | |
|---------------|--|---------------|
| | Not Scored–For Information Only | |
| Ent | ter the name of the HMIS Vendor your CoC is currently using. | WellSky |
| 2A-2. | HMIS Implementation Coverage Area. Not Scored–For Information Only | |
| Sel | ect from dropdown menu your CoC's HMIS coverage area. | Multiple CoCs |
| | | |
| 2A-3. | HIC Data Submission in HDX. | |
| 2A- 3. | HIC Data Submission in HDX. NOFO Section V.B.3.a. | |
| | | 05/10/2024 |
| Ent | NOFO Section V.B.3.a. | 05/10/2024 |
| Ent | NOFO Section V.B.3.a. ter the date your CoC submitted its 2024 HIC data into HDX. Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and | 05/10/2024 |
| Ent | NOFO Section V.B.3.a. ter the date your CoC submitted its 2024 HIC data into HDX. Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers. | 05/10/2024 |
| Ent | NOFO Section V.B.3.a. ter the date your CoC submitted its 2024 HIC data into HDX. Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers. NOFO Section V.B.3.b. | 05/10/2024 |

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 The CoC & HMIS Lead have taken several steps to ensure VSPs collect data in HMIS comparable databases. The CoC & HMIS Lead conduct annual outreach to each VSP to strengthen relationships & confirm comparability of databases used. The CoC & HMIS Lead provide targeted outreach, sharing aggregated HUD & HMIS Lead resources & share publicly online on the CoC website. The HMIS Lead developed a checklist for VSPs to confirm that their chosen database collects the current data standards requirements. The CoC offers paper forms for data collection as well as Data Standards training that are not software specific. It offers access to the HMIS Lead's Learning Management System so VSPs have trainings on Privacy & Security requirements for HMIS/comparable databases, FY2024 Data Standards updates, & HMIS workflow trainings that detail data collection stages & data element definitions. The CoC & HMIS Lead coordinate with NCCADV & the NC ESG Office to troubleshoot & consult on federal reporting. The HMIS Lead holds individual training sessions with CoC Leads & VSPs to support leveraging ESG CAPER & CoC APR reports on an as needed basis. The CoC's CY2025 ESG Program Funding Priorities prioritize funding to providers, including VSPs, for HMIS/comparable database costs & encourages all VSP applicants to include costs for comparable databases. The CoC approved all VSP HMIS requests in the CY2025 ESG competition on 08/06/2024. 2) According to the most recent annual outreach efforts, 79% of all VSPs in the CoC use a comparable database compliant with FY2024 Data Standards. 100% of CoC- & ESG-funded VSPs use a comparable database compliant with FY2024 Data Standards.

| 2A-5. | Bed Coverage Rate-Using HIC, HMIS Data-CoC Merger Bonus Points. |
|-------|---|
| | |

NOFO Section V.B.3.c. and V.B.7.

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

| Project Type | Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report] | Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report] | Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report] | |
|--|---|--|---|---------|
| 1. Emergency Shelter (ES) beds | 1,898 | 612 | 1,888 | 75.22% |
| 2. Safe Haven (SH) beds | 0 | 0 | 0 | 0.00% |
| 3. Transitional Housing (TH) beds | 402 | 25 | 215 | 50.35% |
| 4. Rapid Re-Housing (RRH) beds | 490 | 102 | 592 | 100.00% |
| 5. Permanent Supportive Housing (PSH) beds | 1,712 | 0 | 1,284 | 75.00% |
| 6. Other Permanent Housing (OPH) beds | 100 | 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 V.B.3.c. | |

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| o = o | 19 | 1 |

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

1. steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and

2. how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1) The Funding & Performance Subcommittee (FPS) develops & oversees the CoC's plan to increase HMIS bed coverage to the minimum 85% coverage rate. The CoC Governance Charter assigns HMIS recruitment activities to the elected Regional Lead Alternate (RLA) position in each of the CoC's Regional Committees (RCs). Over the next 12 months, CoC staff assigned primary RC support will work collaboratively with the elected RLA & other relevant local stakeholders to engage the largest non-participating agencies in each region. Staff & regional stakeholders will use several resources developed by the FPS to assist in engagement efforts: sample scripts, an FAQs document; & an HMIS guide to provide agencies. HMIS Lead staff will attend subsequent meetings, demonstrating HMIS capabilities including custom reports & visualizations; answer technical questions; & provide access to training sites. 2) CoC staff & RLAs will work within the RCs to identify stakeholders that have good, collaborative working relationships with identified non-HMIS participating agencies. They will ask these stakeholders to provide an introduction to decision-makers at non-participating agencies, & when possible, attend initial engagement meetings where they can share their reasons for & the benefits of using HMIS. CoC staff, RLAs, & other stakeholders will use prepared HMIS recruitment materials, answering questions, explaining benefits, & providing information. They will attempt to understand the non-participating agencies specific needs around data & ask what it would take to convince the agency to use HMIS. They will schedule subsequent meetings to bring in HMIS Lead staff where the content will focus on how HMIS can meet the agency's specific data needs & address specific challenges mentioned during the first conversation. When possible, HMIS Lead staff will provide examples of reports, visualizations, or other materials that speak to agency needs & offer access to the HMIS training site so non-participating agency staff can better understand how HMIS works. As agencies agree to join HMIS, CoC staff will work closely with HMIS Lead staff to ensure a smooth, timely process to get agencies on HMIS, using a Smartsheet to provide updates so all parties understand the current status of licensing issuance & participation. When challenges arise, CoC, agency, & HMIS Lead staff will work collaboratively to address issues to shorten the time it takes to gain access to HMIS.

| 2A-6. | Longitudinal System Analysis (LSA) Submission in HDX 2.0. | |
|-------|--|--|
| | NOFO Section V.B.3.d. | |
| | You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen. | |

| Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST? | Yes |
|---|-----|
| P.III. 2011 | |

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2024 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 2B-1. | PIT Count Date. | |
|-------|---|------------|
| | NOFO Section V.B.4.a | |
| | | |
| Ent | er the date your CoC conducted its 2024 PIT count. | 01/31/2024 |
| | | |
| | | |
| 2B-2. | PIT Count Data–HDX Submission Date. | |
| | NOFO Section V.B.4.a | |
| | | |
| Ent | er the date your CoC submitted its 2024 PIT count data in HDX. | 05/10/2024 |
| • | | |
| 2B-3. | PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count. | |
| | NOFO Section V.B.4.b. | |
| | | |
| | Describe in the field below how your CoC: | |
| 1. | engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process; | |
| 2. | worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and | |
| 3. | included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count. | |

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1) To hold the PIT count at times & in locations where it might find youth, the CoC partnered with local youth programs, including afterschool programs, faithbased programs, LGBTQ+ agencies, & youth housing & services providers to plan & conduct the 2024 PIT count. The CoC partners with SEA & LEAs to identify school-age youth experiencing homelessness who may not seek services from the traditional homeless system. HMIS Lead staff presented to the full contingent of homeless school liaisons in the CoC on 01/10/2024 to discuss PIT eligibility, define the CoC's PIT process & timelines, & answer questions. HMIS Lead & CoC staff held a call with youth service providers in 01/24 to get feedback, brainstorm ideas, & develop procedures that would help the CoC better locate & count youth experiencing homelessness least likely to access mainstream homeless & housing resources. The conversations with SEAs, LEAs, & local youth providers guided the CoC's approach to the 2024 youth PIT count. 2) Youth with lived experience & currently experiencing homelessness participated in regional PIT planning. HMIS Lead & CoC staff worked closely with local Regional Committee (RC) stakeholders, including youth service providers, to identify youth willing & able to help plan for the annual count. The CoC met monthly starting in June 2023 with elected Unsheltered Access Coordinators to discuss & plan for all aspects of the 2024 unsheltered PIT count, specifically focusing on enumerating special population needing different, creative approaches to engage such as Veterans, youth, and people experiencing chronic homelessness. 3) Stakeholders involved in planning the 2024 PIT count brainstormed & implemented 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 counting youth. The CoC counted outside school hours & when youth programs were operational to increase opportunities to find youth experiencing homelessness. RC leadership engaged youth providers to include youth experiencing homelessness in their local unsheltered counts. Through increased & creative efforts, the CoC improved its youth count, showing a 56% increase in the number of youth experiencing homelessness counted in 2024 versus 2023.

| 2B-4. | PIT Count–Methodology Change–CoC Merger Bonus Points. |
|-------|--|
| | NOFO Section V.B.5.a and V.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 2023 and 2024, if applicable; |
| 2. | describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable; |
| 3. | describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and |
| 4. | describe how the changes affected your CoC's PIT count results; or |
| 5. | state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024. |

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 The CoC did not make changes to its sheltered PIT count methodology in 2024. 2,4) The CoC did not change its unsheltered PIT count methodology in 2024. However, it enhanced the methodology launched in 2022 to provide a more comprehensive count of PEUH in the 2024 count. To ensure it effectively engages PEUH, connecting them to the resources they need, the CoC launched a new initiative in 06/21, creating a new role in each Regional Committee (RC) called an Unsheltered Access Coordinator (UAC). UACs, with the help of local stakeholders, developed an unsheltered outreach & engagement plan (updated each year in May). In 2022, the CoC leveraged this process to count PEUH, using data through the HMIS CE BNL. In the 7 days after the PIT night, UACs lead teams to contact PEUH on the BNL, verifying their place of residence on the PIT night. After the 7-day window, CoC staff pull the BNL to count the number of PEUH. Incrementally, each year, UACs have developed stronger plans with more extensive, experienced teams to connect to PEUH throughout the year, which, in turn, has allowed the CoC to conduct a more comprehensive, accurate unsheltered PIT count. As a new process in 2022 & 2023, UACs & stakeholders participating in the unsheltered PIT count had a steep learning curve, limiting the reliability of the unsheltered PIT count. However, the CoC has seen a steady increase in the number of PEUH populating the CE BNL & more local accountability for engaging PEUH throughout the year, especially important in the days after the PIT count night. This engagement has improved the CoC's ability to provide a more comprehensive, accurate unsheltered PIT count with wider geographic coverage, more engagement of unsheltered HHs, & more connections to services & PH. Through lessons learned from 2022 & 2023, the CoC enhanced training & TA, developed additional resources, initiated a monthly UAC meeting, & worked with UACs to target CoC counties traditionally undercounted. Since the initial count under this methodology, the CoC has been able to identify more PEUH each year (777 in 2022; 1314 in 2023; & 2127 in 2024); 3) While the CoC understands that many people seeking ES or PH assistance have arrived in the CoC that could affect the PIT count, it has not seen an unusual increase yearover-year that would account for PIT count increases. Instead, increases stem from enhanced methods to provide a more accurate, comprehensive unsheltered PIT count over the last few years.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants; 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide; Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 2C-1. | Reducing the Number of First Time Homeless–Risk Factors Your CoC Uses. |
|-------|---|
| | NOFO Section V.B.5.b. |
| | |
| | In the field below: |
| 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 |

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1)The CoC identifies risk factors of persons becoming homeless for the first time by screening each person presenting for services with a tool called the Prevention & Diversion Screen, using data collected from the tool to evaluate common factors sees in HHs presenting for services. This allows the CoC to develop housing problem solving (HPS) & diversion approaches that assist HHs to identify alternative PH resources rather than immediately enter shelter. 2) The CoC actively works to identify & procure resources for HPS activities, including financial assistance & mediation services. The CoC received a multiyear Bezos Day 1 Families Fund (D1FF) grant to pilot HPS practices in multiple regions within the CoC. The funding targets HHs with children, providing agencies flexible funding to divert people from congregate shelter. Funded regions have integrated this resource into CE systems, using case conferencing to prioritize HHs for financial assistance. The CoC contracts with The Listening Group to provide ongoing TA & coaching to help funded regions learn how to successfully integrate HPS techniques to engage HHs. The CoC continuously evolves the program, evaluating successful strategies & leveraging lessons learned to improve practices. The CoC launched its new SNOFO-funded CoCwide rehousing program in 01/24. Using a flex pool model, this program braids funding from various sources to ensure flexibility to meet HH needs beyond CoC Program funding. While SNOFO funding will target HHs experiencing homelessness with severe service needs, other funding sources will allow the program to eventually pay for mediation services & financial assistance to target HHs at imminent risk of homelessness, thus reducing the flow of HHs without a history of homelessness into the system. 3) A Project Specialist from NCCEH oversees HPS services in the CoC, working closely with CoC stakeholders to implement best practices, educate local providers on tools & mediation skills, & seek local resources for HPS efforts to reduce the number of first-time homeless HHs.

| | | Т |
|--------|--|----|
| 2C-1a. | Impact of Displaced Persons on Number of First Time Homeless. | |
| | NOFO Section V.B.5.b | |
| | Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to: | |
| 1. | natural disasters? | No |
| 2. | having recently arrived in your CoC's geographic area? | No |
| 2C-2. | Reducing Length of Time Homeless–CoC's Strategy. | |
| | NOFO Section V.B.5.c. | |
| | In the Cold below | 1 |
| | In the field below: | |
| 1. | describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless; | |
| | describe your CoC's strategy to reduce the length of time individuals and persons in families | |

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| · · · · · · · · · · · · · · · · · | 1 9 | |

1, 2) The CoC approved LOTH as a key priority in its CE standards update in 01/24 & has launched a new CE assessment & updated its HMIS BNL to better identify HHs with long stays in the system. With the launch of its SNOFOfunded Back@Home Balance of State (B@H BoS) program in 01/24, the CoC has outreach, RRH, & PSH services in all 79 counties in its geographic area for the first time. Focused on people with severe service needs, specifically people experiencing unsheltered homelessness (PEUH), the CoC will increase its ability to house vulnerable HHs, most of which have long LOTH. B@H BoS takes an innovative approach to rehousing work within the CoC. The program utilizes an oversight agency to administer the grants, braiding multiple funding sources with CoC Program funds to contract with local housing stabilization service providers (HSŠP) to work with HHs with severe service needs & an agency to serve as a centralized financial assistance & unit recruitment/landlord engagement coordinator. By centralizing the admin, financial assistance, & unit recruitment functions, HSSP have added capacity to engage HHs with long LOTH & severe service needs to connect to CE, navigate the system to meet immediate needs, & access permanent housing. HSSP collaborate with the unit recruitment coordination agency to locate appropriate, affordable units for HHs with the HSSP handling logistics locally with the HH (viewing units, making application, lease signing, & move-ins) & the unit recruitment coordination agency negotiating housing costs, securing inspections, & paying for move-in expenses. This process accelerates move-ins after HH enrollment & ensures HSSP have the capacity to provide robust services to HHs. HSSP work closely with regional CE Leads, taking referrals from the BNL which prioritizes HHs with long LOTH & severe service needs. CoC staff hold monthly calls with CE Leads to review the current regional BNL & discuss challenges. In advance of meetings, staff identify several data points from the BNL, including any HHs with LOTH longer than 364 days, comparing data month-to-month to determine progress & next steps. 3) An NCCEH Project Specialist focuses exclusively on the CE system, working with CE Leads to strategize how to target people with the longest histories of homelessness & to reduce the LOTH.

| 2C-3. | Successful Permanent Housing Placement or Retention -CoC's Strategy. |
|-------|--|
| | NOFO Section V.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. |
| | strategy to increase the rate that individuals and families exit to or retain permanent nousing. |

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 In written standards, the CoC sets termination procedures, limiting the reasons for terminating HHs from projects. Staff provide ongoing TA to providers on standards, assisting project staff on difficult cases & providing quidance to engage vulnerable HHs to improve PH exits. In 10/23, the CoC launched an ES Innovation Series. Through quarterly webinars, staff introduce emerging best practice concepts (e.g., shared housing; harm reduction; case management), bringing in national, state, & local partners to highlight successful practices. Staff provide additional resources on topics through multiple channels to support ES to implement practices, culminating in peer calls, sharing their experiences implementing new concepts. Staff provide 1:1 TA to ES & RRH providers. TA focuses on lowering barriers & providing housing-focused services, helping providers meet the CoC's identified performance measures. The CoC evaluates ES performance based on the following benchmarks: participants with disabling conditions (50%); median length of participation (90-120 days); adults increased earned cash income (10%); exits to PH (35%). The CoC evaluates RRH performance based on the following benchmarks: adults increased earned cash income (20%); median length of project participation (180-270 days); exits to PH (80%). In 2025, staff will hold performance measure webinars, highlighting key measures & how to use the APR to evaluate performance. Staff will help ES & RRH projects set goals to reach CoC benchmarks & provide TA based on their needs. 2)The CoC currently has a 98% PSH retention rate or PH destinations exits. Staff conduct a performance improvement process with PSH projects, wherein staff review project/client documents to evaluate compliance, adherence to best practices (e.g., Housing First), & performance. After review, staff work with project staff to implement action plans, setting goals & timelines. The CoC evaluates PSH performance based on the following benchmarks: exits to PH (80%); adults increase earned cash income (20%); adults increase unearned cash income (35%). In 2025, staff will hold a performance measures webinar, highlighting key measures & ways to use the APR to evaluate performance. Staff will help PSH projects set goals to reach CoC benchmarks & provide TA based on the project's needs. 3) An NCCEH Project Specialist oversees the CoC's strategy to increase the rate that HHs exit or retain PH.

| 2C-4. | Reducing Returns to Homelessness–CoC's Strategy. |
|-------|--|
| | NOFO Section V.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 that individuals and families return 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. |

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 The CoC uses BNL data to identify HHs returning to homelessness. It evaluates HH & project data to determine common factors of HHs returning to the system & uses these factors to develop strategies to decrease returns. The CoC also runs the 0701 HMIS returns report for each funded CoC project to identify HHs that have returned to homelessness in the last 2 years to understand HH attributes that help the CoC to collate common threads that inform TA interventions. 2) The CoC prioritizes & targets limited homelessness prevention funding for return homelessness, meaning HHs who have a history of homelessness or who exited from RRH/PSH projects previously. CoC written standards require projects to take a progressive engagement approach with HHs, allowing regional CE Leads & rehousing agencies to transition higher needs HHs at risk of returning to homelessness without continuing housing supports to step up from RRH to PSH &/or shift to available EHVs or HCVs setasides. The CoC's number one priority for EHVs is HHs to move on from PSH/RRH. This priority has been especially important for RRH HHs who cannot access PSH due to eligibility/availability & need continuing housing subsidy to sustain PH long-term. The CoC's new B@H BoS rehousing program enters all HHs into RRH first, evaluating HHs regularly to determine long-term housing needs, stepping HHs up to PSH when long-term financial assistance & intensive services are needed or moving HHs to leveraged Stability Vouchers or HCVs when only housing subsidy is needed. CoC staff provide ongoing TA to ES on best practices & work with project staff on difficult cases, providing guidance on ways to engage landlords/hard-to-house HHs to improve PH exits. In late 2023, the CoC launched a new ES innovation series, based on NAEH's 5 Keys to Effective ES. Through quarterly webinars, staff introduce emerging best practice concepts (e.g., shared housing; harm reduction; case management) to ES across the CoC, bringing in national, state, & local partners to highlight successful practices. Staff regularly provide additional resources on topics through multiple channels to support ES to implement practices, culminating in follow-up calls where ES share their experiences implementing the new concepts. 3) An NCCEH Project Director works with PH projects to improve performance. An NCCEH Project Specialist works with CE Leads on local CE implementation & oversees the BNL.

| 2C-5. | Increasing Employment Cash Income–CoC's Strategy. |
|-------|--|
| | NOFO Section V.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 employment 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. |
| | |

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 The CoC takes a dual approach to help HHs access earned cash income. First, it engages stakeholders to assist the CoC to develop a comprehensive plan. The CoC engages NC Works (NCW) Commission, designated as NC's Workforce Development Board, to discuss strategies that NC can use to engage service providers in their work to connect PEH to sustainable, living wage employment. In Fall 2023, CoC staff met with the Rural Economic Development Division Asst Secretary at NC Commerce (NCC) to discuss potential collaborations, including using NC funding initiatives to award resources to ES, Community Action Agencies, & others to address jobs & training opportunities. The CoC met with the Division of Workforce Solutions Asst Secretary to connect to local Workforce Development Boards to foster partnerships to align with the launch of the CoC's CoC-wide B@H BoS rehousing program. Second, the CoC connects locally to employment providers & services. CoC members, such as Vocational Rehabilitation (VR), NCW, & Work First (WF) provide direct assistance to PEH to increase earned income. The CoC set an earned income performance measure benchmark for ES, RRH, HP, & PSH projects. CoC staff review HMIS data with project staff, comparing current & past performance on earned income, brainstorming strategies, setting goals. & having discussions with local resources to support work procurement. In CY23, CoC-funded projects helped 11% of participants increase earned income. The CoC advertises all job-related resources to stakeholders through monthly meetings & email lists. These resources include job fairs & listings, employment training, & employment provider news. 2) 100% of funded projects connect HHs to mainstream employment programs. They collaborate with mainstream services such as VR, NCW, WF, Goodwill, & DSS work programs to increase job placement, improve skills, mentor participants, & decrease barriers. The CoC encourages providers to formalize partnerships through MOUs. 22% of the CoC Program funding portfolio lies with Tailored Plan Organization (TPO). Each TPO has a Supported Employment program, helping HHs with behavioral health issues find & maintain long-term employment. This program is available to provide employment support to HHs in PSH/RRH projects across the CoC. 3) An NCCEH Project Specialist works with state & local communities to help HHs increase earned income.

| 2C-5a. | Increasing Non-employment Cash Income–CoC's Strategy | |
|--------|--|---|
| | NOFO Section V.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. | |

| _ | | • | |
|---|----------------------------|----------|------------|
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 The CoC employs several strategies to increase unearned income. Stakeholders such as VAMCs, DSS, & NC Legal Aid provide direct assistance to PEH to increase unearned income from sources such as VA disability & retirement, TANF, & SSI-SSDI. The CoC also emphasizes the usage of SOAR to help people with disabilities navigate the often-complex SSA system to access disability benefits. The NCCEH SOAR Specialist who oversees the state program has attended a meeting of the 13 Regional Committees in 2024 to introduce SOAR, provide education materials, & encourage local agency staff to complete SOAR training & begin implementing the process in their projects. Over the last 3 years, 17 staff in the CoC have completed SOAR training & worked with people to apply for SSA benefits. When SSA does not approve SOAR-driven applications, SOAR case workers help participants file a decision reconsideration. If this fails, they connect participants to free, local attorneys to file an appeal & assist the team until a final determination has been made. The CoC has set an unearned income performance measure benchmark of 35% for PSH projects. CoC staff review HMIS data with project staff, comparing current & past performance on unearned cash income. The CoC incentivized projects applying for CoC & ESG Program funding to increase unearned cash income through extra points on scorecards. Many CoC providers have formal relationships with local benefit specialists, inviting them into ES/TH/Food programs to work directly with participants. CoC staff seek state & local resources which can help increase access to unearned cash income & connect them to Regional Committee leadership & specific providers to build partnerships locally. 2) An NCCEH Project Specialist works with NC & local entities & providers in the CoC to help increase unearned cash income. An NCCEH Project Specialist oversees all trained SOAR caseworkers in NC.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;

Project Name

- FY 2024 CoC Application Navigational Guide; - Section 3 Resources;

Project Type

- PHA Crosswalk; and
- Frequently Asked Questions

| 3.4 | N-1. New PH-PSH/PH-RRH Project-Leveraging Housing Resources. | |
|---------|---|-----|
| | NOFO Section V.B.6.a. | |
| | You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen. | |
| | s your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized | Yes |
| | housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness? | 103 |
| | | |
| | | , |
| 3A | New PH-PSH/PH-RRH Project-Leveraging Healthcare Resources. | |
| | NOFO Section V.B.6.b. | |
| | You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen. | |
| | | |
| | s your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness? | Yes |
| | | , |
| 3A-3. I | Leveraging Housing/Healthcare Resources–List of Projects. | |
| | NOFO Sections V.B.6.a. and V.B.6.b. | |
| г | | 1 |
| | 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. | |

| | | | = |
|------------------|--------|----|------|
| Welcome Home PSH | PH-PSH | 20 | Both |
| | | | |

Rank Number

Leverage Type

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|---|
|---|

3A-3. List of Projects.

1. What is the name of the new project? Welcome Home PSH Expansion Grant

2. Enter the Unique Entity Identifier (UEI): G4JXYRTM91N6

3. Select the new project type: PH-PSH

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

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) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2024 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

| 3B-1. | Rehabilitation/New Construction Costs-New Projects. | |
|-------|---|----|
| | NOFO Section V.B.1.r. | |
| | our CoC requesting funding for any new project application requesting \$200,000 or more in funding nousing rehabilitation or new construction? | No |
| 3B-2. | Rehabilitation/New Construction Costs-New Projects. | |
| | NOFO Section V.B.1.r. | |
| | 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

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

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
- FY 2024 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 Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes. | |
|-------|---|----|
| | NOFO Section V.F. | |
| | | |
| proj | our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes? | No |
| | | |
| 3C-2. | Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. | |
| | NOFO Section V.F. | |
| | 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

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4A. DV Bonus Project Applicants for New DV Bonus **Funding**

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2024 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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| ΔΔ-1 | New DV Bonus | s Project Applicants. | | | |
|--------|-------------------|--------------------------------------|---|------------|-----|
| 7/1-11 | NOFO Section | | | | |
| | 1401 O Gecuon | 1.D.O.j. | | | |
| | | | | T. | |
| | Did your CoC su | bmit one or more new project appli | cations for DV Bonus Funding? | | Yes |
| | | | | | |
| 4A-1a. | DV Bonus Proj | ect Types. | | | |
| | NOFO Section | I.B.3.j. | | | |
| | | | | _ | |
| | Select yes or n | o in the chart below to indicate the | type(s) of new DV Bonus project(s) your CoC | | |
| | included in its I | FY 2024 Priority Listing. | | | |
| | | | | | |
| Pro | ject Type | | | | |
| 1. SS | O Coordinated E | Entry Entry | | Yes | |
| 2. PH | -RRH or Joint TI | H and PH-RRH Component | | Yes | |
| | | | | | |
| 4A-2 | Information Ab | out the Project Applicant for the Ne | w Support Services Only Coordinated Entry | | |
| | (SSO-CE) DV | Bonus Project. | | | |
| | NOFO Section | I.B.3.j.(3) | | | |
| | | | | | |
| | Enter in the ch | art below information about the proj | ect applicant that applied for the new SSO-CE | | |
| | DV Bonus proj | ect: | | | |
| | | | | | |
| | | | | | |
| | 1. | Applicant Name | North Carolina Coalition to End Hom | nelessness | |
| | | Project Name | NC Balance of State CoC IPV CE P | roiect | |
| | | , | 1 1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | -3 | |

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| 4A-2a. | Addressing Coordinated Entry Inadequacies through the New SSO-CE DV Bonus Project. |
|--------|--|
| | NOFO Section I.B.3.j.(3)(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. |

1)The CoC has 67 projects serving people experiencing interpersonal violence (PEIPV) across the CoC with 34% participating in CE. In 2023, participating VSPs made 1,200 referrals to CE which is lower than the # of PEIPV served over the same period. Per the NC Council For Women (CFW), which distributes federal IPV funding & certifies VSPs serving PEIPV, the full network of VSPs in the CoC served 11,442 PEIPV. Due to HMIS prohibitions, the CoC's decentralized CE system uses an alternative process to collect VSP referrals. VSPs submit a form with a coded entry for each assessed HH, which populates in Smartsheet for CE Leads to manually enter in the BNL. Despite the CoC's efforts to address safety concerns (w/ input from the NCCADV & PEIPV), the decentralized CE system, as currently designed & which relies on part-time regional CE Lead staff, does not have the capacity to provide the level of support & engagement necessary to entice VSPs to participate. This means that most PEIPV do not access the PH resources they need. This was particularly apparent in 2023 as NCCADV launched it's DV Bonus Safe at Home RRH (S@H) project. In its first year, S@H spent only 47% of funding due to a lack of eligible referrals from CE. 2) The proposed project will address these inadequacies by a) centralizing the system at the CoC-level. NCCEH will hire 2 dedicated CE staff (with preference given to people with IPV experience) to operate a separate but complementary CE system to specifically provide capacity to support all VSPs in the CoC & provide access to PEIPV. Staff will conduct assessments for PEIPV currently unconnected to services or for VSPs without adequate staff capacity; connect PEIPV to ES & other services; & make appropriate referrals to PH resources (S@H & other CoC- & ESG-funded PH resources); b) enter data into a comparable database, collecting assessment information from VSPs through encrypted systems; prepare the BNL; & facilitate weekly VSP case conferencing; c) engage VSPs across the CoC, providing training, ongoing TA, & support & offering capacity as needed to ensure all PEIPV needing PH have access to resources/services; d) staff a newly formed DV CE GB populated by experts from NCCADV, NCCASA, NCDHHS RPE, & local VSPs, & people with lived expertise of IPV to oversee the system, evolve P&Ps. & evaluate the implementation; e) develop & implement an advertising plan, specifically to increase access in rural areas of NC not covered by existing VSPs.

| 4A-2b. | Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New SSO-CE DV Bonus Project. | |
|--------|---|--|
| | NOFO Section I.B.3.j.(3)(d) | |
| | Describe in the field below how the new project will involve survivors: | |

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| 1. | with a range of lived expertise; and |
|----|---|
| 2. | in policy and program development throughout the project's operation. |

1.2) The new project allows the CoC to increase the participation of survivors with a range of lived experience of IPV in governance, decision-making, & policy & project development. The CoC has a strong partnership with NCCADV, with staff from both agencies sitting on reciprocal Governance & Advisory Boards, providing TA to providers in both systems & collaborating on the implementation of the CoC-wide, DV Bonus RRH project. With burgeoning relationships developed during 2024, this project will allow the CoC to build stronger relationships with NCCASA, the CFW, & the NCDHHS RPE program. By deepening these relationships with state coalitions & departments, the CoC will develop a more comprehensive feedback loop through community forums, surveys, & participation on subcommittees, workgroups, & boards. The CoC will form a new governance board to specifically oversee the development & implementation of the new CE project. This board will consist of representation from our state coalitions & departments supporting survivors of IPV, local VSPs participating in the system & survivors of IPV, ensuring at least half of the membership consists of survivors. The CoC will also evaluate CoC subcommittee & advisory board membership slates to ensure inclusion of at least 1-2 survivors to assist with decisions-making in all areas of coordination, policy, & project work. The project will facilitate an annual evaluation of the CE system surveying participating VSPs, PEIPV enrolled in PH projects in the last year, & survivors entering CE. For current/former CE survivor participants, surveys offer an opportunity to highlight the types of assistance that would be most helpful. CE effectiveness to provide connections to services/housing. system strengths/challenges to communicate expectations, & evaluate services/PH timeliness. With the addition of dedicated CE staff operating the DV CE system, the project will have the capacity to hold interviews/forums with survivors across the CoC's geographic area that will inform decision-making on how to make the new project more effective & safer for survivors. The CoC launched a new CE assessment in 06/24, developed in conjunction with the CoC's CE Equity Core Team, which included CE Leads, CoC staff, PLE, VSPs, & survivors. The Core Team will evaluate the effectiveness of the new assessment through a continuous quality improvement process, coordinating with the new DV CE governance board.

| 4A-3. Data Assessing Need for New DV Bonus Housing Projects in Your CoC's Geographic Area. | | |
|--|--|-------|
| | NOFO Section I.B.3.j.(1)(c) and I.B.3.j.(3)(c) | |
| | | |
| 1. | Enter the number of survivors that need housing or services: | 1,294 |
| 2. | Enter the number of survivors your CoC is currently serving: | 292 |
| 3. | Unmet Need: | 1,002 |

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| 4A-3a. | How Your CoC Calculated Local Need for New DV Bonus Housing Projects. | |
|--------|---|--|
| | NOFO Section I.B.3.j.(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. | |

1,2) The Council For Women (CFW), a govt agency advising the Governor's Office & NC General Assembly & which oversees the dispersal of federal funding to VSPs, conducts an annual report of all VSPs serving PEIPV. In the most recently published data set (07/22 to 06/23), of the 11,442 people seeking assistance for IPV, 1,294 PEIPV needed PH assistance. In data pulled from the CoC-wide, DV Bonus-funded Safe at Home (S@H) RRH project & HMIS data for all PH & CE projects from 06/24, the CoC was currently serving 292 survivor HHs to access PH resources. 3) Two factors play a significant role in why the CoC currently lacks the ability to meet the needs of all PEIPV across the CoC: a) while S@H has a significant amount of funding to work with PEIPV to find, access, & stabilize in PH, the project, since launch in 2022, has relied on local VSPs with little experience & few relationships with landlords & property providers. NCCADV, the grantee, & CoC staff have provided ongoing training & TA to improve knowledge & offer best practices. This support has helped accelerate PH placements. However, local VSPs continue to struggle to build relationships with local property providers & compete in an extremely tight housing market in NC, meaning spending has been slow & HHs wait an average of 6 months before locating PH. With the S@H expansion application in the FY24 competition, NCCADV will contract with Housing Collaborative (HC) to provide centralized unit recruitment & landlord engagement services to help local VSPs improve PH location. It has served a similar role in the recently launched CoC-wide, SNOFO-funded Back@Home BoS program, where HC has helped PH providers move-in 221 HHs since launch in 01/24; b) only 34% of VSPs in the CoC participate in the current CE system (CES). Due to HMIS prohibitions, the CoC's CES uses an alternative process to collect VSP referrals whereby they submit a form with a coded entry for each assessed HH, which populates in Smartsheet for CE Leads to manually enter in the BNL. Despite the CoC's efforts to address safety concerns (w/ input from the NCCADV & PEIPV), the CES does not have the capacity to provide the level of support & engagement necessary to entice VSPs to participate. This means that most PEIPV do not access the PH resources they need. NCCEH will apply for a DV Bonus SSO-CE project in the FY24 CoC competition to develop a separate, centralized CE system specifically for PEIPV, addressing the VSPs' safety & privacy concerns.

| 4A-3b. | Information About Unique Project Applicant Requesting New DV Bonus Housing Project(s). | |
|--------|--|--|
| | NOFO Section I.B.3.j.(1) | |

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Applicant: North Carolina Balance of State CoC **Project:** NC-503 CoC Registration FY 2024

NC-503 COC_REG_2024_214769

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.

| | App | licant l | 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 Applicant Requesting New DV Bonus Housing Project(s). | |
|--------|--|--|
| | NOFO Section I.B.3.j.(1) | |
| | | |
| | Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects: | |

| 1. | | North Carolina Coalition Against Domestic Violence |
|----|--|---|
| 2. | Rate of Housing Placement of DV Survivors–Percentage | 53% |
| 3. | Rate of Housing Retention of DV Survivors-Percentage | 76% |

| 4A-3b.1. | Applicant's Housing Placement and Retention Data Explanation. |
|----------|---|
| | NOFO Section I.B.3.j.(1)(d) |
| | |
| | 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 the rate of housing placement; |
| 2. | whether the rate for housing placement accounts for exits to safe housing destinations; |
| 3. | how the project applicant calculated the rate of housing retention; and |
| 4. | the data source (e.g., comparable databases, other administrative data, external data source, |

(limit 1,500 characters)

1) NCCADV operates a CoC-wide, DV Bonus-funded RRH project called Safe at Home (S@H) in partnership with VSPs which provide services, housing search, & financial assistance to HHs at the local level. In the most recent funding cycle, the applicant's partner VSPs enrolled 164 HHs into S@H, assisting 87 HHs locate & move into PH, equaling a housing placement rate of 53%. The data in Q4B3B comes from the most recently submitted APR. 2) The rate of housing placement accounts for all exits to safe housing destinations of a permanent tenure. 3) Of the 87 HHs move into permanent housing, 76% of households retained housing after exit from the program. The retention rate was calculated based on follow-up with households at regular intervals after exit from the project & the number of households who re-engaged with the project after losing their PH placement. 4) NCCADV calculated the housing placement rate based on APR data each VSPs comparable database reported. The agency calculated the housing retention rate through reports provided by contracted VSPs after doing regular follow-up with exited households & data on households returning for additional PH services after exit from the project.

| | | - |
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| 4A-3c. | Applicant's Experience Housing DV Survivors. |
|--------|---|
| | NOFO Section I.B.3.j.(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; |
| 3. | determined survivors' supportive services needs; |
| 4. | connected survivors to supportive services; and |
| 5. | moved survivors from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends. |
| | |

1,2) NCCADV's contracted VSPs attended regional CE case conferencing meetings ready to discuss HHs needing PH assistance & accepted all referrals for prioritized HHs from the BNL. VSPs contacted HHs within 48 hours of referral to schedule intake conversations & worked closely with referring agency staff to collect required documentation. Once determined eligible, VSPs explained project scope, began discussing HH PH preferences, including their needs concerning safety, preferred locations, & accessibility, & set a process for PH search in the community that met both their needs & grant limitations. While VSPs led PH search efforts, they worked collaboratively with HHs to locate potential units, have conversations with property owners, & negotiate rental rates. Once located, VSPs quickly inspected units, worked with HHs & property owners to sign leases, & assisted HHs to move in. VSPs helped HHs understand terms of leases & discussed safety plans as they transitioned back into PH. 3,4) After eligibility determination, VSPs developed housing stabilization plans (HSP) in conjunction with each HH which laid out short- & long-term goals focused on long-term stability & safety. The HSP included selfidentified supportive services HHs needed to reach their goals. Following a Housing First approach, VSPs encouraged & helped HHs obtain identified supportive services & regularly revisited HSPs to update & adjust goals & supportive services as needs changed over time while in the project. VSPs made referrals & provided warm hand-offs to local providers to ensure that HHs connected to the services they desired. They provided transportation (physically or through funding public transport), especially important for HHs in rural areas where providers may not be close at hand. 5) VSPs worked closely with HHs during the housing search process to find units that they could maintain once financial assistance ended. VSPs took several approaches to help HHs build the ongoing income they needed after exit from the project. These included connecting HHs to local employment training & assistance programs that could assist them in securing sustainable, living wage employment; applying for public benefits such as TANF, unemployment, SSI-SSDI, food stamps, Medicaid, & others to build cash & non-cash income; & applying for public housing, HCVs, the NC Targeted/Key program, or other income-based PH units (in case they needed options for other PH as financial assistance ended).

| 4A-3d. | Applicant's Experience in Ensuring DV Survivors' Safety. | |
|--------|--|--|
| | NOFO Section I.B.3.j.(1)(d) | |

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|---|

| | 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 survivors' information and locations confidential; |
| 4. | training staff on safety and confidentially policies and practices; and |
| 5. | taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality. |

1) NCCADV's contracted VSPs conducted intake in their offices, by phone, & virtually to meet survivors' specific needs. VSPs required staff to have secure internet connections & use encrypted communications. NCCADV required contracted VSPs to follow its policy to serve PEIPV separately & communicate with survivors in ways they identified as safe for them. Staff held interviews, whether in a physical space or virtually in a private room with a closed door so discussions remained confidential. 2,5) VSPs explained the scope of the project, began discussing PH preferences, including HH needs concerning safety, preferred locations, & accessibility, & set a process for PH search. VSPs worked collaboratively with HHs to locate potential units, have conversations with property owners, & negotiate rental rates. VSPs inspected units (where they discussed safety concerns), helped HHs sign leases, & assisted with move in. VSPs developed safety plans with HHs as they transitioned into PH. HHs had final choice in which unit they lived based on their safety needs & concerns. VSPs maintained internal records of HH complaints against landlords to screen out potential PH partners for lack of compliance with legal responsibilities. Fair Housing practices, & approaches counter to trauma-informed & survivorsensitive approaches. 3) NCCADV & its contracted VSPs believe confidentiality & choice in information sharing is critical to survivor safety. VSPs did not share HH PII with anyone, including landlords, providers, or CE staff, outside of the bounds of a written, informed, time- & purpose-limited ROI signed by the survivor. VSPs shared the minimum amount of information necessary for HHs to receive services, unless permitted by the ROI. VSPs used comparable databases to collect grant-related data which was only available to staff on a need-to-know basis. HHs kept ownership to whom they divulged their address. NCCADV & CoC staff provided training to contracted VSPs on RRH best practices, CoC grant compliance, landlord engagement, & data collection, all within the context of survivor safety & confidentiality. NCCADV held monthly TA calls with VSPs to peer share & discuss challenges. NCCADV provided additional safety, confidentiality, & trauma-informed care training resources through online resources such as Safe Housing Partnerships, the National Alliance for Safe Housing, & the National Network to End DV & required VSPs to submit documentation of staff completion.

| 4A-3d.1. | Applicant's Experience in Evaluating Its Ability to Ensure DV Survivors' Safety. | |
|----------|--|--|
| | NOFO Section I.B.3.j.(1)(d) | |

Describe in the field below how the project evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement throughout the project's operation.

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(limit 2,500 characters)

1) NCCADV & its contracted VSP partners prioritize survivor safety in all aspects of their work, training staff in safety planning, confidentiality protocols, & trauma-informed care. NCCADV provided TA to VSPs, homeless & housing service providers, & community partners to educate the general public on key aspects of IPV & how everyone can help survivors feel safe. To ensure that its PH project provided trauma-informed, survivor-centered services rooted in safety & privacy, NCCADV with its VSP partners evaluated the project in several ways: gathering direct feedback from project participants through conversations, surveys, & focus groups; providing opportunities for anonymous feedback; & soliciting feedback from community partners on project strengths & challenges & engaging them in planning & updates to project P&Ps. NCCADV staff, leadership, & Board in consultation with CoC staff, used this information & feedback in its ongoing evaluation of project effectiveness to provide opportunities to improve safety approaches. NCCADV & its VSP partners adjusted, improved, & updated policies, relying on data, feedback, & national best practices to improve safety over time. The biggest challenge faced by NCCADV & its partner VSPs was the length of time it took to locate safe. affordable housing for enrolled HHs. Part of this challenge was due to a network of VSPs new to RRH work. While contracted VSPs often assisted HHs they served to locate PH prior to their participation in NCCADV's project, the scope of their landlord engagement work was quite small; their work relied solely on handing lists of property providers to HHs to navigate themselves & rarely included direct outreach/engagement of property providers by VSP staff. Upon launch & throughout the first operating year of the project, VSPs had a steep learning curve, learning on the fly how to engage landlords. The longer survivors live in interim housing &/or in places meant for human habitation the less safe they feel. NCCADV with CoC staff provided a comprehensive training for VSPs on landlord engagement best practices & had ongoing discussions at monthly TA calls. Together, NCCADV & the CoC are currently developing an action plan to provide additional landlord engagement/unit recruitment services through Housing Collaborative & hope to secure funding in the FY24 CoC competition through a DV Bonus expansion project.

| 4A-3e. | Applicant's Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches. | |
|--------|---|--|
| | NOFO Section I.B.3.j.(1)(d) | |
| | | |
| | Describe in the field below the project applicant's experience in: | |
| 1. | prioritizing placement and stabilization of survivors; | |
| 2. | placing survivors in permanent housing; | |
| 3. | placing and stabilizing survivors consistent with their preferences; and | |
| 4. | placing and stabilizing survivors consistent with their stated needs. | |

(limit 2,500 characters)

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1,2) Since 2014, NCCADV staff have served as a CE Council (CEC) member. The CEC developed & continually updates CE P&Ps in conjunction with a variety of stakeholders including VSPs & PEIPV who provide feedback, support, & perspective to ensure P&Ps remain trauma-informed & survivor-centered. The CoC relies heavily on NCCADV's vast expertise on trauma-informed care (TIC), survivor-centered services to ensure CoC-level & programmatic P&Ps integrate these approaches. NCCADV's partner VSPs fully participate in the CoC's CE system, conducting CE assessments, making referrals to the BNL, & for the RRH project, accepting all referrals for prioritized HHs meeting category 4 of the homeless definition. When during the operating year, eligible referrals slowed, NCCADV worked with the CoC to streamline the referral process to ensure that HHs needing PH could quickly connect to partner VSPs for enrollment, services, & PH placement. In keeping with the empowerment model & a trauma-informed, strengths-based approach, VSP staff recognize that HHs are experts in their own lives and are best situated to decide what processes & services are useful for maximizing their strengths & skills & managing the unique issues & barriers they face as survivors. While VSPs took full responsibility for identifying safe, affordable PH, staff allowed HHs the choice to conduct these activities on their own & have final say on whether units located met their safety & other long-term needs. 3,4) VSPs met with HHs in a mutually agreed upon location based on HH needs & preferences. HHs directed when, where, & how often staff meetings occurred. HHs drove case planning & goal-setting based on what they wanted from the project & services. VSP staff provided information on an array of services that might fit HH needs. They supported participants who indicated interest in restoring their natural support systems & helped them establish new community connections to support their self-stated, long-term goals that they identified would foster healing. Because IPV can have a significant negative impact on a HHs economic standing, staff worked with HHs to explore their unique skills, experiences, abilities, & interests to assist them in finding employment as they desired & were able. Following a Housing First approach, VSPs offered services but let survivors regain dignity & self-determination through always having final choice over what services they accessed.

| 4A-3f. | Applicant's Experience in Trauma-Informed, Survivor-Centered Approaches. |
|--------|--|
| | NOFO Section I.B.3.j.(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. | establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials; |
| 2. | providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma; |
| 3. | emphasizing survivors' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations; |
| 4. | 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; |
| 5. | providing a variety of opportunities for survivors' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 6. | offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services. |

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(limit 5,000 characters)

1,2) NCCADV hires staff with experience providing trauma-informed care & trains them in survivor-centered approaches based on a foundation of respect & valuing survivors' experiences, strengths, & agency. The agency does not use punitive measures, relying on Housing First approaches in its PH work & giving PEIPV agency to make decisions based on their own needs & desires. NCCADV proactively seeks to create safe spaces for survivors which includes providing regular opportunities for them to voice concerns, provide feedback, lead initiatives, advocate for themselves, & make choices. NCCADV believes survivor voices & experience set the foundation of the agency's work. NCCADV & its partner VSPs 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. NCCADV connects survivors to local VSPs & other providers in the communities where they live or desire services. VSPs have access to an array of trainings & resources provided by NCCADV directly or through memberships with online resources such as Safe Housing Partnerships, the National Alliance for Safe Housing. & the National Network to End Domestic Violence. NCCADV has partnered with the CoC to integrate trauma-informed, survivor-centered approaches in CE & programmatic P&Ps & provided trainings to non-VSP staff on trauma-informed care & how to appropriately share information on trauma with people they serve. 3) In keeping with the empowerment model & a traumainformed, strengths-based approach, NCCADV & VSP partners recognize that HHs are experts in their own lives and are best situated to decide what processes & services are useful for maximizing their strengths & skills & managing the unique issues & barriers they face as survivors. Staff work collaboratively with PEIPV to identify strengths during intake, goal planning, & ongoing case management conversations. Through strengths-based coaching & goal planning, staff encourage them to utilize these strengths to seek solutions, build confidence, & advocate for themselves to meet self-identified goals. 4) NCCADV & its VSP partners understand that patriarchy, gender inequality, & all oppressions play a central role at the individual, institutional, & cultural levels to create & maintain an environment that accepts IPV. NCCADV actively advocates at local, state, & federal levels for the elimination of all forms of oppressions, including, but not limited to, sexism, racism, & homophobia. NCCADV trains internal & VSP provider staff on equity, cultural responsiveness, safety planning, confidentiality protocols, & trauma-informed care, connecting these practices to daily interactions with PEIPV that present for services. NCCADV holds funded agencies to equal access rules, protecting people identifying as LGBTQ+ & gender non-conforming & provides access to differently abled people or non-English speaking people through a contracted language line &/or local advocates. 5) NCCADV provides oversight to its partner VSPs providing interim & permanent housing services to ensure they use trauma-informed, survivor-centered approaches. In partnership, they connect PEIPV to local therapy resources, mainstream benefits specialists, employment training & services, childcare, mentor programs, peer-led IPV groups, & other resources in places where survivors live. NCCADV has a commitment to hiring people who have experienced IPV for internal staff roles & worked closely with partner agencies to do the same, supporting their efforts to locate staff who can provide peer support & learning both 1:1 & in group settings. 6) NCCADV & its partner VSPs ensure PEIPV have access to a variety of services to meet their self-identified needs. For families with children, they offered a wide variety of services & connections both internally & externally with community partners to help survivors meet their parenting needs. These services & connections include, but are not limited to, funding for family therapy; childcare services &/or

vouchers through local Departments of Social Services; parenting classes; connections to mainstream benefits specifically for families (TANF, WIC); referrals to local homeless school liaisons for educational services, which include helping children stay in originating schools; & referrals to legal aid to deal with custody & other judicial matters.

4A-3g. Applicant's Experience Meeting Service Needs of DV Survivors.

NOFO Section I.B.3.j.(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)

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NCCADV & its contracted VSP partners work closely with survivors to quickly identify their safety & other needs & begin the process of locating safe, affordable permanent housing. When survivors present for services, staff collaborate with them to develop a comprehensive safety plan that addresses short- & long-term needs. These individualized, survivor-centered plans may include connections to healthcare/insurance, therapy, & support groups; enrollment in needed mainstream benefits such as SSI/SSDI, Food Stamps, WIC, & TANF; & referrals to legal support & employment assistance. VSP staff have connections with & make warm hand-offs to employment assistance programs such as WorkFirst & the NCWorks Career Center, helping survivors gain economic independence from their perpetrators. With Medicaid expansion in NC, they help survivors & their children apply for state Medicaid. Until Medicaid approval or if survivors do not qualify for Medicaid, VSPs have built referral relationships with local community health centers that provide services on a sliding scale to patients. NCCADV ensures that each VSP has staff trained in SOAR. VSP staff use the SOAR model to assist survivors with serious mental illness & chronic, debilitating physical health issues apply for SSI-SSDI, becoming their official representative advocate. VSP staff assist eligible survivors to apply for the Crime Victims Compensation Fund, which reimburses survivors who suffer medical expenses & lost wages due to being a victim of a crime (including domestic violence & sexual assault). This assists survivors to pay for medical care, counseling/therapy, & other expenses while they wait to find employment & PH. NCCADV & each contracted VSP provide access to a 24/7 DV crisis hotline that provides trauma-informed support that helps survivors plan for immediate safety, connect to interim housing, & access legal & justice resources. For survivors with school-age children, VSP staff connect families to the local McKinney-Vento homeless school liaison to ensure children have transportation available to their school of origin & access to other needed resources.

| 4A-3h. | Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s). | | | |
|--------|---|---|--|--|
| | NOFO Section I.B.3.j.(1)(e) | | | |
| | | 1 | | |
| | Describe in the field below how the project(s) will: | | | |
| 1. | prioritize placement and stabilization of program participants; | | | |
| 2. | place program participants in permanent housing; | | | |
| | | 1 | | |

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place and stabilize program participants consistent with their preferences; and
 place and stabilize program participants consistent with their stated needs.

(limit 2,500 characters)

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1,2) NCCADV & its contracted VSP partners will actively participate in the CE system, conducting the CoC's standardized assessment, attending case conferencing meetings, & taking referrals for prioritized survivor households to enroll in the RRH project. Upon referral, staff will contact referred households within 24 hours to begin the intake process to quickly document eligibility & develop, in conjunction with the HH, a survivor-centered housing stabilization plan to outline goals, preferences, & needs. In keeping with the empowerment model & a trauma-informed, strengths-based approach, staff will approach survivors as experts in their own lives who are best suited to decide what processes & services they need to maximize their strengths & skills to manage their unique issues & barriers. They will take the survivor's lead in how fast they move towards PH placement but will continually encourage them & ensure they have safe, affordable options to meet their needs when ready. Upon choosing a unit, staff will help survivors move into their new home, access household goods, & update their safety & housing stabilization plan. 3,4) Staff will provide case management to survivors in their homes or another mutually agreed upon place based on their needs & preferences. While staff will attempt to meet with every HH at least once per month, survivors will direct when, where, & how often staff meetings occur & which services, referrals, or resources they access. Survivors will drive case planning & goal setting with staff assistance based on what they need. Staff will provide information on an array of services that might fit the survivor's needs. They will support HHs who have indicated an interest in restoring natural support systems & help them establish new community connections to support their self-stated, long-term goals. Because interpersonal violence has significant negative impacts on HHs economic safety, staff will work with survivors to find employment &/or apply for public benefits for which they are eligible (SSI/SSDI, TANF, WIC, SNAP). Following a Housing First approach, staff will offer services but let survivors regain dignity & selfdetermination through final choice over which service they access.

| 4A-3i. | Applicant's Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s). |
|--------|--|
| | NOFO Section I.B.3.j.(1)(e) |
| | |
| | Describe in the field below examples of how the new project(s) will: |
| 1. | establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials; |
| 2. | provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma; |
| 3. | emphasize program participants' strengths-for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivordefined goals and aspirations; |
| 4. | 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; |
| 5. | provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and |
| 6. | offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services. |

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(limit 5,000 characters)

1,2) NCCADV hires staff with experience providing trauma-informed care & trains them in survivor-centered approaches based on a foundation of respect & valuing survivors' experiences, strengths, & agency. NCCADV will not use punitive measures, relying on Housing First approaches in its PH work & giving PEIPV agency to make decisions based on their own needs & desires. It will proactively seek to create safe spaces for survivors which includes providing regular opportunities for them to voice concerns, provide feedback, lead initiatives, advocate for themselves, & make choices. NCCADV believes survivor voices & experiences set the foundation of the agency's work. NCCADV & its partner VSPs & Housing Collaborative (HČ) will take a traumainformed 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 will connect survivors to local VSPs, HC, & other providers in the communities where they live or desire services. In all of its housing work, the provision of housing & services will remain separate with households able to access & keep housing whether they accept services or not. VSPs & HC will maintain access to an array of trainings & resources provided by NCCADV directly or through memberships with online resources such as Safe Housing Partnerships, the National Alliance for Safe Housing, & the National Network to End Domestic Violence. NCCADV will continue to partner with the CoC to integrate trauma-informed, survivor-centered approaches in CE & programmatic P&Ps & provide trainings to non-VSP staff on trauma-informed care & how to appropriately share information on trauma with people they serve. 3) In keeping with the empowerment model & a traumainformed, strengths-based approach, NCCADV & its partners recognize that HHs are experts in their own lives and are best situated to decide what processes & services are useful for maximizing their strengths & skills & managing the unique issues & barriers they face as survivors. Staff will work collaboratively with PEIPV to identify strengths during intake, goal planning, & ongoing case management conversations. Through strengths-based coaching & goal planning, staff will encourage them to utilize these strengths to seek solutions, build confidence, & advocate for themselves to meet self-identified goals. NCCADV & its partners will 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. 4) NCCADV & its VSP partners understand that patriarchy, gender inequality, & all oppressions play a central role at the individual, institutional, & cultural levels to create & maintain an environment that accepts IPV. NCCADV will continue to advocate at local, state, & federal levels for the elimination of all forms of oppressions, including, but not limited to, sexism, racism, & homophobia, NCCADV will train internal & VSP provider staff on equity, cultural responsiveness, safety planning, confidentiality protocols, & trauma-informed care, connecting these practices to daily interactions with PEIPV that present for services. NCCADV will ensure funded agencies follow equal access rules, protect people identifying as LGBTQ+ & gender non-conforming & provide access to differently abled or non-English speaking people through contracted language lines &/or local advocates. 5) NCCADV will oversee its partner VSPs providing interim & permanent housing services to ensure they use trauma-informed, survivorcentered approaches. In partnership, they will connect PEIPV to local therapy resources, mainstream benefits specialists, employment training & services, childcare, mentor programs, peer-led IPV groups, & other resources in places where survivors live. NCCADV will commit to hiring people who have experienced IPV for internal staff roles & work closely with partner agencies to

do the same, supporting their efforts to locate staff who can provide peer support & learning in both 1:1 & group settings. 6) NCCADV & its partner VSPs will ensure PEIPV have access to a variety of services to meet their self-identified needs. For families with children, they will offer a wide variety of services & connections both internally & externally with community partners to help survivors meet their parenting needs. These services & connections include, but are not limited to, funding for family therapy; childcare services &/or vouchers through local Departments of Social Services; parenting classes; connections to mainstream benefits specifically for families (TANF, WIC); referrals to local homeless school liaisons for educational services, which include helping children stay in originating schools; & referrals to legal aid to deal with custody & other judicial matters.

| 4A-3j. | Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s). | |
|--------|--|--|
| | NOFO Section I.B.3.j.(1)(f) | |
| | | |
| | Describe in the field below how the new project will involve survivors: | |
| 1. | with a range of lived expertise; and | |
| 2. | in policy and program development throughout the project's operation. | |

(limit 2,500 characters)

1,2) NCCADV understands that including survivors with a range of lived experience in policy & program development remains essential to the RRH program's success to meet urgent & long-term needs. To ensure it provides trauma-informed, survivor-centered services focused on safety, NCCADV will evaluate its program regularly & include diverse feedback opportunities from people experiencing a range of IPV (DV, SA, dating violence, stalking, & human trafficking) who have navigated the CoC's system of care & NCCADV's programs. It will offer feedback chances through direct engagement of people that the program serves (1:1 conversations, surveys, focus groups); providing chances for anonymous feedback through 3rd parties; enlisting VSPs to share insights into NCCADV's strengths, challenges, & improvement opportunities on its PH services & supports; & soliciting help from other partners, engaging them directly in planning. NCCADV Board & staff will evaluate data gathered, incorporating ideas in a continuous quality improvement process to update program P&Ps. NCCADV will work with its partner VSPs & Housing Collaborative (HC) to adjust, improve, & update P&Ps relying on data, feedback, & national best practices to improve safety & effectiveness. In its first year of HC partnership, this will be especially important as the program begins to incorporate new procedures, allowing HC to provide centralized landlord engagement & unit recruitment services to assist partner VSPs to more quickly locate & secure PH for survivors. NCCADV will work closely with CoC staff & the Lived Expertise Advisory Committee (inclusive of survivor members) to update the annual CE evaluation process to adjust surveys & data collection methods. The CE evaluation will allow NCCADV & the CoC to better understand survivors' CE interactions, assessment & referral process effectiveness. & the length of time it takes survivors to access PH. NCCADV will continue to facilitate the CDC-funded Delta State Steering Committee (SSC), bringing together voices from VSPs, survivors, NCCASA, NC DHHS' RPE dept, & others to oversee the NC prevention plan. The SSC will provide a framework to collect data, engage with prevention programs, & document/plan for best practice training such as trauma-informed care & safety planning. The SSC will help identify barriers survivors experience when seeking safe housing & survivor-centered services & assist in the development of P&Ps throughout the program's operation.

4B. Attachments Screen For All Application Questions

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

| | T | | | | |
|--|---|---|--|--|--|
| 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 at | You must upload an attachment for each document listed where 'Required?' is 'Yes'. | | | |
| 3. | files to PDF, rather that create PDF files as a P | 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 mate | ch the questions the | y are associated with. | | |
| 5. | Only upload documents ultimately slows down to | s responsive to the the the funding process. | questions posed-including other materia | al slows down the review process, which | |
| 6. | If you cannot read the | attachment, it is like | y 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 | o read everything yo | ou want us to consider in any attachmen | ıt. | |
| 7. | After you upload each of Document Type and to | attachment, use the ensure it contains a | Download feature to access and check ill pages you intend to include. | the attachment to ensure it matches the required | |
| 8. | Only use the "Other" at | tachment option to | meet an attachment requirement that is | not otherwise listed in these detailed instructions. | |
| Document Typ | ype Required? Document Description Date Attached | | | | |
| 1C-7. PHA Ho Preference | meless | No | PHA Homeless Pref | 10/03/2024 | |
| 1C-7. PHA Mo Preference | oving On | No | PHA Moving On Pre | 10/09/2024 | |
| 1D-10a. Lived Support Letter | Experience | Yes | Lived Experience | 09/23/2024 | |
| 1D-2a. Housin | g First Evaluation | Yes | Housing First Eva | 08/09/2024 | |
| 1E-2. Local Co Tool | ompetition Scoring | Yes | Local Competition | 08/14/2024 | |
| 1E-2a. Scored Project | Forms for One | Yes | Scored Forms for | 09/23/2024 | |
| | 1E-5. Notification of Projects Rejected-Reduced | | Notification of P | 09/26/2024 | |
| 1E-5a. Notifica Accepted | ation of Projects | Yes | Notification of P | 09/26/2024 | |
| 1E-5b. Local C Selection Res | Competition ults | Yes | Local Competition | 09/23/2024 | |
| 1E-5c. Web Po Approved Con Application | | Yes | Web Posting Co | 10/16/2024 | |
| 1E-5d. Notifica Approved Con Application | | Yes | Notification of C | 10/16/2024 | |

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|------------------------|---------|------------|

| 2A-6. HUD's Homeless Data Exchange (HDX) Competition Report | Yes | 2024 HDX Competit | 09/18/2024 |
|---|-----|-------------------|------------|
| 3A-1a. Housing Leveraging Commitments | No | Housing Leverage | 09/18/2024 |
| 3A-2a. Healthcare Formal Agreements | No | Healthcare Formal | 09/18/2024 |
| 3C-2. Project List for Other Federal Statutes | No | | |
| Other | No | | |

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Lived Experience Support Letter

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

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|------------------------|---------|------------|
|------------------------|---------|------------|

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Web Posting -- CoC-Approved CoC Consolidated

Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated

Application

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|------------------------|---------|------------|
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Attachment Details

Document Description: 2024 HDX Competition Report

Attachment Details

Document Description: Housing Leverage Commitment

Attachment Details

Document Description: Healthcare Formal Agreement

Attachment Details

Document Description:

Attachment Details

Document Description:

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Submission Summary

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

| Page | Last Updated |
|---|--------------|
| | |
| 1A. CoC Identification | 09/18/2024 |
| 1B. Inclusive Structure | 10/15/2024 |
| 1C. Coordination and Engagement | 10/15/2024 |
| 1D. Coordination and Engagement Cont'd | 10/15/2024 |
| 1E. Project Review/Ranking | 10/16/2024 |
| 2A. HMIS Implementation | 10/09/2024 |
| 2B. Point-in-Time (PIT) Count | 10/09/2024 |
| 2C. System Performance | 10/09/2024 |
| 3A. Coordination with Housing and Healthcare | 10/09/2024 |
| 3B. Rehabilitation/New Construction Costs | 10/09/2024 |
| 3C. Serving Homeless Under Other Federal Statutes | 10/09/2024 |

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4A. DV Bonus Project Applicants 10/14/2024

4B. Attachments Screen 10/16/2024

Submission Summary No Input Required

HCV ADMINISTRATIVE PLAN

EFFECTIVE 7/1/2024

Western Piedmont Council of Governments



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

The PHA 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 PHA 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 PHA 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 PHA will be in compliance with all relevant fair housing requirements, as described in Chapter 2.

This chapter describes HUD and PHA 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:

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

<u>Part II: Managing the Waiting List</u>. This part presents the policies that govern how the PHA'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 PHA will use to keep the waiting list current.

<u>Part III:</u> Selection for HCV Assistance. This part describes the policies that guide the PHA 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 PHA has the information needed to make a final eligibility determination.

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

This part describes the PHA 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 PHA'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 PHA 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 PHA. The PHA must include Form HUD-92006, Supplement to Application for Federally Assisted Housing, as part of the PHA's application.

WPCOG Policy

Depending upon the length of time that applicants may need to wait to receive assistance, the PHA 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 PHA 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 PHA'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 PHA by mail, electronically, by fax, or submitted in person during normal business hours. Applications must be complete in order to be accepted by the PHA for processing. If an application is incomplete, the PHA 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 PHA must take steps to ensure that the application process is accessible to those people who might have difficulty complying with the normal, standard PHA application process. This could include people with disabilities, certain elderly individuals, as well as persons with limited English proficiency (LEP). The PHA 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 PHA must provide an alternate approach that provides full access to the application process. Chapter 2 provides a full discussion of the PHA's policies related to providing reasonable accommodations for people with disabilities.

Limited English Proficiency

PHAs 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 PHA's policies related to ensuring access to people with limited English proficiency (LEP).

4-I.D. PLACEMENT ON THE WAITING LIST

The PHA must review each complete application received and make a preliminary assessment of the family's eligibility. The PHA 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 PHA 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

WPCOG Policy

If the PHA 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 PHA 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

WPCOG Policy

The PHA will send written notification of the preliminary eligibility determination within 30 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 PHA.

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The PHA 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 PHA may structure its waiting list and how families must be treated if they apply for assistance from a PHA that administers more than one assisted housing program.

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

The PHA's HCV waiting list must be organized in such a manner to allow the PHA 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 PHA to maintain a single waiting list for the HCV program unless it serves more than one county or municipality. Such PHAs are permitted, but not required, to maintain a separate waiting list for each county or municipality served.

WPCOG Policy

The PHA 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 PHA 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 PHAs 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.

WPCOG Policy

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

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

Closing the Waiting List

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

WPCOG Policy

The PHA 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 PHA has particular preferences or funding criteria that require a specific category of family, the PHA 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 PHA 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.

WPCOG Policy

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

Hickory Daily Record

Lenoir News Topic

Morganton News Herald

Taylorsville Times

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

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

Because HUD requires the PHA to admit a specified percentage of extremely low-income families to the program (see Chapter 4, Part III), the PHA 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].

PHA 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

PHA 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

WPCOG Policy

The PHA will monitor the characteristics of the population being served and the characteristics of the population as a whole in the PHA'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

WPCOG Policy

While the family is on the waiting list, the family must immediately inform the PHA 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 PHA 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 PHA request for information or updates, and the PHA determines that the family did not respond because of the family member's disability, the PHA must reinstate the applicant family to their former position on the waiting list [24 CFR 982.204(c)(2)].

WPCOG 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 PHA will send an update request via e-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 e-mail address that the PHA 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 by e-mail, in person, by mail, or by fax. Responses should be postmarked or received by the PHA not later than 15 business days from the date of the PHA 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 resent 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 PHA may reinstate the family if it is determined that the lack of response was due to PHA error, or to circumstances beyond the family's control, as a result of a family member's disability, or as a direct result of status as a victim of domestic violence, dating violence, sexual assault, stalking, or human trafficking, including an adverse factor resulting from such abuse.

Removal from the Waiting List

WPCOG Policy

If at any time an applicant family is on the waiting list, the PHA 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 PHA 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 PHA'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 PHA 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 PHA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the PHA'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 PHA 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 PHA must maintain records showing that such families were admitted with special program funding.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. The PHA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the PHA 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.

WPCOG Policy

The PHA administers the following types of targeted funding:

Family Unification Program

Mainstream Vouchers

Emergency Housing Vouchers

HUD-VASH Vouchers

Housing Stability Vouchers

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

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

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

PHAs 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 PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

WPCOG Policy

The PHA will use the following local preferences:

- 1. The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.
- 2. The PHA will offer a residency preference (applicants who reside, work, or who have been hired to work within WPCOG's jurisdiction).
- 3. The PHA will offer a preference to a family that includes a family member who is a person with disabilities.
- 4. The PHA will offer a preference to active members of the United States Armed Forces, Veterans of the United States Armed Forces, or spouses and surviving spouses of U.S. Veterans where the veteran was discharged other than dishonorably.
- 5. The PHA will give a preference to families or individuals who are literally homeless and non-elderly persons with disabilities transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless as defined by HUD, consistent with the North Carolina Coalition to End Homelessness and on consultation with local partner agencies.

Examples of homeless service agencies include but are not limited to: domestic violence shelters, social service agencies, mental health agencies, homeless shelters and/or an organization affiliated with the Continuum of Care.

The status of homelessness is verified by the agency working with the homeless individual. Eligibility for the Housing Choice Voucher program is determined by the RHA in accordance with HUD regulations and PHA policy.

The PHA will first assist families that have been terminated from the HCV program due to insufficient funding.

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

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA'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 PHA 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)].

WPCOG Policy

The PHA 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 PHA 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 PHA 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)].

WPCOG 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 PHA'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 PHA. Documentation will be maintained by the PHA 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 PHA does not have to ask higher placed families each time targeted selections are made.

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, ranked as follows:

- 1. Families that have been terminated from the WPCOG's HCV program due to insufficient program funding will receive 11 points.
- 2. Families that claim the residency preference (applicants who reside, work, or who have been hired to work within WPCOG's jurisdiction) will receive 4 points.
- 3. Families that include a family member who is a person with disabilities will receive 3 points.
- 4. Veteran families will receive 2 points.

5. Homeless families will receive 1 point.

The outcome of the above point system would be as follows:

- Homeless Resident Disabled Vet family 10 points
- Resident Disabled Vet Family 9 points
- Homeless Resident Disabled Family 8 points
- Homeless Resident Vet Family 7 Points
- Resident Disabled Family 7 Points
- Resident Vet Family 6 Points
- Homeless Disabled Vet Family 6 Points
- Homeless Resident Family 5 Points
- Resident Family 4 Points
- Homeless Disabled Family 4 Points
- Homeless Vet 3 Points
- Disabled 3 Points
- Veteran 2 Points
- Homeless 1 Point
- No Preference 0 points

11 points would be added to each of the above categories if a family gets the 1st preference - termination due to insufficient program funding.

4-III.D. NOTIFICATION OF SELECTION

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

WPCOG Policy

The PHA will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of requirements that must be followed in order for family program eligibility to be determined.

The notice will advise the family of all documents that must be required, including information about what constitutes acceptable documentation

If a notification letter is returned to the PHA 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 PHA obtain the information and documentation needed to make an eligibility determination though a face-to-face interview with a PHA 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 PHA 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 PHA [Notice PIH 2018-24].

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

WPCOG Policy

Verification of provided information will not begin until signed release forms are returned to the PHA.

Pending disclosure and documentation of social security numbers, the PHA will allow the family to retain its place on the waiting list for *30 days*. If not all household members have disclosed their SSNs at the next time the PHA is issuing vouchers, the PHA 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 PHA 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 must be provided within 15 days of the request letter. (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.

4-III.F. COMPLETING THE APPLICATION PROCESS

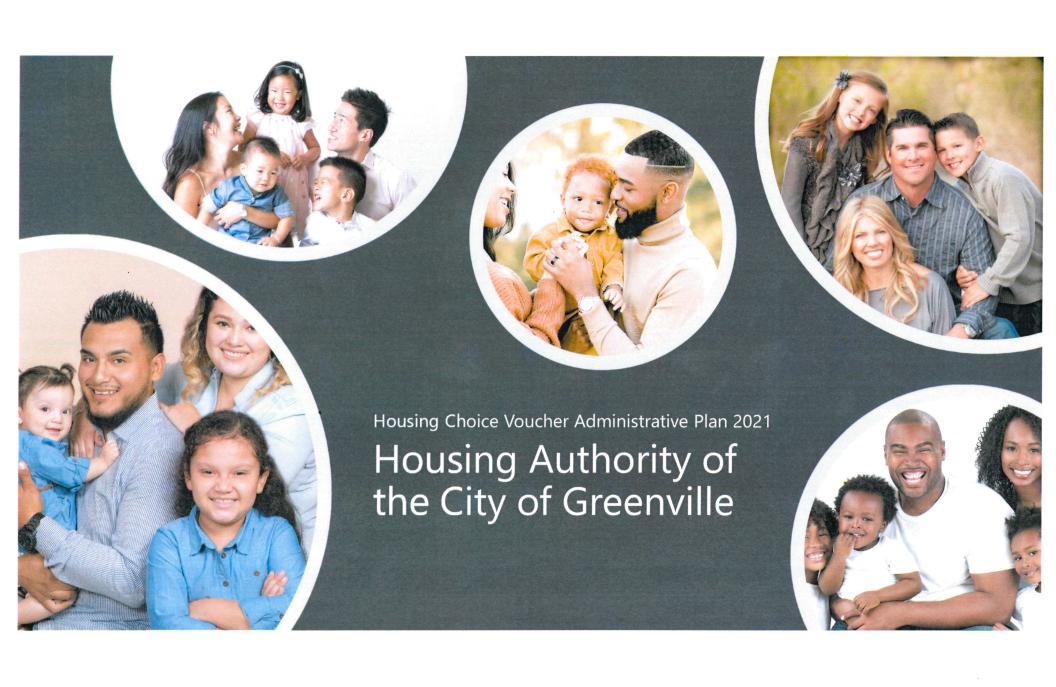
The PHA must verify all information provided by the family (see Chapter 7). Based on verified information, the PHA must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference that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

WPCOG Policy

If the PHA determines that the family is ineligible, the PHA 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, claimed preferences), the family will be returned to its original position on the waiting list. The PHA will notify the family in writing that it has been returned to the waiting list, and will specify the reasons for it.

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



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:

<u>Part I: The Application Process</u>. 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.

<u>Part II: Managing the Waiting List</u>. 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.

<u>Part III: Selection for HCV Assistance</u>. 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 resent 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.

Page 4-14

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

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

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

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

HACG Policy

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

Order of Selection

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

HACG Policy

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

4-III.D. NOTIFICATION OF SELECTION

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

HACG Policy

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

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

Who is required to attend the interview

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

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

4-III.E. THE APPLICATION INTERVIEW

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

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

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

HACG Policy

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

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

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

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

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

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

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

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

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

4-III.F. COMPLETING THE APPLICATION PROCESS

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

HACG Policy

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

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

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



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

To Whom It May Concern,

The NC Balance of State CoC (NC BoS CoC) Lived Expertise Advisory Council (LEAC) is a direct subcommittee of the CoC's governing body, the Steering Committee, and is comprised entirely of people with lived experience of homelessness. The LEAC was formed in October 2021 with 10 seats and seeks to build a representative body of people with diverse backgrounds and identities across the 79 county geographic region to participate in the governance and administration of the CoC. The purpose of the LEAC is to improve the provision of services to people experiencing homelessness and the policies that govern these services across the NC BoS State CoC through insights and expertise that come from people experiencing homelessness firsthand. According to the Governance Charter of the NC BoS CoC, the LEAC will:

- Set their own meeting schedule and frequency;
- Recommend action steps to the NC BoS CoC Steering Committee to improve CoC policies based on insights and expertise from people experiencing homelessness firsthand;
- Recommend action steps to service providers in the NC BoS CoC toward implementing best practices based on insights and expertise from experiencing homelessness firsthand;
- Seek professional development and advocacy opportunities for LEAC members; and
- Offer members financial compensation for participation.

Since its formation, the LEAC have been actively involved in every facet of the CoC. Within the first year, the LEAC achieved one of its first goals of ensuring that every standing subcommittee of the NC BoS CoC (Funding and Performance Subcommittee, Project Review Committee, Racial Equity Subcommittee, Coordinated Entry Council, and Veterans Subcommittee) had representation from people who have experienced homelessness. In 2022 The NC BoS CoC Steering Committee added an additional at-large seat dedicated to a person with lived experience, which was filled by a member of the LEAC. LEAC members spoke at the North Carolina Bringing It Home State Conference on Ending Homelessness in 2022, 2023, and 2024, urging organizations across the state to prioritize individuals who have experienced homelessness in decision-making and hiring. Further, in 2023 the LEAC worked with the Scorecard Subcommittee and the Steering Committee to include new questions in scorecards guiding funding decisions for the Emergency Solutions Grant and CoC Programs. These additions to the scorecard help prioritize agencies for public funding that have persons with lived experience in positions of leadership and are seeking feedback from clients. In 2023, the LEAC submitted a new policy for consideration by the Steering Committee and incorporation into the Governance Charter. The NC BoS CoC Client Bill of Rights is a unique policy, providing recourse for any client in the CoC who feels that they have experienced a violation of the basic rights stated in the policy. In 2024, former LEAC members attended the National Alliance to End Homelessness Conference on Ending Homelessness and Capitol Hill Day and educated elected officials and their staffs. The LEAC has set a new priority in building the representation and participation of persons with lived experience at the Regional Committee-level in order to directly impact service provision.

With continued involvement and leadership of the LEAC, its members support the plans & strategies outlined in the FY2024 CoC Program Application submitted to HUD to serve populations experiencing homelessness with severe service needs.

| Melissa Hewit | Docusigned by: Melissa Hewitt | 9/16/2024 Date: |
|---------------|--|--------------------|
| Karen Carroll | Signed by: EARCH CARVOLL 3E998F6436634FC | 9/17/2024 Date: |
| Von Nixon | Signed by: Von My son | 9/23/2024 Date: |





Agency Name: Rockingham County Help for Homeless **Project Name:** RCHH Permanent Supportive Housing

Staff Reviewer: Brian K. Alexander

Document Review

| Document Type | Compliance Issue | Question to Answer | Meets Standard? | Notes | Potential Solution |
|--------------------------------------|-------------------|---------------------------------------|-----------------|---|---|
| Job Description: Program Director | Written standards | Is the staff member qualified for the | □ Degree | Executive Director/Grant Admin: | Update job descriptions to include information about the agency, the |
| Staff and Training Form | | program? | □ Experience | Job description lacks any information on degree or relevant experience and only details duties. | position's role within the context of the agency, primary responsibilities (many of these are the same as the case manager's responsibilities, essential skills/qualifications, and essential knowledge. |
| Job Description: Case Manager | Written Standards | Is the staff member qualified for the | □ Degree | Case Manager: Job description lacks any | Update job descriptions to include information about the agency, the |
| Staff and Training Form | | program? | □ Experience | information on degree or relevant experience and only details duties. | position's role within the context of the agency, primary responsibilities (many of these are the same as the case manager's responsibilities, essential skills/qualifications, and essential knowledge. |

| Does the job description describe case management activities appropriate for the program? | Tenancy Supports CM in home Use CM Tool Income Supports | The job description generally describes some duties that relate to tenancy supports and CM but needs to include more detail about the types of activities that would be expected, including the types of support given and/or types of referrals made on behalf of the household; connection to income supports; use of the CM Tool; and how CM is offered to the household. | Update the job description to more descriptive of the how and the types of support given and/or connected to including income supports; use of the required CM tool to evaluate ongoing sustainability of participating households. |
|---|---|--|--|
| Does the job description describe housing search and location services? | Yes | The job description says "Make referrals for housing" but does not detail other housing search and location activities, except conducting housing inspections as needed. | Update job description, detailing the types of housing search and location services provided by the program. PSH programs should be actively recruiting landlords/management companies to rent to participants of the program. CMs should be working alongside participating households to locate suitable housing, taking them to view properties, attending leasing meetings with landlords, negotiating rents within the FMR required by HUD, assisting participants during lease signings and helping them understand their rights and |

| | | | | | obligations under the lease, and facilitating move-in. |
|--|-------------------|--|----------------------|---|---|
| Job Description: Housing Specialist Staff and Training Form | Written Standards | Is the staff member qualified for the program? | Degree Experience | NA | NA |
| | | Does the job description describe housing search and location services? | Yes | NA | NA |
| Staff and Training Form | Written Standards | Does training list contain trainings on Housing First, written standards, or comparable? | Yes | The staff training form does not include any trainings. | All staff should have relevant training to understand the program, including but not limited to, the annual HUD start-up meeting; any NCCEH PSH grantee meetings or webinars; potentially the NC Homeless Conference. The program should also seek other resources for continuing education of staff on topics such as Housing First, PSH best practices, best practices in tenancy supports, and others. |

| Program Policies | Written Standards | Do P&P include HUD | | Yes | Only the second part of | The full HUD Notice CPD-16-011 |
|---------------------|-------------------|-------------------------|-------------|-----|--------------------------|-------------------------------------|
| and Procedures | | Notice CPD-16-11? | _ | | HUD Notice CPD-16- | should be included in the P&Ps. |
| | | | \boxtimes | No | 011 is in the P&Ps. The | |
| | | | | | part included is the | |
| Program | | | | | second part when a | |
| Participant | | | | | household not defined | |
| Agreements | | | | | as chronically homeless | |
| | | | | | cannot be found. | |
| P.2: Under the | | | | | P. 2: P&Ps read "The | |
| CoC program | | | | | CoC program assists | |
| summary, it | | | | | literally homeless | |
| mentions RCHH's | | | | | people, targeting | |
| RRH program. | | | | | chronically homeless | |
| Since this is a PSH | | | | | individuals with | |
| P&Ps manual, | | | | | disabilities for its PSH | |
| remove mention | | | | | program" This is a | |
| of the RRH | | | | | dedicated program and | |
| program. | | | | | should be filling all | |
| | | | | | housing slots with | |
| P.3: Replace the | | | | | households meeting | |
| literally homeless | | | | | the CH definition. | |
| definition with the | | Do P&P include process | | Yes | This information which | The P&Ps should include the |
| one under | | for finding chronically | | | is included as a | program's process for |
| category 1 of the | | homeless households | \boxtimes | No | requirement under | outreaching/engaging the community |
| homeless | | and what happens when | | | Notice 16-011 is not | and households experiencing |
| definition in the | | they cannot be found in | | | included. | homelessness when a chronically |
| regulations. The | | the community? | | | | homeless household cannot be |
| definition | | , | | | | identified. This process should |
| included here | | | | | | include the specific procedures the |
| does not mention | | | | | | program will undertake during the |
| emergency shelter | | | | | | 30-day window and how it will be |
| and should. | | | | | | documented in the file to ensure |

| P.5, B: "The CE center gathers UDEs and is responsible for confirming homeless status of | | | | adherence to the CPD-16-011 prioritization schedule. |
|---|---|------------|---|---|
| the individual or family. The order of preference for homeless verification is" | Does the program require households to participate in services? | □ Yes ⊠ No | P.9 | Click or tap here to enter text. |
| that RCHH expects other community agencies to collect homelessness documentation to determine | Can enrolled households be terminated from the program for refusing services? | □ Yes ⊠ No | P.9 | Click or tap here to enter text. |
| eligibility? | Do P&P use HUD's rental payment standards when requiring households to | ☐ Yes | Unknown: Does the program not charge any occupancy or | The P&Ps should more accurately describe how the utility assistance payment amount is calculated. |
| P.8: "Per CoC rules, households must agree to at least one check-in meeting in-person or by phone once per month" | pay part of rent? | | rental fees? The P&Ps state that "utility assistance is derived by entering client specific information and using a formula presented by HUD. | |

| This is not a PSH regulation. It only | Does the program limit the number of months of | □ Yes | Because information related to the RRH | Remove all references and procedures for the RRH program so |
|---------------------------------------|--|-----------------------|--|---|
| applies to RRH and should be | assistance to enrolled households? | ⊠ No | program are included in the PSH P&Ps, it is | that the P&Ps focus exclusively on PSH. |
| removed from the | | | unclear that the | |
| PSH P&Ps. | | | program does not limit the amount of housing | |
| P.8: Under | | | assistance. | |
| Amount and | | | | |
| Duration of | Does the program meet | | P.7 | Click or tap here to enter text. |
| Support: Many of | the Key Elements of PSH? | agreement does not | | |
| these items are | | have any provision | | |
| relevant to RRH | | that would not be | | |
| but not PSH. | | found in leases held | | |
| While the | | by someone who | | |
| program should | | does not have a | | |
| be using the CM | | disability | | |
| Tool (which is not | | | | |
| mentioned in the | | □ Participation in | P.8 | |
| narrative) at least | | services is voluntary | | |
| quarterly to | | and tenants cannot | | |
| evaluate | | be evicted for | | |
| households, the | | rejecting services | | |
| amount of rental | | | | |
| assistance paid | | ☐ House rules, if | P.11: Housing Rules | Staff suggest reworking the Housing |
| should not be a | | any, are like those | and Expectations: | Rules and Expectations document, |
| factor- PSH | | found in housing for | bullet 5: Willingness to | which tend to be overly restrictive |
| participants, if | | people who do not | allow RCHH to inspect | and in opposition to this key element. |
| required to pay | | have disabilities and | the housing unit at | Many of the things that RCHH |
| for rental costs, | | do not restrict | least monthly; Must | requires could be summed up into |
| should only pay | | visitors or otherwise | provide 90 days written | participant following the terms of the |
| 30% of adjusted | | interfere with a life | notice that you wish to | lease. Staff are afraid that |
| monthly income. | | in the community | move out; | "willingness" to do many things |
| The rental costs | | | | required in the agreement could be |

| chart does not | | P.7 | used as a way to terminate |
|---------------------|-----------------------|-----|--------------------------------------|
| apply and should | time limited, and | | participants. The participant |
| be removed from | the lease is | | agreement says it's for PSH and RRH |
| the P&Ps. | renewable at | | programs. However, the rent share, |
| | tenants' and | | client rent bullets at the bottom do |
| Landlord | owners' request | | not apply for both programs and |
| Recruitment and | | | contradict other portions of the |
| Support P.6), | | P.9 | P&Ps. |
| Amount and | choice in the | | |
| Duration of | support services | | |
| Support, and | they receive | | |
| Supportive | uney recent | | |
| Services (P.8-9) | | P.9 | |
| sections pertain | change over time, | | |
| more to RRH than | tenants can receive | | |
| PSH. While these | more intensive or | | |
| sections are | less intensive | | |
| important for PSH, | support services | | |
| they should be | without losing their | | |
| rewritten in terms | homes | | |
| of PSH programs. | | | |
| | □ Before moving | P.5 | |
| Moving On | into PH, tenants are | | |
| section: This is a | asked about their | | |
| good start, but | housing preferences | | |
| this description is | and are offered the | | |
| just the beginning | same range of | | |
| of building Moving | choices as are | | |
| On strategies into | available to others | | |
| the core of the | at their income level | | |
| program. At the | in the same housing | | |
| very least, the | market | | |
| P&Ps should show | | | |
| how it includes | | | |

| the six major | | ☐ Support | This key element does | This key element should be added to |
|---------------------|--------------------------|----------------------|-------------------------|-------------------------------------|
| principles of | | services promoting | not appear in the P&Ps. | the Supportive Services section. |
| Moving On: | | recovery are | | |
| Identifying rental | | designed to help | | |
| supports; | | tenants choose, get, | | |
| outreach, | | and keep housing. | | |
| engagement, and | | In all forms of PSH, | | |
| assessment; | | the staff helps | | |
| identifying | | tenants establish a | | |
| housing; | | household, meet | | |
| oversight, | | the obligation of | | |
| governance, and | | tenancy (such as | | |
| evaluation; | | paying rent on | | |
| aftercare services; | | time), and get along | | |
| and prepping | | with neighbors. | | |
| participants. | | | | |
| | | | P.8 | |
| | | of housing and | | |
| On client | | support services are | | |
| application | | distinct. | | |
| (2014), the | | | | |
| signature box | | | | |
| implies that if | | | | |
| participants are | | | | |
| unwilling to set | Do P&P describe the | ⊠ Yes | Looks good! | Click or tap here to enter text. |
| goals and work | process for annual | | | |
| towards | recertification in the | □ No | | |
| accomplishing | program? | | | |
| them, they will | | | | |
| have to leave their | Do P&P include | □ Yes | RCHH can terminate a | According to the PSH written |
| housing unit. | appropriate termination | | household if evicted by | standards, "while violation of a |
| | policies and procedures? | ⊠ No | the landlord, but "may | participant's lease or sublease may |
| | | | continue to provide | be cause for termination, program |
| | | | assistance to a | should develop a termination |

household in a new unit if RCHH still thinks this client can benefit from our services."

The termination process also indicates in bullet 4 that the informal hearing will take place between client, RCHH CM, and RCHH ED.

Generally, a termination would allow at least a 30-day notice unless there are extenuating circumstances. services policy giving participants multiple housing chances or work to move participants to a higher-level PSH intervention, when possible (i.e. programs will move a participant two times before terminating him/her from services). Program should only terminate services when clients pose a safety risk to staff or other residents of their community." The P&Ps should be updated with these caveats in mind – how many chances will the program give; if there is an exception (as stated in the last sentence of the P&Ps' termination policy), RCHH should detail the specific criteria of how RCHH makes the decision to keep a household in the project and move them to another unit.

The written standards state "a review of the decision, in which the program participant has the opportunity to present written or oral objections before a person other than the person who made or approved the termination decision." In this case, if the CM approved the decision of termination, they should not be present at the informal hearing. If the ED made the decision, the process should include who (i.e. board subcommittee) would

| | | | | | undertake the informal hearing and make the final decision. Update termination policy to indicate the minimum number of days (recommend 30 days) after notification. The program could include extenuating circumstances for immediate terminations, but the policy should list the extenuating circumstances that would constitute immediate terminations. |
|----------------------------|---------------------------------|--|-----------|---|--|
| | | Do P&P include process for pulling HMIS APR data at least on a quarterly basis? | Yes No | P&Ps do not include any information about HMIS. | RCHH should include procedures for how it collects information and enters it into HMIS. This procedure should include who will pull a quarterly APR and evaluate the effectiveness of the program. This procedure could be integrated in the Intake section. |
| Policies and Procedures | Written Standards Compliance | Do P&Ps include the VAWA Emergency Transfer Policy | Yes No | The P&Ps do not include the VAWA Emergency Transfer Policy. | Please add template provided by staff in an updated version of the P&Ps. |
| HMIS Report 0640 | Written Standards | Are all households entered in the last operating year chronically homeless? | Yes | According to 0640 report, the program had 7 persons enter the program in the operating year with only 2 marked as CH. | Program should be following HUD Notice 16-011. |

| Participant | Written Standards | | | | | |
|-------------------|-------------------|-------------------------|-------------|-----|------------------------|---------------------------------|
| Documents | Compliance | | | | | |
| Verification of | | Is chronic homelessness | | Yes | HMIS 99267: | Program should be following HUD |
| chronic | | documentation complete | | | Paperwork does not | Notice 16-011. |
| homelessness for | | and accurate? | \boxtimes | No | show that they are | |
| all households | | | | | chronic. Help, Inc. | |
| entered into the | | | | | letter shows only ~1 | |
| program for the | | | | | month homeless, even | |
| operating year | | | | | if it states that the | |
| | | | | | client is chronically | |
| (7 person entered | | | | | homeless, it does not | |
| the PSH program | | | | | document that to meet | |
| during the | | | | | the definition. VI- | |
| operating year. | | | | | SPDAT does not | |
| Only 1 | | | | | support CH definition. | |
| household's info | | | | | | |
| was submitted (5 | | | | | Two other single adult | |
| people) | | | | | households did not | |
| | | | | | have supporting | |
| | | | | | documentation. | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Disability documentation | Is disability | \boxtimes | Yes | HMIS 99267: Disability | Click or tan horo to enter toyt |
|---|--------------------------------------|-------------|-----|--|----------------------------------|
| | documentation complete and accurate? | | No | paperwork from SSA looks good! | Click or tap here to enter text. |
| for all households entered into the program for the operating year | and accurate? | | No | The other two single adult households entering the program during the operating year did not have submitted documentation. | |
| | | | | | |
| | | | | | |

| Verification of | Is verification of | \boxtimes | Yes | Verification of | |
|--------------------|--------------------------|-------------|-----|-------------------------|----------------------------------|
| homelessness and | homelessness and | | | homelessness and | Click or tap here to enter text. |
| disability | disability documentation | | No | disability paperwork is | |
| documentation | complete and accurate? | | | good, but the program | |
| for all households | | | | does not show | |
| entered into the | | | | documentation of not | |
| program for the | | | | being able to find CH | |
| operating year | | | | households before | |
| (when no | | | | entry of a non-CH | |
| chronically | | | | household. | |
| homeless | | | | | |
| households could | | | | | |
| be found) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Documentation of process to find prioritized chronically homeless individuals without success | Did the program document the process of trying to find chronically homeless households for enrollment in the program? | Yes | See above! | Click or tap here to enter text. |
|---|---|-----|--|----------------------------------|
| VI-SPDATs for each household entered into the program during the operating year | Do VI-SPDATs show sufficient acuity to warrant entry into PSH? | Yes | HMIS 99267: VI-SPDAT score 9 R6 follows the orgcode PSH scoring recommendation. The other 2 single adult households entered during the operating year did not have | Click or tap here to enter text. |

| | | | submitted documentation. | Click or tap here to enter text. |
|-------------------------------------|--|------------|--|--|
| | Do all new entries into the program have a VI- SPDAT, verifying that all participants enrolled in agency programs in the last operating year were referred through CA? | ☐ Yes ⊠ No | 2 single adult households entering the program during the operating year did not have submitted documentation. | Click or tap here to enter text. Click or tap here to enter text. |
| Copy of sample lease or sublease | Does the lease or sublease have any conditions or requirements not found in standard leases? | ☐ Yes ⊠ No | Looks good! | |

| | Is the lease or sublease | \boxtimes | Yes | Looks good! | |
|--------------------|----------------------------|-------------|-----|--------------------------|----------------------------------|
| | | | res | Looks good! | Click on too bone to enter too |
| | renewable upon | _ | | | Click or tap here to enter text. |
| | expiration? | | No | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | Click or tap here to enter text. |
| | | | | | |
| | | | | | |
| | | | | | |
| Written notice to | Do projects have written | \boxtimes | Yes | Generally, participants | |
| all households | notices for all households | | res | should be given at least | |
| terminated from | terminated from the | | | _ | |
| | | | No | 30 days to vacate | |
| projects during | project? | | | housing after | |
| the operating year | | | | termination | |
| | | | | notification unless | |
| | | | | extenuating | |
| | | | | circumstances exist. | Click or tap here to enter text. |
| | | | | The termination letter | click of tap here to enter text. |
| | | | | submitted shows less | |
| | | | | than 30 days. | |
| | | | | | |
| | | | | This letter also | |
| | | | | indicates the reason for | |
| | | | | termination is due to | |
| | | | | moving someone into | Click or tap here to enter text. |
| | | | | the unit without | |
| | | | | authorization. Did the | |
| | | | | program explore the | |
| | | | | possibility of including | |
| | | | | this person on the | |
| | | | | lease? This is allowable | |
| | | | | lease? This is allowable | |

| | | | at the authorization of the landlord. | Click or tap here to enter text. |
|---|---|------------|--|--|
| | Do the reasons for termination from projects meet written standards? | | Lease violation. | Click or tap here to enter text. |
| | | | | Click or tap here to enter text. |
| Client file #1 HMIS 8891 4-member household Intake date (maybe TH program): 08/26/14 Initial lease: October 1, 2014 Subsequent lease: July 9, 2015 | Does the file contain: • Documentation of homelessness with signatures? Documentation is third party? | ☐ Yes ☑ No | Latest verification letter from September 15, 2014 shows them doubled up with family. An earlier verification letter from August 20, 2014, states that participant has been living in his car off and on for 18 months and has a signature but does not indicate who he is to the participant. | Click or tap here to enter text. Click or tap here to enter text. |

| Intake shows that | Documentation of | □ Yes | Participant was not | |
|-------------------------------------|-----------------------------------|-------|--|----------------------------------|
| the household | chronic | | chronically homeless. | Click or tap here to enter text. |
| was currently | homelessness with | ⊠ No | | |
| staying with | signatures? | | | |
| friends or family – not eligible at | Documentation is | | | |
| intake | third party? | | | Click or tap here to enter text. |
| Intake | Documentation of | ☐ Yes | The paperwork has a | ener of tap here to enter text. |
| | disabling condition | | signature but does not | |
| | with approved HUD | ⊠ No | indicate from where | |
| | signatory? | | the documentation | |
| | Documentation is | | originated and the | |
| | third party? | | signature does not | Click or tap here to enter text. |
| | | | show credentials. | |
| | | | | |
| | | | Prior to new documentation | |
| | | | requirements so okay! | |
| | | | requirements 30 okay: | |
| | Case plan with | □ Yes | No case plan was | Click or tap here to enter text. |
| | written goals signed | | included in the client | |
| | by both case | ⊠ No | file. | |
| | manager and | | | |
| | participant? | | | |
| | | | | - |
| | Progress notes? | □ Yes | The client file lists the | |
| | | N N - | interactions with the participant but does | |
| | | ⊠ No | not detail what | |
| | | | specifically has been | Click or tap here to enter text. |
| | | | worked on. | 33.6 |

| T | | T | | |
|---|---------------|-----|----------------------------|--|
| HQS inspection form | ' | Yes | No HQS inspections | |
| on each unit paid | | | were included in the | |
| through the grant? | \boxtimes | No | client file – initial, new | |
| | | | rental or any annual | |
| | | | assessments. | |
| | | | | |
| Lead-based paint | \boxtimes ' | Yes | Looks good! The | |
| inspection or | | | paperwork is marked | |
| acknowledgement | | No | 07/16/16 which is after | |
| that it is not needed? | | | the initial lease term. | |
| | | | This paperwork should | |
| | | | have been done at | |
| | | | initial inspection. | |
| | | | | |
| Rent reasonableness | | Yes | Rent reasonableness | |
| documentation? | | | paperwork not | |
| | \boxtimes | No | included for the initial | |
| | | | lease. There is rent | |
| | | | reasonableness | |
| | | | paperwork for the | |
| | | | second lease, but it | |
| | | | does not include a date | |
| | | | of when it was | |
| | | | completed. | |
| | | | | |
| Copy of lease or | | Yes | Initial Lease: Is not | |
| sublease with first | | | completely filled out. | |
| period of lease for 1 | | No | | |
| year? | | | Is P.17 the sublease | |
| | | | with the participant? If | |
| | | | this is the sublease, it | |
| | | | does not show the | |
| | | | length of term and has | |
| | | | several issues with | |

| | Lease or sublease meeting FMR for the designated geographic area? http://bit.ly/2qgjWEV | | requirements not found in leases of people not in a supportive housing program or disabled: #4, #25ish (do they pay another deposit to RCHH?). Many of these things don't seem to apply to the lease that has been provided. Unknown FY14 FMR = \$504 1-BR; \$637 2-BR; \$793 3-BR The lease does not show the amount of the lease — handwritten on side of lease \$450/month FY15 FMR = \$500 1-BR; \$632 2-BR; \$787 3-BR The lease shows \$550/month but does not indicate the size of the unit. Unit is 3-BR per rent reasonableness paperwork. Meets FMR. | |
|--|---|--|--|--|
|--|---|--|--|--|

| | Rent calculation/utility allowance documentation with attached pay stubs and income verification that meets HUD standards? | □ Yes ⊠ No | Program used correct income calculation, but no income documentation is present in the file. The file includes the utility calculations but does not include where the numbers entered come from. Both utility calculations have dates after the date of the lease start date. | |
|--|--|------------|---|--|
| | Annual recertification paperwork, showing changes in income and client rent payment expectations? | □ Yes ⊠ No | No annual recertification paperwork was included in the client file. | |
| Client File #2 HMIS 391794 Intake date: September 10, 2014 | Does the file contain: Documentation of homelessness with signatures? Documentation is third party? | | Letter stating that household was living in condemned house dated 09/03/14. Signed but the letter does not indicate who the person is to the household members | Click or tap here to enter text. Click or tap here to enter text. |
| Lease signed: 09/01/2016 | | | and how she observed the living environment. | |

| T | T | | | Т | | |
|---|---|----------------------|-------------|-----|---------------------------|----------------------------------|
| | • | Documentation of | | Yes | Not chronically | |
| | | chronic | | | homeless | |
| | | homelessness with | \boxtimes | No | | |
| | | signatures? | | | | Click or tap here to enter text. |
| | | Documentation is | | | | |
| | | third party? | | | | |
| | | | | | | |
| | • | Documentation of | \boxtimes | Yes | Looks good! | |
| | | disabling condition | | | | |
| | | with approved HUD | | No | | |
| | | signatory? | | | | Click or tap here to enter text. |
| | | Documentation is | | | | |
| | | third party? | | | | |
| | | | | | | |
| | • | Case plan with | | Yes | No case plan included | |
| | | written goals signed | | | • | |
| | | by both case | \boxtimes | No | | |
| | | manager and | | | | Click or tap here to enter text. |
| | | participant? | | | | |
| | | • | | | | |
| | • | Progress notes? | | Yes | The client file lists the | |
| | | J | | | interactions with the | |
| | | | \boxtimes | No | participant but does | Click or tap here to enter text. |
| | | | | | not detail what | |
| | | | | | specifically has been | |
| | | | | | worked on. | |
| | | | | | | |
| | • | HQS inspection form | | Yes | No inspection included | |
| | | on each unit paid | | | for the initial leased | Click or tap here to enter text. |
| | | through the grant? | \boxtimes | No | unit or for subsequent | |
| | | O O | لات | | annual recertifications. | |
| | | | | | | |
| | | | | | Inspection conducted | |
| | | | | | on 09/01/16 – after the | |
| | | | l | | 3.1 33/01/10 arter the | |

| | | lease was signed on 08/31/16; does not show year constructed for lead-based paint; 2 nd inspection in the file marked as completed on 08/31/16 for same property; does not show year constructed | Click or tap here to enter text. Click or tap here to enter text. |
|---|------------|---|--|
| Lead-based paint inspection or acknowledgement that it is not needed? | ☐ Yes ⊠ No | Lead-based paint acknowledgement not included | Click or tap here to enter text. |
| Rent reasonableness documentation? | ☐ Yes ⊠ No | Signed but not dated for the initial unit; rent reasonableness not included in lease of second unit. | Click or tap here to enter text. |
| Copy of lease or sublease with first period of lease for 1 year? | ☐ Yes ⊠ No | Leases signed: 11/18/14; for one month; renews on month to month basis; \$525/mo. 08/31/2016: only for 3 months - \$650.00/mo.; does become month to month upon expiration; 3-BR | Click or tap here to enter text. |

| | | Client file does not show subleases with the participant. |
|--|-------------|--|
| Lease or sublease meeting FMR for the designated geographic area? http://bit.ly/2qgjWEV | ☐ Yes ☑ No | FY14 FMR = \$504 1-BR; \$637 2-BR; \$793 3-BR Inspection form shows 3-BR; rent reasonableness form shows \$650 plus \$225 utility allowance for 3- BR; in 2014 this would have been over FMR but do not know for which year this was completed; Unknown on the second unit because utility allowance was not included |
| Rent calculation/utility allowance documentation with attached pay stubs and income verification that meets HUD standards? | ☐ Yes ☑ No | Income calculation is not dated and does not include any documentation of no income Utility allowance form from 11/18/14 included but does not |

| | | | | show from where numbers entered; utility allowance form was not completed on the second unit. | |
|-------------------------------|-------------------|--|---------------|---|----------------------------------|
| | | Annual recertification paperwork, showing changes in income and client rent payment expectations? | ☐ Yes ☑ No | No annual recertification paperwork was included in the file. | |
| Ineligible Households List | Written Standards | Does each household deemed ineligible for projects! have a valid reason for ineligibility per the written standards? | ☐ Yes ☐ No | NA | Click or tap here to enter text. |
| Grant Information Form | Compliance | Has the agency answered all questions sufficiently and accurately? | ⊠ Yes □ No | NA | Click or tap here to enter text. |
| | | Do projects have equal to or more assisted units than the number proposed in the application? | ⊠ Yes □ No | Looks good! | Click or tap here to enter text. |
| | | Does the agency's board have a currently or formerly homeless individual as a member? | | Looks good! | Click or tap here to enter text. |

| | | Do projects fully participate in coordinated assessment? | Yes No | Looks good! | Click or tap here to enter text. |
|---------------------------------------|----------|---|-----------------------------|---|--|
| | | Do projects offer services consistent with permanent supportive housing programs? | Yes | All services described are consistent with those needed in PSH. However, the description does not include information on housing location services, tenancy supports, development of case plans, ways the program evaluates households. | Click or tap here to enter text. Click or tap here to enter text. |
| | | | | Concerned that interaction with households is limited to once per month and not based on needs of the household. | |
| | | Did the agency provide an independent financial audit without findings? | Yes No N/A (no audit) | Ask if the agency does not complete an independent financial audit each year. | |
| eLOCCS Grant Summary Screenshot | Spending | Does each project that has been operating for a least one year spent a | Yes No | List projects by number that did not spend 90% of budgeted funding: | Click or tap here to enter text. |

| eLOCCS Voucher List | | minimum 90% of the budgeted funding? Does the agency draw from its grants at least quarterly? | Yes No | PSH project spent 98% of grant funding. Underspent HMIS line item, leaving \$3,121 of \$5,807. Click or tap here to enter text. Click or tap here to enter text. | |
|------------------------|----------|--|-----------|--|----------------------------------|
| | | | | Click or tap here to enter text. | |
| Matching documentation | Spending | Did each project have the required in-kind or cash match (25% of 100%)? | Yes No | List projects by number that did have 25% match: PSH grant Click or tap here to enter text. | Click or tap here to enter text. |
| | | Does the match documentation show expenses eligible for HUD CoC PSH programs? | Yes No | List projects that had ineligible expenses: General ledger looks good, but need to ensure that can document all match items in the file | Click or tap here to enter text. |

| | | Is documentation sufficient for HUD documentation of matching funds? | Yes No | Click or tap here to enter text. Click or tap here to enter text. List projects that has insufficient documentation: See above. Only general ledger information given. Grantee should ensure that all expenses can be documented in the financial file. Click or tap here to enter text. Click or tap here to enter text. | Click or tap here to enter text. |
|---------------------------------|-------------------|--|-----------|---|----------------------------------|
| Written Goals and Objectives | Written Standards | Do goals and objectives make sense for a PSH program? | Yes No | These are good. However, staff recommend that you prioritize a few of these goals and set quantifiable goals (i.e. will increase income for XX% of households annually). | Click or tap here to enter text. |
| HMIS Report 0640 | Written Standards | Do Q2-Q5 show 10% or less errors? | Yes No | Relationship to HoH: 11.32% | Click or tap here to enter text. |

| | | Income and Sources at Annual Assessment: 86.96% | |
|--|--|---|--|
| | | CH information: 12.5% | |



North Carolina Balance of State Continuum of Care

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2024 Scorecard for CoC Program 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 NC BoS CoC prioritizes projects that serve households with severe needs and vulnerabilities, including households experiencing chronic homelessness.

This scorecard has four goals:

- 1. Fund organizations that have the capacity to run effective projects (can manage and administer the project, can operate on a reimbursement basis, and 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 needs, as outlined by the funding priorities document approved by the NC BoS CoC Steering Committee.
- Incentivize agencies to be good partners, participating in community efforts to end homelessness, using HMIS or comparable database for Victim Service Providers (VSP), and 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 funding and performing to NC BoS CoC standards, including descriptions in NC BoS CoC 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 the agency's capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), maintain high data quality, and avoid jeopardizing overall agency stability or future funding for the NC BoS CoC.

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

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



| Project Quality Requirements | | |
|---|-------------------------------|--|
| New projects must receive at least the standard and minimum score in each section. Standards and funding priorities will be used in the ranking process. If a standard or minimum is not met, further review will be triggered. After further review, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in the final NC BoS CoC application or will be | Maximum Score Possible: | |
| recommended to 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. | Project Score: | |

Maximum Points Chart

| | | _ | | _ |
|---------|-----------|-----------------------|-----------------------|---------------------------|
| Project | Maximum | Maximum Points | Maximum Points | Maximum Points for |
| Type | Points | for Objective | for System | Severe Barriers (SB) |
| | Available | Criteria (OC) | Performance (SP) | |
| PSH | 177 | 77 | 55 | 5 |
| RRH | 168 | 83 | 40 | 5 |
| TH-RRH | 168 | 62 | 40 | 5 |
| SSO-CE | 103 | 62 | 0 | 5 |

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.

| Sec | tion I: General Application | Section I Score |
|-------|---|---|
| | ble Points: PSH, RRH, TH-RRH: 9 SSO-CE: 3 num Points Required or Review is Triggered: PSH, RRH, TH-RRH: 5 SSO-CE: 2 | |
| Consi | stency with Mission and Experience | |
| | The project fits within the mission of the agency. The applicant currently serves households experiencing homelessness. [New Project Thresholds and Standards Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |
| | The applicant describes prior experience serving persons experiencing homelessness that has prepared the agency for administering this grant. [New Project Thresholds and Standards Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |



| Accui | cacy and Completeness of Responses | Possible Score | Project Score |
|-------|--|----------------|---------------------|
| 1.2a | The project description addresses all parts of the detailed instructions. [Proj. App: 3B, Q1 Project Application Detailed Instructions] Reviewer Notes: | 3 | |
| 1.2b | PSH, RRH, TH-RRH only: Answers regarding assistance to help participants obtain and remain in PH address all parts of the detailed instructions. [Proj. App: 4A, Q1 Project Application Detailed Instructions] Reviewer Notes: | 3 | |
| 1.2c | PSH, RRH, TH-RRH only : Answers regarding coordination & integration with other mainstream services & employment programs address all parts of the detailed instructions. [Proj. App: 4A, Q2 Project Application Detailed Instructions] Reviewer Notes: | 3 | |
| Sec | tion II: Project Design | Section II | Score |
| Possi | ble Points: PSH, RRH, TH-RRH: 15 SSO-CE: 30 mum Points Required or Review is Triggered: PSH, RRH, TH-RRH: 8 SSO-CE: 16 | | |
| Comr | munity Need Statement | | |
| 2.1 | New CoC Program applicants must demonstrate that their projects are meeting an existing need in their community. Applicants must describe: • What community need the new project will address, including local data (PIT Count, coordinated entry data, waiting lists, etc.) that demonstrates the need. • How the community has used other resources to address this need. [New Project Thresholds and Standards Form] Reviewer Notes: | ☐ Met ☐ Unmet | tation not provided |
| 2.1a | SSO-CE Only: The CE process funded in part by this grant will cover the CoC's entire geographic area whether by the applicant or subgrantees. [Proj. App. Sec. 3B, Q4A] Reviewer Notes: | Thresho | old |

| | sso-ce Only: The advertisement strategy ensures the CE process reaches survivors of interpersonal violence with the highest barriers to access. [Proj. App. Sec. 3B, Q4C] Reviewer Notes: sso-ce Only: The CE project indicates that it will use the existing NC BoS CoC CE system in each region. [Proj. App. Sec. 3B, Q4E] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Threshold Met Unmet | |
|------|---|---|--|
| | | ☐ Unmet, documentation not provided☐ N/A | |
| 2.1d | SSO-CE Only: The budget maximizes funding for assessment of service needs, case management, and outreach services that increases access for DV survivors (assessment of service needs + CM + outreach / total budgeted amount). [Proj. App. Sec. 6] Reviewer Notes: | | |
| | Less than 50% | 0 | |
| | 50-84% | 5 | |
| | 85-100% | 15 | |
| | SSO-CE Only : The project maximizes the use of cash match versus in-kind match (cash match total / total match amount). [<i>Proj. App. Sec. 6</i>] | , | |
| | Reviewer Notes: | | |
| | Less than 25% | 0 | |
| | 25-74% | 5 | |
| | 75-100% | 10 | |
| 2.1f | TH-RRH only: The TH portion of the project is bridge housing (at least monthly offers of PH placement, housing-focused services). [New Project Thresholds and Standards Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A | |
| | | | |

| 2.2a (SB) | TH-RRH only: The program adequately demonstrates that both TH and RRH are available to all participants when needed or desired. [Proj. App. Sec. 3B, Q1, Proj. App. Sec. 6] Reviewer Notes: The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, such as people experiencing chronic homelessness, Veterans experiencing homelessness, survivors of interpersonal violence, and youth experiencing homelessness. | Met Unmet Unmet, documenta N/A | |
|--------------|---|-----------------------------------|--------------------|
| | This project targets one of the subpopulations below. And, it describes additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs. This project targets: People experiencing chronic homelessness People who identify as LGBTQ People with histories of institutionalization, incarceration, or being in foster care Veterans Survivors of interpersonal violence Unaccompanied or parenting youth 18-24 | | |
| | [Project policies and procedures; P&Ps Page Reference Form] Reviewer Notes: | | |
| | | 0 points | |
| | No specific targeting Targeted project | 5 points | |
| 2.2b | PSH Only: Rental assistance projects are preferred to leasing | Stand | ard |
| | projects because 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 tenant-based rental assistance program. [Written statement for leasing application] Reviewer Notes: | | ation not provided |



| 2.2c | TH-RRH and RRH: 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 project with other funding sources that adheres to the RRH program standards. (Exceptions may be made for Public Housing Authorities - PHAs are not eligible to apply for ESG funds but are eligible for CoC Program funding. [New Project Thresholds and Standards Form] Reviewer Notes: | Thresh Met Unmet Unmet, document N/A | ation not provided |
|-------------|--|--|--------------------|
| PSH, | RRH, TH-RRH Only: Services Resource Leverage Plan | | |
| 2.3 (OC) | CoC-funded projects 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. This project leverages services funding for its clients and has a plan in place to increase the amount of its budget dedicated to housing assistance. To receive full points, the project should demonstrate: It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a dedicated funding stream to provide some services specifically for project participants that are funded by another source besides CoC Program funds. [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] Services provided by other funding sources exceed the required 25% match by at least 15%. | | |
| | [Submit MOU/match letter] Reviewer Note: | | |
| | Project does not meet either criterion below. | 0 points | |
| | Project documents leverage between 5-14% above match. | 5 points | |
| | Project documents leverage at 15% or above match. | 10 points | |
| Hous | ing First | | |
| 2.4 (SB) | This project uses a Housing First approach. Must meet all statements below to meet the threshold. Project 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. The project does not screen out for: | Thresh Met (ALL met) Unmet (1 or more | |
| | Having too little or no income | | |

| | | | _ |
|-----------------------------|---|--|---|
| | 2) Active or history of substance use | | |
| | 3) Having a criminal record (with exceptions for | | |
| | state- mandated restrictions) | | |
| | 4) History of domestic violence (e.g., lack of | | |
| | protective order, or separation from abuser, | | |
| | or law enforcement involvement) | | |
| | The project ensures that participants are not terminated from the program for the following reasons: | | |
| | 1) Failure to participate in supportive services | | |
| | 2) Failure to make progress on a service plan | | |
| | 3) Loss of income or failure to improve income | | |
| | 4) Domestic violence | | |
| | 5) Any other activity not covered in a lease | | |
| | agreement typically found in the project's | | |
| | geographic area | | |
| | 6) Failure to maintain recovery | | |
| | [Project policies and procedures, sample lease, P&Ps Page | | |
| | Reference Form] | | |
| | Reviewer Notes: | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | Projects Only: Key Elements of Permanent Supportive Housing | | |
| PSH p | projects should meet these 9 standards set forth by <u>SAMHSA</u> , howeve | | |
| PSH p outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , howevened in the Project Policies & Procedures in order to meet the standard | | |
| PSH p outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , howevened in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that | | |
| PSH p outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , howevened in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have | Standard | |
| PSH p outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , however, and in the Project Policies & Procedures in order to meet the standard 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. | d | |
| PSH p outlir | projects should meet these 9 standards set forth by SAMHSA, however the standard in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] | Standard | |
| PSH p outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , however, and in the Project Policies & Procedures in order to meet the standard 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. | Standard Met Unmet | |
| PSH p outlir | projects should meet these 9 standards set forth by SAMHSA, however the standard in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] | Standard Met Unmet Unmet, documentation not provided | |
| PSH p outlir | projects should meet these 9 standards set forth by SAMHSA, however the standard in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] | Standard Met Unmet | |
| PSH p outlir | projects should meet these 9 standards set forth by SAMHSA, however, and in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however, and in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be | Standard Met Unmet Unmet, documentation not provided N/A | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] | Standard Met Unmet Unmet, documentation not provided N/A Standard | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however, and in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. | Standard Met Unmet Unmet, documentation not provided N/A Standard Met | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] | Standard Met Unmet Unmet, documentation not provided N/A Standard Met | |
| PSH poutlir 2.5a | projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet Unmet | |
| PSH poutlir 2.5a 2.5b | projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet | |
| PSH poutlir 2.5a | Projects should meet these 9 standards set forth by SAMHSA, however the din the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet Unmet | |
| PSH poutlir 2.5a 2.5b | Projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet Standard N/A Standard N/A Standard | |
| PSH poutlir 2.5a 2.5b | Projects should meet these 9 standards set forth by SAMHSA, however the din the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet N/A | |
| PSH poutlir 2.5a 2.5b | Projects should meet these 9 standards set forth by SAMHSA, however need in the Project Policies & Procedures in order to meet the standard Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet Standard N/A Standard N/A Standard | |



| | Reviewer Notes: | ☐ Unmet, documentation not provided☐ N/A |
|------|--|--|
| 2.5d | Housing is not time-limited, and the lease is renewable at tenants' and owners' option. | Standard Met |
| | [Project policies and procedures, P&Ps Page Reference Form, sample lease] | Unmet |
| | Reviewer Notes: | Unmet, documentation not provided |
| | | □ N/A |
| 2.5e | Tenants have choices in the support services that they receive. | Standard |
| | 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. | ☐ Met |
| | [Project policies and procedures, P&Ps Page Reference Form] | Unmet |
| | Reviewer Notes: | Unmet, documentation not provided |
| | | □ N/A |
| 2.5f | As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. | Standard |
| | [Project policies and procedures, P&Ps Page Reference Form] | ☐ Met |
| | Reviewer Notes: | Unmet |
| | | Unmet, documentation not provided |
| 2.5- | Defense and single single second second be a single described about | □ N/A |
| 2.5g | Before moving into permanent housing, tenants are asked about their housing preferences and are offered the same range of choices as are available to others at their income level in the same | Standard Met |
| | housing market. [Project policies and procedures, P&Ps Page Reference Form] | Unmet |
| | Reviewer Notes: | Unmet, documentation not provided |
| 2.51 | | □ N/A |
| 2.5h | Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and | Standard Met Unmet |
| | get along with neighbors. [Project policies and procedures, P&Ps Page Reference Form] | Unmet, documentation not provided |

| 2.5i | The provision of housing and the provision of support services are | Standard |
|-------|---|-----------------------------------|
| | distinct. (Note: This means that if a person is evicted from a unit, | ☐ Met |
| | they can continue receiving services and be rehoused. Or, if the | |
| | tenant refuses services or the service provider terminates services, | Unmet |
| | the tenant can remain in housing). | |
| | [Project policies and procedures, P&Ps Page Reference Form] | Unmet, documentation not provided |
| | Reviewer Notes: | |
| | | □ N/A |
| | | |
| | H-RRH and RRH Programs Only: Rapid Rehousing Performance Benc | |
| - | Rehousing projects should encompass the following program standa | · |
| | omelessness, the U.S. Department of Veteran Affairs (VA), the U.S. D | · |
| Devel | opment (HUD), U.S. Interagency Council on Homelessness (USICH), a | nd Abt Associates |
| 2.6a | Core Program Standard: Housing Identification | |
| 2.6a1 | The program designates staff whose responsibility is to identify and | Chandand |
| | recruit landlords and encourage them to rent to homeless | Standard |
| | households served by the program. Staff have the knowledge, skills, | Met |
| | and agency resources to understand landlords' perspectives, | Unmet |
| | understand landlord and tenant rights and responsibilities, and | onniet |
| | negotiate landlord supports. A program may have dedicated staff | Unmet, documentation not provided |
| | for whom this is the primary responsibility. If a program does not | |
| | have a dedicated staff person(s) who performs this function, case | □ N/A |
| | 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. | |
| | [Project policies and procedures, P&Ps Page Reference Form] | |
| | Reviewer Notes: | |
| | | |
| 2.6a2 | The program has written policies and procedures for landlord | Chandand |
| | recruitment activities, including screening out potential landlord | Standard |
| | partners who have a history of poor compliance with their legal | Met |
| | responsibilities and fair housing practices. | Unmet |
| | [Project policies and procedures, P&Ps Page Reference Form] | onniet |
| | Reviewer Notes: | Unmet, documentation not provided |
| | neviewer rotes. | |
| | | □ N/A |
| 2.6a3 | The program offers a standard, basic level of support to all | Standard |
| | landlords who lease to program participants. This support is | Met |
| | detailed in a written policy distributed to landlords. Program can | |
| | negotiate additional supports, as needed, on a case-by-case basis. | Unmet |
| | [Project policies and procedures, P&Ps Page Reference Form] | _ |
| | Reviewer Notes: | Unmet, documentation not provided |
| | | _ |
| | | □ N/A |



| | The program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. | Standard Met |
|-------|---|---|
| | [Project policies and procedures, P&Ps Page Reference Form] | Unmet |
| | Reviewer Notes: | Unmet, documentation not provided |
| | | □ N/A |
| 2.6b | Core Program Standard: Rent and Move-In Assistance | |
| 2.6b2 | Program staff are trained on regulatory requirements of all Rapid Rehousing 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. The program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: The program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. (Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied endpoint. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.) [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet, documentation not provided N/A |
| | 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 rehousing assistance is used as a bridge to permanent subsidy or permanent supportive housing placement. [Project policies and procedures, P&P Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |

| 2.6c | Core Program Standard: Rapid Rehousing Case Management and Services | |
|---------------|---|--|
| 2.6c1 | Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager). [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 2.6c2 | When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. (Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan). [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |
| 2.6c3 | The program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |
| 2.6c4 | The 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 or program 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. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 2.6d 2.6d1 | Core Program Standard: Program Philosophy and Design Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid rehousing. The program has a routine way of onboarding new staff that includes training on Housing First and rapid rehousing principles. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | Standard Met Unmet Unmet N/A |



| | that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other | Met Unmet Unmet, documentat N/A Standa | ion not provided |
|---|---|--|--------------------|
| | criteria designed to "predict" long-term housing stability other than a willingness to engage in the program and work on a self-directed housing plan. [Project policies and procedures, P&Ps Page Reference Form] Reviewer Notes: | ☐ Unmet ☐ Unmet, documentat ☐ N/A | tion not provided |
| 2.6d4 | Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [Project policies and procedures, P&Ps Page Reference Form, Sample Lease] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A | |
| | Reviewer Notes. | □ N/A | |
| Sect | ion III: Scope of Services | Section III S | core |
| Possib | cion III: Scope of Services le Points: PSH, RRH, TH-RRH: 16 SSO-CE: 6 | | core |
| Possib Minim | ion III: Scope of Services | | core |
| Possib Minim RRH: 9 | ion III: Scope of Services le Points: PSH, RRH, TH-RRH: 16 SSO-CE: 6 um Points Required or Review is Triggered: PSH, RRH, TH- | | COTE Project Score |
| Possib Minim RRH: 9 Service 3.1 | ion III: Scope of Services le Points: PSH, RRH, TH-RRH: 16 SSO-CE: 6 um Points Required or Review is Triggered: PSH, RRH, TH- SSO-CE: 4 | Section III S | |
| Possib Minim RRH: 9 Service 3.1 | cion III: Scope of Services le Points: PSH, RRH, TH-RRH: 16 SSO-CE: 6 rum Points Required or Review is Triggered: PSH, RRH, TH- SSO-CE: 4 e Needs The applicant demonstrates they will meet the anticipated individual service needs of participant households. Services ensure households will be able to find and maintain permanent housing. [PSH, RRH, TH-RRH Proj. App: 4A Question 2; SSO-CE Proj. App: 3B, Q4E] | Section III S Possible Score | |



| Access | to Mainstream Benefits (PSH, RRH, TH-RRH only) | Possible Score | Project Score |
|-------------|---|---------------------|---------------|
| 3.3 | The project demonstrates an adequate plan to help participants access mainstream benefits such as unemployment benefits, TANF, food stamps/SNAP, and Medicaid. [Proj. App: 4A Question 2] Reviewer Notes: | 5 | |
| Sec | tion IV: Equity | Section IV Score | 9 |
| | le Points: 33 ium Points Required or Review is Triggered: 16 | | |
| 4.1 (OC) | The applicant provides guidelines/program rules in other languages besides English. [Guidelines/Project Rules in another language] Reviewer Notes: | 5 | |
| 4.2 (OC) | The applicant has client-facing bilingual staff. [New Project Thresholds and Standards Form] Reviewer Notes: | 5 | |
| 4.3 | The applicant has an arrangement for professional/trained interpretation services. In-person or remote interpretation from trained providers are both applicable. Staff can be considered interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [New Project Thresholds and Standards Form; Contract for Services] Reviewer Notes: | Standar Met Unmet | d |
| 4.4 | The applicant has an Anti-discrimination Policy in full compliance with the NC BoS CoC, which includes: Equal Access Policy and Procedures Family Separation Policy, as appropriate Faith-Based Inclusion Policy Grievance and Anti-Retaliation Policy and Procedures [Anti-Discrimination P&P P&Ps Page Reference Form; New Project Thresholds and Standards Form] Reviewer Notes: | Standar Met Unmet | r d |
| 4.5 | The applicant holds an annual training on its Anti- Discrimination Policy, as required by the CoC's Anti- Discrimination Policy. [New Project Thresholds and Standards Form] Reviewer Notes: | Standa Met Unmet | rd |



| 4.6 (OC) | Project staff engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within the agency. Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training. [New Project Thresholds and Standards Form] Reviewer Notes: | 5 | |
|--------------|---|----------------------|---|
| 4.7 (OC) | The applicant has an equal opportunity hiring clause in job postings. | | |
| (00) | [Example Job Posting] | 2 | |
| | Reviewer Notes: | | |
| 4.8 | Non-profits Only: Individuals who are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of the agency's Board of Directors. [New Project Thresholds and Standards Form] | Standard Met Unmet | |
| | Reviewer Notes: | N/A, not a non-profi | : |
| 4.9 (OC) | Non-profits Only: At least 20% of the applicant's Board of Directors have experienced homelessness. [New Project Thresholds and Standards Form] Reviewer Notes: | | |
| | Less than 20% | 0 | |
| | 20% or Above | 2 | |
| | Not a non-profit | N/A | |
| 4.10 (OC) | At least 20% of the applicant's 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 Thresholds and Standards Form] Reviewer Notes: | | |
| | Less than 10% | 0 | |
| | Between 10 - 19% | 2 | |
| | 20% or Above | 5 | |
| 4.11 | The applicant incorporated the NC BoS CoC Client Bill of Rights in its policies and procedures. [New Project Thresholds and Standards Form; NC BoS CoC Client Bill of Rights P&P] Reviewer Notes: | Standar Met Unmet | d |
| | | | |



| (OC) | At least 80% of project staff attended community events, conferences, or panel conversations in the past 12 months on the topic of racial equity, anti-racism, or indigenous rights. Benchmark at 80% of total project staff. [New Project Thresholds and Standards Form] Reviewer Notes: | | |
|---------------|--|---|--|
| | Below 80% | 0 | |
| | 80% or Above | 3 | |
| | Homeless Service Agencies Only: The applicant's hiring announcements cite lived experience of homelessness as a preferred skill for open positions at all levels in the agency. [New Project Thresholds and Standards Form; Sample hiring announcements showing a range of different levels within the agency] Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 2 | |
| 4.13B (OC) | Agencies Serving Multiple Populations Only: The applicant's hiring announcements cite lived experience of homelessness as a preferred skill for open positions in the project. [New Project Thresholds and Standards Form; Sample hiring announcements] Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 2 | |
| 4.14 (OC) | At least 10% of project staff involved in operating or administering the CoC-eligible activities have experienced homelessness. Benchmark at 10%. [New Project Thresholds and Standards Form] Reviewer Notes: | | |
| | Below 10% | 0 | |
| / 1 F | 10% or Above | 2 | |
| 4.15 (OC) | One or more of the project's managers or director-level staff have personally experienced homelessness in their lifetime. [New Project Thresholds and Standards Form] Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 2 | |



Staff Scoring

The following section is scored by NCCEH staff using standardized scoring methods to ensure fairness.

| Priori | ty | | |
|----------|--|--|-----------------|
| Priority | What priority is this project in its region? [Priority 1, 2, 3, or no priority, based on the FY2024 CoC Funding Priorities document] | 1 no p | 2 3 priority |
| Sect | ion V: Organizational Capacity | Section V Sco | re |
| | le Points: 16 um Points Required or Review is Triggered: 9 | | |
| Compl | eted Similar Projects | Possible Score | Project Score |
| 5.1 | The applicant or subrecipients successfully implemented this same type of project (Permanent Supportive Housing, Rapid Rehousing/SSO-CE). [Proj. App: 2B; New Project Thresholds and Standards Form] Reviewer Notes: | 4 | |
| 5.2 | The applicant or subrecipients successfully implemented a different HUD-funded project (ESG, Section 8, HPRP, etc.) or a CoC-funded project of a different type. [Proj. App: 2B; New Project Thresholds and Standards Form] Reviewer Notes: | 2 | |
| Agenc | y Stability | | <u> </u> |
| 5.3 | Non-profits Only: The applicant has been in operation for at least three years. [Applicant Profile; non-profit documentation] Reviewer Notes: | Threshold Met Unmet Unmet, documentation not provided | |
| 5.4 | Non-profits Only: The applicant submitted financial statements and a copy of their budget from the most recent two fiscal years. (Financial statements will be used to assess the fiscal stability of the applicant agency. Financial statements that demonstrate instability may result in the program not meeting the threshold). [Budget vs. actual profit and loss statement for the last two fiscal years; agency detailed budget] Reviewer Notes: | Thres | hold |



| 5.5 | Non-profits only: The applicant has the financial capacity to operate this program on a reimbursement basis. | Thresho | old |
|------|---|-------------------|------------------|
| | [Agency detailed balance sheet] | Unmet | |
| | Reviewer Notes: | Unmet, documentat | ion not provided |
| | | □ N/A | |
| 5.6 | Non-profits Only: The applicant submitted a list of their board of directors and a copy of the minutes from their three most recent | Thresho | old |
| | board meetings. The applicant has an active and engaged board of | ∐ Met | |
| | directors. | Unmet | |
| | [Board list and minutes] | Unmet, documentat | ion not provided |
| | Reviewer Notes (if unmet or documentation not provided, note | | |
| | why): | □ N/A | |
| | | | |
| Capa | city to Provide Needed Services | | |
| 5.7 | The applicant has the capacity to provide the services that are | Standard | |
| | needed. a) The services described seem adequate and appropriate. | ∐ Met | |
| | b) The staffing pattern or subcontract plan is adequate and appropriate. | Unmet | |
| | c)Project staff have sufficient experience and knowledge to | Unmet, documentat | ion not provided |
| | effectively run the type of project applied for. | □ N/A | |
| | [Proj. App: 2B, 3B and 4A; organizational chart; New Project | .,,,,, | |
| | Thresholds and Standards Form] | | |
| | Reviewer Notes: | | |
| | | | |
| 5.8 | The applicant agency has at least one active SOAR case manager. Dedicated SOAR case manager on staff. | | |
| | [NC SOAR program records] | 2 | |
| | Reviewer Notes: | | |
| F 0 | LIBRIC Destination Associate Only Chaff dell's described 2011 | | |
| 5.9 | HMIS Participating Agencies Only : Staff delivering services will be responsible for recording client data in HMIS. (Dedicated HMIS | | |
| | data entry staff is historically less successful at data management) | 4 | |
| | [New Project Thresholds and Standards Form] | 1 | |
| | Reviewer Notes: | | |
| | | | |



| 5.10 (OC) | HMIS Participating Agencies Only: The applicant has a staff person identified for the HMIS Agency Administrative Role to manage the project's HMIS data. (Note, if the role is the Executive Director's or President's, no points applied. EDs historically do not have the capacity to fill this role.) [New Project Thresholds and Standards Form] Reviewer Notes: | 1 | |
|--------------|--|----------------|---------------|
| Admi | nistrative Capacity | Possible Score | Project Score |
| 5.11 | The administrative staff are separate from the services staff. [Organizational chart: where does the CoC Program grant get executed and what staff is working on it; New Project Form] Reviewer Notes: | 3 | |
| 5.12 | Funding for the administrative staff is stable. There are adequate administrative staff to ensure agency stability throughout project implementation. [New Project Thresholds and Standards Form; Budget vs Actual profit and loss statement] Reviewer Notes: | 3 | |

Section VI: Project Performance Section VI Score Possible Points Added: PSH: 73 RRH & TH-RRH: 64 Possible points subtracted: -5

Minimum Points Required or Review is Triggered: PSH: 37

RRH & TH-RRH: 33 (if section is scored)

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2023, to December 31, 2023, unless otherwise noted. All applicants that currently run an RRH or PSH project, regardless of funding source, will be scored for this section using the CoC-APR report from HMIS or comparable database. For applicants applying for TH-RRH funding and currently running an RRH project, they will be scored for this section using the CoC-APR report from a comparable database for the RRH project.

| Popul | ations Served | Possible Score | Project Score |
|--------------|--|----------------|---------------|
| 6.1a (OC) | RRH Only: At least 40% of the people served by the project had a disability. Benchmark 40%. [Q13a2 divided by total enrolled] Reviewer Notes: | | |
| | Less than 25% | 0 | |
| | 25% - 39% | 5 | |
| | 40% and Above | 10 | |
| | A VSP RRH Projects or not an RRH Project | N/A | |



| 6.1b (OC) | chronically homeless. | | |
|--------------|---|-----|--|
| | [A003 – Chronic Homelessness - Check if participants found non- Chronically Homeless, staff will follow up with grantee to determine CH status] | | |
| | Reviewer Notes: | | |
| | Less than 50% | 0 | |
| | 50-79% | 2 | |
| | 80-100% | 4 | |
| | Not a PSH Project | N/A | |
| 6.1c | PSH & RRH: 100% of project participants entered the project from an eligible situation. | | |
| | [CoC APR Q15 - if participants are found ineligible, staff will follow up with the grantee to determine eligibility] | | |
| | Reviewer Notes: | | |
| | No | -5 | |
| | Yes | 0 | |
| | Not a PSH or RRH project | N/A | |
| | HUD Benchmark 80% [CoC-APR 23a/b] Reviewer Notes: | | |
| | No exits or Less than 70% | 0 | |
| | 70-79% | 5 | |
| | 80% -100% | 15 | |
| | Not an RRH Project | N/A | |
| 6.1e (OC) | PSH & RRH : At least 95% of exits were to a known destination. [CoC-APR 23a/b] | | |
| | Reviewer Notes: | | |
| | 0-94% | 0 | |
| | 95% -100% | 1 | |
| | Not a PSH or RRH Project | N/A | |
| 6.1f (SP) | PSH Only: At least 80% of exits were to a permanent housing destination. Benchmark 80% [CoC-APR 23c.] | | |
| | Reviewer Notes: | | |
| | Below 80% | 0 | |
| | 80% -100% | 15 | |
| | Not a PSH Project | N/A | |



| 6.1g (SP) | PSH & RRH : At least 20% of adults increased earned income. Benchmark 20%. | | |
|--------------|---|--------------------|---------------|
| | [CoC-APR 19a1, 19a2] | | |
| | Reviewer Notes: | | |
| | | | |
| | <10% | 0 | |
| | 10-15% | 3 | |
| | 16-19% | 5 | |
| | 20%-100% | 15 | |
| | Not a PSH or RRH Project | N/A | |
| 6.1h (SP) | PSH Only: At least 35% of adults increased unearned cash income. Benchmark 35%. | | |
| | [CoC-APR 19a1, 19a2] | | |
| | Reviewer Notes: | | |
| | <10% | 0 | |
| | 10 - 34 % | 10 | |
| | 35% and Above | 15 | |
| 6.1i (SP) | PSH or RRH : Less than 20% of people who exited to PH returned to homelessness within 2 years.] Benchmark less than 20%. | | |
| | [0701 SPM Report] | | |
| | Reviewer Notes: | | |
| | 0-19% | 10 | |
| | 20%-100% | 0 | |
| LINNIC | Not a PSH or RRH Project /Comparable Database Participation | N/A Possible Score | Droiget Score |
| 6.2a | All of the applicant's projects that are listed in the 2023 HIC | Possible Score | Project Score |
| (OC) | participate in HMIS or a comparable database if a VSP. | | |
| | [HIC] | | |
| | Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 5 | |
| 6.2b (OC) | The applicant was responsive to the Data Center in Annual Corrections for LSA and/or SPM reports. | | |
| | [The CoC Regional Lead copied on communication to escalate responsiveness. Data Center records.] | | |
| | Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 5 | |



| 6.2c (OC) | Any of the project's HMIS users were inactivated due to lack of login compliance (every 60 days) during CY2023. | | |
|--------------|---|---------------------|--------------------|
| , , | | | |
| | [Data Center records] Reviewer Notes: | | |
| | Neviewei Notes. | | |
| | Yes | 0 | |
| | No | 3 | |
| HUD | Monitoring | | |
| 6.3a | The applicant is free of HUD monitoring findings for any agency | Standard | |
| | projects. If not, findings must be resolved or explained to the | Met | |
| | satisfaction of the Project Review Committee for the application to | | |
| | meet standards. | Unmet Unmet | |
| | [New Project Thresholds and Standards Form] | | |
| | Reviewer Notes: | | |
| | | | |
| 6.3b | Previous Project Spending Rates: These questions are for applicants | Standa | rd |
| | with CoC-funded projects that have been operating for at least one | | |
| | year at the time of the NOFO release. (Percentage rounded to the | Met – Spent at leas | st 90% of funds |
| | nearest whole number). [Scored from APR. If APR is not available, | | |
| | agencies will submit an eLOCCS screenshot of final draw for last | Unmet | |
| | completed year. If agencies are spending less than 90% of funding, | | |
| | they must submit a narrative explaining why the agency is | Unmet, documenta | ation not provided |
| | underspending their grant]. | _ | |
| | Reviewer Notes: | □ N/A | |
| | | | |
| | Amount awarded | | |
| | Amount spent | | |
| | Percentage % | | |
| Sect | cion VII: Agency's Relationship to | | |
| | ımunity | Section VII | Score |
| | le Points: 15 | | |
| | num Points Required or Review is Triggered: 5 | | |
| Partic | pation in Regional Committee Activities | | |
| | llowing participation questions will be scored based on project | | |
| | pation in all Regional Committees within the grant coverage area. | | |
| 7.1 | The applicant participated in at least 75% of meetings in at least | Ct a sa da | |
| | one Regional Committee or, for statewide projects attend at least | Standa | ra |
| | 75% of Steering Committee meetings from July 2023– June 2024. | ∐ Met | |
| | [Regional Lead verification, Steering Committee minutes] | Unmet | |
| | Reviewer Notes: | | |
| | neviewei Notes. | | |
| | | | |
| 7.2 | The program has been presented to the Regional Committee or | Threshol | d |
| | Steering Committee (for statewide projects) | Met | |
| | [Minutes, Regional Lead verification] | Unmet | |
| | Reviewer Notes: | <u> </u> | |
| 1 | | Unmet, document | ation not provided |



| 7.3 (OC) | Staff at the applicant agency, currently or within the past year, serves/served in a regional leadership role(s) or Steering Committee leadership. [Staff Review of Leadership] Reviewer Notes: | 5 | |
|-------------|--|--|-----|
| 7.4 | Applicant agrees to actively participate in the local coordinated entry process as designed by the Regional Committee and only take referrals directly from the regional coordinated entry prioritization by-name list. [New Project Thresholds and Standards Form] Reviewer Notes: | Threshold Met Unmet Unmet, documentation not provided | |
| 7.5 | Applicant accurately describes the process of taking referrals through coordinated entry. [New Project Thresholds and Standards Form] Reviewer Notes: | Standa Met Unmet Unmet, documen | ard |
| 7.6 | All of the applicant's projects on the 2023 HIC participated in the coordinated entry system. Project staff must attend any coordinated entry meetings, including regular case conferencing. Emergency shelters must conduct prevention and diversion screens and CE Assessments on residents and refer all people who have received CE Assessments to the regional coordinated entry prioritization by-name list. RRH, PSH, and TH-RRH Projects must only take referrals directly from the coordinated entry prioritization waiting list. [Interview with region's Coordinated Entry Lead. CE Lead verified minimum of 85% participation in case conferencing.] Reviewer Notes: | Standa Met Unmet N/A – not on the | |
| Curre | nt PSH, RRH Grantees: CE Assessment | | |
| 7.7 (OC) | The project has a CE assessment score for at least 97% of new admissions. [New Project Thresholds and Standards Form] Reviewer Notes: No/N/A | 0 | |
| | Yes | 5 | |



| 7.8 | The project has CE Assessments for all new admissions during the | | |
|-------|--|----------------|---------------|
| (OC) | 2023 calendar year in HMIS and/or a comparable database. | | |
| | [New Project Thresholds and Standards Form] | | |
| | Reviewer Notes: | | |
| | No/N/A | 0 | |
| | Yes | 5 | |
| | tion VIII: Application Deadlines and umentation | Section V | III Score |
| Minim | ole Deductions: -25 num Points Required or Review is Triggered: Not more than loss of | | |
| -15 | | | |
| Budge | t & Match | Possible Score | Project Score |
| 8.1 | Questions regarding the budget are neither complete nor accurate, subtract up to 5 points. | -5 | |
| 8.2 | Match letters sufficiently document the required 25% match and all | Stan | dard |
| | match funds are eligible. Match amounts are based on documentation submitted by the applicant by the submission deadline. Information | ☐ Met | |
| | submitted by the applicant by the sabmission deduline. Information submitted after the deadline will not be included in the scoring of these | Unmet | |
| | sections. | | |
| | [Match letters] | | |
| | Reviewer Notes: | | |
| | | | |
| Deadl | ines | Possible Score | Project Score |
| 8.3 | The application in e-snaps was NOT completed correctly, subtract up | | - |
| | to 10 points. | 10 | |
| | | -10 | |
| | Reviewer Notes: | | |
| 8.4 | Required accompanying documents were NOT completed correctly, | | |
| | subtract up to 10 points. | -10 | |
| | | | |
| | Reviewer Notes: | | |
| 8.5 | The application and accompanying documents were submitted by the | | shold |
| | deadline. | Met | |
| | Reviewer Notes: | Unmet | |



Threshold

☐ Met

☐ Unmet

[NC BoS CoC Grantee Agreement]

Agreement.

Reviewer Notes:

The applicant signed and submitted the NC BoS CoC Grantee

8.6



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

2024 Scorecard for CoC Program 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 NC BoS CoC prioritizes projects that serve households with severe needs and vulnerabilities, including households experiencing 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 a reimbursement basis, and 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 needs, 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 and using HMIS or comparable database for Victim Service Providers (VSP) and 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 funding and performing to NC BoS CoC standards, including descriptions in NC BoS CoC 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 the agency's capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), maintain high data quality, and avoid jeopardizing overall agency stability or future funding in the NC BoS CoC.

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

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



| PROJECT QUALITY REQUIREMENTS | | |
|--|-----------|----------|
| Renewal projects must receive at least the standard and minimum score in each section. | Maximum | |
| Standards and funding priorities will be used in the ranking process. If a standard or | Score | PSH: 198 |
| minimum is not met, further review will be triggered. After further review, the Project | Possible: | RRH: 177 |
| Review Committee will determine potential consequences, including whether the project | | |
| is ineligible for inclusion in the NC BoS CoC's final application or will be recommended | Project | |
| to receive reduced funding. Thresholds must be met for the project to be eligible for | Score: | |
| funding. | | |
| | | |
| | | |

Maximum Points Chart

| Project | Maximum | Maximum Points | Maximum Points | Maximum Points for |
|---------|-----------|-----------------------|------------------|---------------------------|
| Types | Points | for Objective | for System | Severe Barriers (SB) |
| | Available | Criteria (OC) | Performance (SP) | |
| PSH | 198 | 80 | 60 | 10 |
| RRH | 177 | 74 | 50 | 10 |

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.

| Sec | tion I: General Application | Secti | on I Score |
|-------|---|----------------|---------------|
| | ble Points: 9 num Points Required or Review is Triggered: 5 | | |
| Accui | racy and Completeness of Responses | Possible Score | Project Score |
| 1.1 | The project description addresses all parts of the detailed instructions. [Proj. App: 3B, Project Application Detailed Instructions] | 3 | |
| | Reviewer Notes: | | |
| 1.2 | The applicant answered all questions regarding services. | | |
| | [Proj. App: 4A] | 2 | |
| | Reviewer Notes: | | |



| 1.3 | The applicant completed all sections of the overall application adequately (answered all relevant questions; provided detailed answers per the Project Applicant Detailed Instructions; filled out a charts). [Project Application, Project Application Detailed Instructions] Reviewer Notes: | all 4 | |
|-------------|---|-------------------|-------|
| Section | on II: Equity | Section II | Score |
| Minimu | e Points: 35 Im Points Required or Review is Triggered: 18 | | |
| 2.1 (OC) | The applicant provides guidelines/program rules in other languages besides English. [Renewal Applicant Form; Guidelines/Program Rules in another language.] Reviewer Notes: | 5 | |
| 2.2 (OC) | The applicant has client-facing bilingual staff. [Renewal Applicant Form] Reviewer Notes: | 5 | |
| 2.3 | The applicant has an arrangement for professional/trained interpretation services. In-person or remote interpretation from trained providers are both applicable. Staff can be considered interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [Renewal Applicant Form; Contract for Services] Reviewer Notes: | Stand Met Unmet | ard |
| 2.4 | The applicant has an Anti- Discrimination Policy in full compliance with the NC BoS CoC, which includes: Equal Access Policy and Procedures Family Separation Policy, as appropriate Faith-Based Inclusion Policy Grievance and Anti-Retaliation Policy and Procedures [Anti-Discrimination P&P Renewal Applicant Form] Reviewer Notes: | Stand Met Unmet | lard |
| 2.5 | The applicant holds annual training on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy. [Renewal Applicant Form] Reviewer Notes: | Stand Met Unmet | ard |



| 2.6 (OC) | Project staff engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within the agency. Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training. [Renewal Applicant Form] Reviewer Notes: | 5 | |
|--------------|--|--------------------|------|
| 2.7 (OC) | The applicant has an equal opportunity hiring clause in job postings. | 2 | |
| | [Example Job Posting] | | |
| | Reviewer Notes: | | |
| 2.8 | Non-profits Only: Individuals who are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of the | Stan Met | dard |
| | applicant's Board of Directors. | Unmet | |
| | [Renewal Applicant Form] | N/A, not a non-pro | ofit |
| | Reviewer Notes: | N/A, not a non-pro | one. |
| 2.9 (OC) | Non-profits Only: At least 20% of the applicant's Board of Directors have experienced homelessness. [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | Less than 20% | 0 | |
| | 20% or Above | 2 | |
| | Not a non-profit | N/A | |
| 2.10 (OC) | At least 20% of the applicant's managers or director-level positions are Black, Indigenous, or People of Color. Position descriptions must include supervising other staff, payroll, or HR duties. | | |
| | [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | Less than 10% | 0 | |
| | Between 10 – 19% | 2 | |
| | 20% or Above | 5 | |
| 2.11 | The applicant incorporated the NC BoS CoC Client Bill of Rights into its policies and procedures. | Stand | dard |
| | [Renewal Applicant Form; NC BoS CoC Client Bill of Rights P&P] | | |
| | Reviewer Notes: | Unmet | |
| | | | |

| 2.12 | The applicant agency has an internal policy/procedure to solicit | | |
|-------|--|---|---|
| (OC) | informal/formal feedback from current/former clients. | | |
| | [Renewal Applicant Form; P&P on Soliciting Client Feedback] | | |
| | Reviewer Notes: | | |
| | | | |
| | No. | | I |
| | No Yes | 2 | - |
| 2.13 | At least 80% of program staff attended community events, | ۷ | |
| (OC) | conferences, or panel conversations in the past 12 months on | | |
| | the topic of racial equity, anti-racism, or indigenous rights. <i>Please</i> | | |
| | include the percentage of staff that attended. | | |
| | Benchmark at 80% of total program staff. [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | | | |
| | Below 80% | 0 | |
| 2.14A | 80% or Above Homeless Service Agencies Only: The applicant's hiring | 3 | |
| (OC) | announcements cite lived experience of homelessness as a | | |
| () | preferred skill for open positions at all levels in the agency. | | |
| | [Renewal Applicant Form; Hiring Announcement] | | |
| | Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 2 | |
| 2.14B | Agencies Serving Multiple Populations Only: The applicant's | | |
| (OC) | hiring announcements cite lived experience of homelessness as a preferred skill for open positions in the project. | | |
| | [Renewal Applicant Form; Hiring Announcements] | | |
| | Reviewer Notes: | | |
| | | | |
| | | | |
| | No | 0 | |
| | Yes | 2 | |
| 2.15 | At least 10% of project staff involved in operating or | | |
| (OC) | administering the CoC-eligible activities have experienced | | |
| | homelessness. Benchmark at 10%. | | |
| | [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | | | I |
| | Below 10% | 0 | |
| | One or more of the project's managers or director-level staff have | 2 | |
| | one of more of the project's managers of unector-level stall have | | |



| 2.16 | personally experienced homelessness in their lifetime. | | |
|------|--|---|--|
| | [Renewal Applicant Form] | | |
| | Reviewers Notes: | | |
| | | | |
| | No | 0 | |
| | Yes | 2 | |

| Section III: Project Design | Section III Score |
|---|-------------------|
| Possible Points: PSH: 35 RRH: 20 Minimum Points Required to Review is Triggered: PSH: 10 RRH: 8 | |
| PSH and RRH: Services Resource Leverage Plan | |
| 3.1 (OC) CoC-funded projects 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. This project leverages services funding for its clients and it has a plan in place to increase the amount of its budget dedicated to housing assistance. To receive full points, the project should demonstrate: It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a dedicated funding stream to provide some services specifically for project participants that are funded by another source besides CoC Program funds. [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] | |
| Services provided by other funding sources exceed the required 25% match by at least 15%. [Submit MOU/contract] Reviewer Notes: | |
| Project does not meet either criterion below | 0 |
| Project documents leverage between 5-14% above match | |
| Project documents leverage at 15% or above match | |



Staff Scoring

The following sections are scored by NCCEH. Staff use standardized scoring methods to ensure fairness.

| Section III: Project Design Continued | | | Section III Score |
|---------------------------------------|--|---|--|
| Housi | ing First | | |
| 3.2 (SB) | This project uses a Housing First approace statements below to meet the standard. any policies that would result in screening anyone for any of the reasons below, but explicitly include the statements below to the statements below to the project does not screen out for: 1) Having too little or no income 2) Active or history of substance uses 3) Having a criminal record (with example mandated restrictions) 4) History of domestic violence (e.g. or separation from abuser, or law involvement) The program does not terminate people 1) Failure to participate in supportive 2) Failure to make progress on a sere 3) Loss of income or failure to improve 4) Domestic violence 5) Any other activity not covered in typically found in the project's get 6) Failure to maintain recovery [Program policies and procedures, Pre-Content of the project of th | Project should not have gout or terminating policies do not have to meet the standard. Exercises for state- I lack of protective order, enforcement from the program for: The services vice plan ove income a lease agreement ographic area | Standard Met (ALL met) Unmet (1 or more missed) |
| | Projects Only: Key Elements of Permanent | - · · | |
| | projects should meet these 9 standards set ined in the Project Policies & Procedures in | | they do not need to be explicitly |
| 3.3a | Leases or rental agreements do not have a not be found in leases held by someone w disability. | | Standard Met |

Unmet

☐ N/A

Unmet, documentation not provided

[Sample lease]

Reviewer Notes:

| 3.3b | Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
|------|---|--|
| 3.3c | 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 life in the community. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet N/A |
| 3.3d | Housing is not time-limited, and the lease is renewable at tenants' and owners' option. [Program policies and procedures, Pre-Competition Renewal Applicant Form, Sample Lease] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 3.3e | Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 3.3f | As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 3.3g | Before moving into permanent housing, tenants are asked about their housing preferences and are offered the same range of choices as are available to others at their income level in the same housing market. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |



| 3.3h | 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. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
|----------------|---|---|
| 3.3i | The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| Rapid End F | RH Projects Only: Rapid Rehousing Performance Benchmarks and Prog I Rehousing projects should encompass the following program standards Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department (HUD), U.S. Interagency Council on Homelessness (USICH), and | s as defined by the National Alliance to artment of Housing and Urban |
| | Core Program Standard: Housing Identification The 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, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 3.4a2 | The 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, Pre-Competition Renewal Applicant Form] | Standard Met Unmet |



| | who lease to program participants. This support is detailed in a written policy distributed to landlords. The program can negotiate additional supports, as needed, on a case-by- case basis. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
|------|---|--|
| | The program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet N/A |
| 3.4b | Core Program Standard: Rent and Move-In Assistance | |
| | Program staff are trained on regulatory requirements of all Rapid Rehousing 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. The program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet N/A |
| | The program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. (Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied endpoint. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.) [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |

| | 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 rehousing assistance is used as a bridge to permanent subsidy or permanent supportive housing placement. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
|-------|---|--|
| 3.4C | Core Program Standard: Rapid Rehousing Case Management and Services | |
| 3.4c1 | Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| | When case management and service compliance are not mandated by federal or state regulation, services offered by a program have voluntary participation. (Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |
| | The program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [Program policies and procedures, Pre-Competition Renewal Applicant Form] | Standard Met Unmet Unmet, documentation not provided |



| | Reviewer Notes: | □ N/A |
|-------|--|---|
| | The program has clearly defined policies and objectivestandards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs or program changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A |
| 3.4d | Core Program Standard: Program Philosophy and Design | |
| 3.4d2 | Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid rehousing. The program has a routine way of onboarding new staff that includes training on Housing First and rapid rehousing principles. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: The program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided N/A Standard Met Unmet Unmet |
| | Reviewer notes. | |
| | 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 a willingness to engage in the program and work on a self-directed housing plan. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard Met Unmet Unmet, documentation not provided |
| | Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [Program policies and procedures, Pre-Competition Renewal Applicant Form, Sample Lease] | Standard Met Unmet |



| | Reviewer Notes: | Unmet, docum | entation not provided | |
|--|---|---|--|--|
| | | □ N/A | | |
| Perm | anent Supportive Housing: Moving-on Strategy | | | |
| Perma these Movin need gradu | anent supportive housing should be available indefinitely, as long as hou projects can stabilize to the point that they no longer need the intensiveng-on strategies for permanent supportive housing projects create opposithe supportive part of permanent supportive housing to live independer ation for the project. They usually involve transferring the tenant to anong Choice Voucher (Section 8), public housing, or other affordable housing | e services associated rtunities for participa ntly and sustain their ther long-term hous | with the project. ants who no longer homes after | |
| | The permanent supportive housing project incorporates moving-on strategies in its project 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 project policies and procedures should include: Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); A method to prepare tenants to move-on and exit planning procedures; A method to link moving-on tenants to mainstream services and supports; Procedures to provide step-down services after exit; and A strategy to evaluate the effectiveness of moving-on strategies. [Project policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | | | |
| | Project meets none of the above bulleted points | 0 | | |
| | Project meets 1-3 of the above bulleted points | 5 | | |
| | Project meets 4-5 of the above bulleted points | 10 | | |
| | Project meets all 6 bulleted points above | 15 | | |
| (SB) | The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, such as people experiencing homelessness, survivors of interpersonal violence, and youth experiencing homelessness. This project targets one of the subpopulations below. And it describes additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs. This project targets: | | | |
| | People experiencing chronic homelessness People who identify as LGBTQ | | | |



| 3) | People with histories of institutionalization, incarceration, or being |
|----|--|
| | in foster care |

- 4) Veterans
- 5) Survivors of interpersonal violence
- 6) Unaccompanied or parenting youth 18-24

[Program policies and procedures, Pre-Competition Renewal Applicant Form]

Reviewer Notes:

| | Possible Score | Project Score |
|---|-------------------|---------------|
| Full points for detailed plan to engage and serve specific needs of | | |
| identified population(s). Partial points available for | 10 | |
| less detailed plans. | | |

Section IV: Project Performance

Section IV Score

Possible Points Added: PSH: 104 RRH: 98

Minimum Points Required or Review is Triggered: PSH: 52 RRH: 49

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2023 to December 31, 2023, unless otherwise noted.

| Popu | lations Served | Possible score | Project Score |
|--------------|---|----------------|---------------|
| 4.1a (OC) | RRH Only (Excluding DV): At least 40% of the people served by the project had a disability. Benchmark 40% | | |
| | [Q13a2 divided by total enrolled] | | |
| | Reviewer Notes: | | |
| | Less than 25% | 0 | |
| | 25%-39% | 5 | |
| | 40% or Above | 15 | |
| | A VSP RRH Project or not an RRH Program | N/A | |
| 4.1b (OC) | PSH Only: 100% of new household admissions during the 2023 calendar year were experiencing chronic homelessness. [Custom HMIS Report] Reviewer Notes: | | |
| | Less than 100% | 0 | |
| | 100% | 11 | - |
| | Not a PSH Project | N/A | - |
| 4.1c (OC) | PSH Only: At least 80% of households served by the project were experiencing chronic homelessness. | | |
| | [A003 – Chronic Homelessness – check if participants found non- Chronically Homeless, staff will follow up with grantee to determine CH status.] | | |



| | Reviewer Notes: | | |
|-------|--|-----------|---|
| | | | |
| | Less than 50% | 0 | |
| | 50-79% | 5 | |
| | 80-100% | 10 | |
| | Not a PSH Program | N/A | |
| 4.1d | RRH Only: At least 80% of exits were to a permanent housing | , | ı |
| (SP) | destination. | | |
| , | HUD Benchmark 80%. | | |
| | | | |
| | [CoC-APR 23a/b] | | |
| | Reviewer Notes: | | |
| | | | |
| | No Fuite and occation 700/ | 0 | |
| | No Exits or Less than 70% 70-79% | 0 | |
| | | 7 | |
| | 80%-100% | 15 | |
| | Not a RRH Program | N/A | |
| | PSH & RRH: At least 95% of exits were to a known | | |
| (OC) | destination. | | |
| | [C-C ADD 022-/h] | | |
| | [CoC-APR Q23a/b] Reviewer Notes: | | |
| | Reviewer Notes: | | |
| | | | |
| | 0-94% | 0 | |
| | 95% or higher | 5 | |
| | Not a PSH or RRH Program | N/A | |
| 4.1f | PSH Only: At least 80% of exits were to a permanent housing | ,,, | |
| (SP) | destination. | | |
| (0.) | Benchmark 80%. | | |
| | [CoC-APR 23a/b] | | |
| | Reviewer Notes: | | |
| | | | |
| | | | |
| | | | |
| | Below 80% | 0 | |
| | 80% or higher | 15 | |
| | Not a PSH Project | N/A | |
| 4.1g | PSH & RRH: At least 20% of adults increased earned cash income. | | |
| (SP) | Benchmark 20%. | | |
| | [CoC-APR 19a1, 19a2] | | |
| | Reviewer Notes: | | |
| | iteviewei ivotes. | | |
| | | | |
| | | _ | |
| | <10% | 0 | |
| | 10-15% | 5 | |
| | 16-19% | 10 | |
| | 20%-100% | 15 N/A | |
| | Not a PSH or RRH Program | N/A | |

| 4.1h | PSH Only: At least 35% of adults increased unearned cash | | |
|--------|---|----------------|---------------|
| (SP) | income. | | |
| | Benchmark 35%. | | |
| | | | |
| | [CoC-APR 19a1, 19a2]. | | |
| | Reviewer Notes: | | |
| | | | |
| | <10% | 0 | |
| | 10 – 34% | 10 | - |
| | 35% and Above | | _ |
| 4.4: | | 15 | |
| 4.1i | PSH Only: Less than 20% of people who exited to PH returned to | | |
| (SP) | homelessness within 2 years. | | |
| | Benchmark 20%. | | |
| | | | |
| | [0701 SPM report exits between 01/01/2021-12/31/2022] | | |
| | Reviewer Notes: | | |
| | | | |
| | | | |
| | 0-19% | 10 | _ |
| | 20%-100% | 0 | |
| 4.1j | RRH Only: Less than 20% of people who exited to PH returned to | | |
| (SP) | homelessness within 2 years. | | |
| | Benchmark 20%. | | |
| | | | |
| | [0701 SPM report exits between 01/01/2021-12/31/2022] | | |
| | Reviewer Notes: | | |
| | | | |
| | 200/ | | |
| | 20% or more | 0 | _ |
| | 10-19% | 5 | _ |
| 4 4 1 | 0-9% | 15 | |
| 4.1k | RRH Only: Median Length of project participation for leavers. | | |
| | Benchmark 180-270 days. | | |
| | [C. C. ADD 033D] | | |
| | [CoC-APR Q22B] | | |
| | Reviewer Notes: | | |
| | > 270 days or < 100 days | 0 | |
| | >270 days or <180 days | 0 10 | - |
| 118.41 | 180 – 270 days | 10 | |
| | S Participation | Possible Score | D |
| | federal law, victim service providers are prohibited from using HMIS. | Possible score | Project Score |
| | ever, CoC-funded projects must use an HMIS Comparable Database | | |
| | llect and report data.) | | |
| 4.2a | HMIS Data Completeness | | |
| | [CoC-APR Q6a-6d] | | |
| | Reviewer Notes: | | |
| | | | |
| | Above 10% | 0 | |
| | 0-10% | 5 | |
| | | | |



| | All of the applicant's projects that are listed in the 2023 HIC participate in HMIS or a comparable database if VSP. [HIC] | | |
|--------------|---|----------------------|----------------|
| | Reviewer Notes: | | |
| | No | 0 | |
| | Yes | 5 | |
| 4.2c | The applicant submitted their APR on or before the designated deadline. [Sage] | | |
| | Reviewer Notes: | | |
| | No. | 0 | |
| | No Yes | 0 5 | |
| 4.2d (OC) | The applicant was responsive to the Data Center in annual corrections for LSA and/or SPM reports. [The CoC Regional Lead copied on communication to escalate | 3 | |
| | responsiveness; Data Center records] Reviewer Notes: | | |
| | | _ | |
| | No Yes | <u>0</u> 5 | |
| 4.2e (OC) | Any of the project's HMIS users were deactivated due to lack of login compliance (every 60 days) during CY2023. [Data Center records] Reviewer Notes: | | |
| | Yes | 0 | |
| | No | 3 | |
| HUD | Monitoring | | |
| 4.3a | The applicant is free of HUD monitoring findings for any agency programs. If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application to meet standards. | Standard Met Unmet | |
| | [Renewal Applicant Form] Reviewer Notes: | | |
| 4.3b | Previous Project Spending Rates: These questions are for programs 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. | Standard Met Unmet | |
| | (Programs that fall below the standard will trigger review by CoC | Unmet, documentation | n not provided |

| | 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.] Reviewer Notes: | □ N/A | |
|--------|--|----------------|---------------|
| Possil | tion V: Coordinated Entry and Prioritization ble Points: 15 num score or review triggered: 5 | | |
| - , | L | Section V S | core |
| 5.1 | The agency participated in at least 85% of the region's case conferencing in calendar year 2023. | Standard | |
| | Conferencing in Calendar year 2025. | ☐ Met | |
| | [CE Lead Interview] | | |
| | Reviewer Notes: | Unmet Unmet | |
| | | □ N/A | |
| 5.2 | At least 97% of new admissions during CY2023 have a CE project | Standard | |
| | entry Assessment in HMIS or a comparable database for VSP. | Standard — | |
| | Benchmark 97% | Met | |
| | [Renowal Applicant Form] | Unmet | |
| | [Renewal Applicant Form] Reviewer Notes: | | |
| | Reviewer Notes. | ∐ N/A | |
| 5.3 | Non-VSP: The program has a CE assessment score in HMIS for all new admissions during CY2023. | | |
| | [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | | Possible Score | Project Score |
| | 97-100% | 10 | |
| | Below 97% | 0 | |
| 5.4 | The agency participated in the 2023 annual CE evaluation process, submitting both an <u>agency survey</u> and <u>client surveys</u> . | | |
| | [CE evaluation documentation submitted for 2023] | | |
| | Reviewer Notes: | | |
| | Yes | 5 | |
| | No | 0 | |



| | tion VI: Application Deadlines and | Costion VI C | |
|--------|--|--------------------------|---------------|
| | | Section VI Se | core |
| | ble Deductions: -25 num Points Required or Review is Triggered: Not more than loss | | |
| Budg | et & Match | Possible Score | Project Score |
| 6.1a | Questions regarding the budget are neither complete nor accurate, subtract up to 5 points. | -5 | |
| | Reviewer Notes: | | |
| 6.1b | Match letters sufficiently document the required 25% match, and all match funds are eligible. | Standard | |
| | [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]. Reviewer Notes: | ☐ Unmet | |
| Deadli | | Possible Score | Project Score |
| | Online application was NOT completed correctly, subtract up to | POSSIBLE SCOLE | Project Score |
| 0.10 | 10 points. (Specific dates for deadlines will be clarified as the NOFO timeline is discerned or published.) | -10 | |
| | Reviewer Notes: | | |
| 6.1d | Required accompanying documents were NOT completed correctly, subtract up to 10 points. | -10 | |
| | Reviewer Notes: | | |
| 6.2a | The application and accompanying documents must be submitted by the deadline. If not, the Project Review Committee will determine potential consequences, including whether the | Standard ☐ Met | |
| | project is ineligible for inclusion in the CoC's final application or will be recommended to receive reduced funding. Reviewer Notes: | Unmet | |
| 6 2h | The applicant signed and submitted the NC BoS CoC Grantee | Threshold | 1 |
| 0.20 | Agreement. [NC BoS CoC Grantee Agreement] | Met | l |
| | Reviewer Notes: | Unmet | |





North Carolina Balance of State Continuum of Care

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2024 Scorecard for CoC Program 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 NC BoS CoC prioritizes projects that serve households with severe needs and vulnerabilities, including households experiencing 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 a reimbursement basis, and 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 needs, 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 and using HMIS or comparable database for Victim Service Providers (VSP) and 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 funding and performing to NC BoS CoC standards, including descriptions in NC BoS CoC 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 the agency's capacity to: implement projects in a timely manner with successful outcomes, score well on the HUD Annual Performance Report (APR), maintain high data quality, 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.]

| | The state of the s | | |
|---------------------------|--|-------|--|
| Reviewer: | | | |
| Applicant: | Vaya Health | | |
| Project Name: | Vaya Health PSH Central Combo | | |
| Project Type (select one) | PH: PSH | | |
| Reviewer Signature: | | Date: | |



| PROJECT QUALITY REQUIREMENTS | | |
|--|-----------------|----------------------|
| Renewal projects must receive at least the standard and minimum score in each section. | Maximum | |
| 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 | Score Possible: | PSH: 198 RRH: 177 |
| Review Committee will determine potential consequences, including whether the project | 1 03310101 | |
| is ineligible for inclusion in the NC BoS CoC's final application or will be recommended | Project | 175.5 |
| to receive reduced funding. Thresholds must be met for the project to be eligible for | Score: | |
| funding. | | |
| | | |

Maximum Points Chart

| Project | Maximum | Maximum Points | Maximum Points | Maximum Points for |
|---------|-----------|----------------|------------------|----------------------|
| Types | Points | for Objective | for System | Severe Barriers (SB) |
| | Available | Criteria (OC) | Performance (SP) | |
| PSH | 198 | 80 | 60 | 10 |
| RRH | 177 | 74 | 50 | 10 |

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 | | Secti | Section I Score | | |
|--------------------------------|---|----------------|-----------------|--|--|
| | ble Points: 9 num Points Required or Review is Triggered: 5 | 8.5 | | | |
| Accu | racy and Completeness of Responses | Possible Score | Project Score | | |
| 1.1 | The project description addresses all parts of the detailed instructions. [Proj. App: 3B, Project Application Detailed Instructions] | 3 | 3 | | |
| | Reviewer Notes: | | | | |
| 1.2 | The applicant answered all questions regarding services. | | 2 | | |
| | [Proj. App: 4A] | 2 | | | |
| | Reviewer Notes: | | | | |



| 1.3 | The applicant completed all sections of the overall application adequately (answered all relevant questions; provided detailed answers per the Project Applicant Detailed Instructions; filled out a charts). [Project Application, Project Application Detailed Instructions] Reviewer Notes: | all | 4 | 3.5 |
|-------------|---|-----|-----------|---------|
| Secti | on II: Equity | | Section I | I Score |
| | e Points: 35 um Points Required or Review is Triggered: 18 | 26 | | |
| 2.1 (OC) | The applicant provides guidelines/program rules in other languages besides English. [Renewal Applicant Form; Guidelines/Program Rules in another language.] Reviewer Notes: | | 5 | 0 |
| 2.2 (OC) | The applicant has client-facing bilingual staff. [Renewal Applicant Form] Reviewer Notes: | _ | 5 | 5 |
| 2.3 | The applicant has an arrangement for professional/trained interpretation services. In-person or remote interpretation from trained providers are both applicable. Staff can be considered interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [Renewal Applicant Form; Contract for Services] Reviewer Notes: | - | Star | ndard |
| 2.4 | The applicant has an Anti- Discrimination Policy in full compliance with the NC BoS CoC, which includes: Equal Access Policy and Procedures Family Separation Policy, as appropriate Faith-Based Inclusion Policy Grievance and Anti-Retaliation Policy and Procedures [Anti-Discrimination P&P Renewal Applicant Form] Reviewer Notes: | - | Stai | ndard |
| 2.5 | The applicant holds annual training on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy. [Renewal Applicant Form] | | Star | ndard |
| | Reviewer Notes: | , | □ met | |



| 2.6 (OC) | Project staff engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within the agency. Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training. [Renewal Applicant Form] Reviewer Notes: | 5 | 5 |
|--------------|--|--------------------------|--------------|
| 2.7 (OC) | The applicant has an equal opportunity hiring clause in job postings. | 2 | 2 |
| | [Example Job Posting] Reviewer Notes: | | |
| 2.8 | Non-profits Only: Individuals who are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of the applicant's Board of Directors. [Renewal Applicant Form] Reviewer Notes: | Stan N/A, not a non-pro | d ard |
| 2.9 (OC) | Non-profits Only: At least 20% of the applicant's Board of Directors have experienced homelessness. [Renewal Applicant Form] Reviewer Notes: | | |
| | Less than 20% | 0 | N/A |
| | 20% or Above | 2 | |
| | Not a non-profit | N/A | |
| 2.10 (OC) | At least 20% of the applicant's managers or director-level positions are Black, Indigenous, or People of Color. Position descriptions must include supervising other staff, payroll, or HR duties. [Renewal Applicant Form] Reviewer Notes: | | |
| | Less than 10% | 0 | 5 |
| | Between 10 – 19% | | |
| | 20% or Above | 5 | |
| 2.11 | The applicant incorporated the NC BoS CoC Client Bill of Rights into its policies and procedures. [Ranguage Applicant Form: NC Ros CoC Client Bill of Rights RSR] | Stan | dard |
| | [Renewal Applicant Form; NC BoS CoC Client Bill of Rights P&P] Reviewer Notes: | met | |

| 2.12 | The applicant agency has an internal policy/procedure to solicit | | |
|-------|---|---|----|
| (OC) | informal/formal feedback from current/former clients. | | |
| | [Renewal Applicant Form; P&P on Soliciting Client Feedback] | | |
| | Reviewer Notes: | | |
| | neviewer Notes. | | |
| | | | |
| | No | 0 | 2 |
| | Yes | 2 | |
| 2.13 | At least 80% of program staff attended community events, | | |
| (OC) | conferences, or panel conversations in the past 12 months on the topic of racial equity, anti-racism, or indigenous rights. <i>Please</i> | | |
| | include the percentage of staff that attended. | | |
| | Benchmark at 80% of total program staff. | | |
| | [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | Below 80% | 0 | 3 |
| | 80% or Above | 3 | |
| 2.14A | Homeless Service Agencies Only: The applicant's hiring | | |
| (OC) | announcements cite lived experience of homelessness as a | | |
| | preferred skill for open positions at all levels in the agency. | | |
| | [Renewal Applicant Form; Hiring Announcement] Reviewer Notes: | | |
| | neviewei notes. | | |
| | Nc | 0 | _0 |
| | Yes | 2 | |
| 2.14B | Agencies Serving Multiple Populations Only: The applicant's | | |
| (OC) | hiring announcements cite lived experience of homelessness as a preferred skill for open positions in the project. | | |
| | [Renewal Applicant Form; Hiring Announcements] | | |
| | Reviewer Notes: | | |
| | | | |
| | | | |
| | No | 0 | 0 |
| | Yes | 2 | |
| 2.15 | At least 10% of project staff involved in operating or | | |
| (OC) | administering the CoC-eligible activities have experienced | | |
| | homelessness. | | |
| | Benchmark at 10%. | | |
| | [Renewal Applicant Form] | | |
| | Reviewer Notes: | | |
| | Below 10% | 0 | 2 |
| | 10% or Above | 2 | |
| | One or more of the project's managers or director-level staff have | | |



| 2.16 | personally experienced homelessness in their lifetime. | | |
|------|--|---|---|
| | [Renewal Applicant Form] | | |
| | Reviewers Notes: | | |
| | | | |
| | No | 0 | 2 |
| | Yes | 2 | |

| Secti | ion III: Project Design | Section III Score |
|-------------|---|-------------------|
| Possib | ole Points: PSH: 35 RRH: 20 num Points Required to Review is Triggered: | 24 |
| PSH a | nd RRH: Services Resource Leverage Plan | |
| 3.1 (OC) | CoC-funded projects 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. | |
| | This project leverages services funding for its clients and it has a plan in place to increase the amount of its budget dedicated to housing assistance. To receive full points, the project should demonstrate: | |
| | It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a dedicated funding stream to provide some services specifically for project participants that are funded by another source besides CoC Program funds. | |
| | [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] | |
| | Services provided by other funding sources exceed the required 25% match by at least 15%. | |
| | [Submit MOU/contract] | |
| | Reviewer Notes: | |
| | Project does not meet either criterion below | 0 0 |
| | Project documents leverage between 5-14% above match | |
| | Project documents leverage at 15% or above match | 10 |



Staff Scoring

The following sections are scored by NCCEH. Staff use standardized scoring methods to ensure fairness.

| Sect | ion III: Project Design Continued | Section III Score |
|-------------|---|---|
| Housir | ng First | |
| 3.2 (SB) | This project uses a Housing First approach. Must meet all statements below to meet the standard. Project 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. The project does not screen out for: 1) Having too little or no income 2) Active or history of substance use 3) Having a criminal record (with exceptions for statemandated restrictions) 4) History of domestic violence (e.g., lack ofprotective order, or separation from abuser, or law enforcement involvement) The program does not terminate people from the program for: 1) Failure to participate in supportive services 2) Failure to make progress on a service plan 3) Loss of income or failure to improve income 4) Domestic violence 5) Any other activity not covered in a lease agreement typically found in the project's geographic area 6) Failure to maintain recovery [Program policies and procedures, Pre-Competition Renewal Applicant Form, Sample Lease] Reviewer Notes: | Standard Met (ALL met) Unmet (1 or more missed) Met |
| | Projects Only: Key Elements of Permanent Supportive Housing | s they do not pood to be synlicitly |
| outlir | projects should meet these 9 standards set forth by <u>SAMHSA</u> , however ned in the Project Policies & Procedures in order to meet the standard | • • |
| 3.3a | Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes: | Standard met |
| | incore rates. | |

| 3.3b | Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | met 🗌 | Standard |
|------|---|----------|----------|
| 3.3c | 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 life in the community. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | met | Standard |
| 3.3d | Housing is not time-limited, and the lease is renewable at tenants' and owners' option. [Program policies and procedures, Pre-Competition Renewal Applicant Form, Sample Lease] Reviewer Notes: | ☐ met | Standard |
| 3.3e | Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | ☐ met | Standard |
| 3.3f | As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ met | Standard |
| 3.3g | Before moving into permanent housing, tenants are asked about their housing preferences and are offered the same range of choices as are available to others at their income level in the same housing market. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | ☐ met | Standard |

| 3.3h | 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. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard met | | |
|----------------|--|---------------|--|--|
| 3.3i | The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard met | | |
| Rapid End F | For RRH Projects Only: Rapid Rehousing Performance Benchmarks and Program Standards Rapid Rehousing 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 | | | |
| 3.4a | Core Program Standard: Housing Identification | | | |
| | The 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, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard N/A | | |
| 3.4a2 | The 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, Pre-Competition Renewal Applicant Form] Reviewer Notes: | Standard N/A | | |



| | who lease to program participants. This support is detailed in a written policy distributed to landlords. The program can negotiate additional supports, as needed, on a case-by- case basis. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A | Standard |
|------|---|----------|----------|
| | The program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A | Standard |
| 3.4b | Core Program Standard: Rent and Move-In Assistance | | |
| | Program staff are trained on regulatory requirements of all Rapid Rehousing 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. The program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A □ | Standard |
| | The program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. (Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied endpoint. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.) [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A □ | Standard |

| 3.4b3 | 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 rehousing assistance is used as a bridge to permanent subsidy or permanent supportive housing placement. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A □ | Standard |
|-------|--|---------|----------|
| 3.4c | Core Program Standard: Rapid Rehousing Case Management and Services | | |
| 3.4c1 | Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A □ | Standard |
| | When case management and service compliance are not mandated by federal or state regulation, services offered by a program have voluntary participation. (Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan). [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | N/A | Standard |
| | The program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [Program policies and procedures, Pre-Competition Renewal Applicant Form] | N/A | Standard |

| | Reviewer Notes: | | |
|------|---|----------|----------|
| | The program has clearly defined policies and objectivestandards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs or program changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | | Standard |
| 3.4d | Core Program Standard: Program Philosophy and Design | | |
| | Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid rehousing. The program has a routine way of onboarding new staff that includes training on Housing First and rapid rehousing principles. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A | Standard |
| | The program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ N/A | Standard |
| | 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 a willingness to engage in the program and work on a self-directed housing plan. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | □ | Standard |
| | Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [Program policies and procedures, Pre-Competition Renewal Applicant Form, Sample Lease] | □ N/A | Standard |



| | Reviewer Notes: | | |
|------------------------------------|---|--|--|
| Perm these Movineed gradu | anent Supportive Housing: Moving-on Strategy anent supportive housing should be available indefinitely, as long as hou e projects can stabilize to the point that they no longer need the intensive ng-on strategies for permanent supportive housing projects create oppo the supportive part of permanent supportive housing to live independent uation for the project. They usually involve transferring the tenant to ano ing Choice Voucher (Section 8), public housing, or other affordable housi | e services associated rtunities for particip ntly and sustain theil ther long-term hous | with the project. ants who no longer homes after |
| | The permanent supportive housing project incorporates moving-on strategies in its project 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 project policies and procedures should include: Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); A method to prepare tenants to move-on and exit planning procedures; A method to link moving-on tenants to mainstream services and supports; Procedures to provide step-down services after exit; and A strategy to evaluate the effectiveness of moving-on strategies. [Project policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes: | | |
| | | | |
| | Project meets none of the above bulleted points | 0 | 5 |
| | Project meets 1-3 of the above bulleted points | 5 | |
| | Project meets 4-5 of the above bulleted points | 10 | |
| | Project meets all 6 bulleted points above | 15 | |
| 3.6 (SB) | The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, such as people experiencing homelessness, survivors of interpersonal violence, and youth experiencing homelessness. This project targets one of the subpopulations below. And it describes additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs. This project targets: | | |
| | People experiencing chronic homelessness People who identify as LGBTO | | |

| 3) | People with histories of institutionalization, incarceration, or being | |
|----|--|--|
| | in foster care | |
| 4) | Veterans | |
| 5) | Survivors of interpersonal violence | |
| 6) | Unaccompanied or parenting youth 18-24 | |
| | | |

[Program policies and procedures, Pre-Competition Renewal Applicant Form]

Reviewer Notes:

| | Possible Score | Project Score |
|---|-------------------|---------------|
| Full points for detailed plan to engage and serve specific needs of | | 10 |
| identified population(s). Partial points available for | 10 | |
| less detailed plans. | | |

Section IV: Project Performance

Section IV Score

Possible Points Added: PSH: 104 RRH: 98

Minimum Points Required or Review is Triggered: PSH: 52 RRH: 49

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2023 to December 31, 2023, unless otherwise noted.

| D | lations Compad | Danible seems | Duningt Coour |
|------|---|----------------|---------------|
| - | lations Served | Possible score | Project Score |
| 4.1a | RRH Only (Excluding DV): At least 40% of the people served | | |
| (OC) | by the project had a disability. | | |
| | Benchmark 40% | | |
| | [Q13a2 divided by total enrolled] | | |
| | Reviewer Notes: | | |
| | | | |
| | Less than 25% | 0 | NA |
| | 25%-39% | 5 | |
| | 40% or Above | 15 | |
| | A VSP RRH Project or not an RRH Program | N/A | |
| 4.1b | PSH Only: 100% of new household admissions during the 2023 | | |
| (OC) | calendar year were experiencing chronic homelessness. | | |
| , , | [Custom HMIS Report] | | |
| | Reviewer Notes: | | |
| | | | |
| | Less than 100% | 0 | 11 |
| | 100% | 11 | |
| | Not a PSH Project | N/A | |
| 4.1c | PSH Only: At least 80% of households served by the project | | |
| (OC) | were experiencing chronic homelessness. | | |
| | | | |
| | [A003 – Chronic Homelessness – check if participants found non- | | |
| | Chronically Homeless, staff will follow up with grantee to | | |
| | determine CH status.] | | |

| | Reviewer Notes: | | |
|--------------|--|-----------|----|
| | Less than 50% | 0 | 10 |
| | 50-79% | 5 | |
| | 80-100% | 10 | 1 |
| | Not a PSH Program | N/A | 1 |
| 4.1d (SP) | RRH Only: At least 80% of exits were to a permanent housing destination. HUD Benchmark 80%. [CoC-APR 23a/b] Reviewer Notes: | | |
| | | | |
| | No Exits or Less than 70% | 0 | NA |
| | 70-79% | 7 | |
| | 80%-100% | 15 | |
| | Not a RRH Program | N/A | |
| | PSH & RRH: At least 95% of exits were to a known destination. [CoC-APR Q23a/b] Reviewer Notes: | | |
| | 0-94% | 0 | 5 |
| | 95% or higher | 5 | _ |
| | Not a PSH or RRH Program | N/A | |
| 4.1f (SP) | PSH Only: At least 80% of exits were to a permanent housing destination. Benchmark 80%. [CoC-APR 23a/b] | | |
| | Reviewer Notes: | | |
| | Below 80% | 0 | 15 |
| | 80% or higher | 15 N/A | - |
| 4.1g (SP) | Not a PSH Project PSH & RRH: At least 20% of adults increased earned cash income. Benchmark 20%. [CoC-APR 19a1, 19a2] | N/A | |
| | Reviewer Notes: | | |
| | <10% | 0 | 15 |
| | 10-15% | 5 | |
| | 16-19% | 10 | |
| | 20%-100% | 15 | _ |
| | Not a PSH or RRH Program | N/A | |

| | PSH Only: At least 35% of adults increased unearned cash income. | | |
|-------|---|----------------|---------------|
| | Benchmark 35%. | | |
| | [CoC-APR 19a1, 19a2]. | | |
| | Reviewer Notes: | | |
| | | | |
| | <10% | 0 | 15 |
| | 10 – 34% | 10 | |
| | 35% and Above | 15 | |
| 4.1i | PSH Only: Less than 20% of people who exited to PH returned to | | |
| (SP) | homelessness within 2 years. Benchmark 20%. | | |
| | DETICHNITION 20/6. | | |
| | [0701 SPM report exits between 01/01/2021-12/31/2022] | | |
| | Reviewer Notes: | | |
| | | | |
| | 0.400/ | 40 | 1.0 |
| | 0-19% 20%-100% | 10 0 | _10 |
| 4.1j | RRH Only: Less than 20% of people who exited to PH returned to | 0 | |
| (SP) | homelessness within 2 years. | | |
| (/ | Benchmark 20%. | | |
| | | | |
| | [0701 SPM report exits between 01/01/2021-12/31/2022] | | |
| | Reviewer Notes: | | |
| | | | |
| | 20% or more | 0 | NA |
| | 10-19% 0-9% | 5 15 | - |
| 4.1k | RRH Only: Median Length of project participation for leavers. | 12 | |
| T. 1K | Benchmark 180-270 days. | | |
| | , | | |
| | [CoC-APR Q22B] | | |
| | Reviewer Notes: | | |
| | >270 days or <180 days | 0 | NA |
| | 180 – 270 days | 10 | |
| HMIS | Participation | | |
| | ederal law, victim service providers are prohibited from using HMIS. | Possible Score | Project Score |
| | ever, CoC-funded projects must use an HMIS Comparable Database | | |
| | lect and report data.) | | |
| 4.2a | HMIS Data Completeness [CoC-APR Q6a-6d] | | |
| | Reviewer Notes: | | |
| | neviewel indies. | | |
| | Above 10% | 0 | 5 |
| | 0-10% | 5 | |
| | | | |



| | All of the applicant's projects that are listed in the 2023 HIC participate in HMIS or a comparable database if VSP. [HIC] | | | |
|--------------|--|---------------------|----------|---|
| | Reviewer Notes: | | | |
| | No | 0 | <u> </u> | 5 |
| | Yes | 5 | | |
| 4.2c | The applicant submitted their APR on or before the designated deadline. [Sage] | | | |
| | Reviewer Notes: | | | |
| | No | 0 | <u> </u> | 5 |
| | Yes | 5 | | |
| 4.2d (OC) | The applicant was responsive to the Data Center in annual corrections for LSA and/or SPM reports. | | | |
| | [The CoC Regional Lead copied on communication to escalate responsiveness; Data Center records] | | | |
| | Reviewer Notes: | | | |
| | No | 0 | | 5 |
| | Yes | 5 | | |
| 4.2e (OC) | Any of the project's HMIS users were deactivated due to lack of login compliance (every 60 days) during CY2023. | | | |
| | [Data Center records] | | | |
| | Reviewer Notes: | | | |
| | Yes | 0 | | 3 |
| | No | 3 | | |
| | Monitoring | | | |
| 4.3a | The applicant is free of HUD monitoring findings for any agency programs. If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application | Stand met | dard | |
| | to meet standards. | | | |
| | [Renewal Applicant Form] | | | |
| | Reviewer Notes: | | | |
| 4.3b | Previous Project Spending Rates: These questions are for programs that have been operating for at least one year at the time of the NOFO release. (Percentage rounded to the nearest | unmet | Standard | |
| | whole number) Percentage 90% or higher. | | | |
| | (Programs that fall below the standard will trigger review by CoC | | | |



| | staff and Project Review Committee. The review will depotential consequences, including whether some fund be reallocated to new projects.) [Scored from APR. If A available, agencies will submit an eLOCCS screenshot of for last completed year. If agencies are spending less to funding, they must submit a narrative explaining why is underspending their grant.] Reviewer Notes: | ing should PR is not f final draw han 90% of | | | |
|-----|--|---|----------------|---------------|--|
| Sec | ction V: Coordinated Entry and | | Section V Sco | re | |
| | oritization | | 15 | | |
| | ible Points: 15 | | | | |
| | mum score or review triggered: 5 | | | | |
| 5.1 | The agency participated in at least 85% of the region's | case | Standard | | |
| | conferencing in calendar year 2023. | Standard | | | |
| | [CE Lead Interview] | | met | | |
| | Reviewer Notes: | | | | |
| | neviewer rvotes. | | | | |
| | | | | | |
| 5.2 | At least 97% of new admissions during CY2023 have a centry Assessment in HMIS or a comparable database for Benchmark 97% | | Standar | d | |
| | [Renewal Applicant Form] | | | | |
| | Reviewer Notes: | | | | |
| | | | _ | | |
| 5.3 | Non-VSP: The program has a CE assessment score in H new admissions during CY2023. | MIS for all | | | |
| | [Renewal Applicant Form] | | | | |
| | Reviewer Notes: | | | | |
| | | | | | |
| | | | Possible Score | Project Score | |
| | | 97-100% | 10 | 10 | |
| | | Below 97% | 0 | | |
| 5.4 | The agency participated in the 2023 annual CE evaluate submitting both an agency survey and client surveys. | on process, | | | |
| | [CE evaluation documentation submitted for 2023] | | | | |
| | Reviewer Notes: | | | | |
| | | Yes | 5 | 5 | |
| | | No | 0 | | |

Section VI: Application Deadlines and Documentation Section VI Score -2 Possible Deductions: -25 Minimum Points Required or Review is Triggered: Not more than loss **Budget & Match Possible Score Project Score** 6.1a Questions regarding the budget are neither complete nor accurate, -5 subtract up to 5 points. **Reviewer Notes:** 6.1b Match letters sufficiently document the required 25% match, Standard met and all match funds are eligible. [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections]. Reviewer Notes: Deadlines **Possible Score Project Score** -2 6.1c Online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the -10 NOFO timeline is discerned or published.) Reviewer Notes: 6.1d Required accompanying documents were NOT completed 0 -10 correctly, subtract up to 10 points. Reviewer Notes: 6.2a The application and accompanying documents must be Standard submitted by the deadline. If not, the Project Review Committee will determine potential consequences, including whether the ☐ met project is ineligible for inclusion in the CoC's final application or will be recommended to receive reduced funding. Reviewer Notes: 6.2b The applicant signed and submitted the NC BoS CoC Grantee **Threshold** Agreement. met [NC BoS CoC Grantee Agreement] Reviewer Notes:





Dear Greenville Housing Authority,

to movesd, bos -

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

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of project Review Committee without making any changes. 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:

Greenville Housing Authority - Project LIFE - \$369,720 - Rank 22 in Tier 1

Unfortunately, the following projects were not included in the final ranked list of projects:

Greenville Housing Authority - Seeds of Change Greenville Housing Authority - Project HOPE Greenville Housing Authority - Solid Ground Greenville Housing Authority - Project Stable Solutions

This year's CoC funding process was very competitive. The Steering Committee considered the CoC's Funding Priorities for new projects as well as the quality of applications and project performance to make final decisions. The CoC decided to reallocate all funding in Greenville Housing Authority's Seeds of Change, Project HOPE, Solid Ground, and Project Stable Solutions projects due to several factors which included: insufficient information in submitted materials (only the project application was submitted) during the competition, consistent underspending of grants, and grant administration issues. The Steering Committee funded new projects with higher scores in the competition that addressed priority areas in the CoC.

Please find attached the scorecards 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 webpage at: https://www.ncceh.org/files/13764/

If you would like to appeal the decision to not include the above reference projects in the final ranking list, 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 work on your applications over the last few weeks. We know it is disappointing for these projects 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 for further discussion.

Staff will be in touch soon about the next steps on Greenville Housing Authority's Project LIFE renewal project application. We look forward to continuing to work with you.

NC Balance of State CoC Team

North Carolina Coalition to End Homelessness
(919) 755-4393

www.ncceh.org/bos

bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care



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

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to moyesd, bos 🕶

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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





□ Tue, Sep 24, 12:00 PM (2 days ago) ☆ ← :

NC Balance of State CoC

to Cassie, bchartrand, bos ▼

Dear NC Coalition Against Domestic Violence,

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of 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 - \$3,274,177 - Rank 16 in Tier 1 NCCADV - Safe at Home Expansion - \$841,237 - Rank 24 in Tier 2

Please find attached the corresponding scorecards for your 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 webpage at: https://www.ncceh.org/files/13764/

Thank you for your hard work on your applications over the last few weeks. Staff will be in touch soon about the next steps with your applications. We look forward to continuing to work with you.

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

bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

2 Attachments • Scanned by Gmail ①

PDF

PDF

Safe at Home 202...

Safe at Home 202...



<u>₩</u>



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

to Amy.Modlin@TrilliumNC.org, bos 🕶

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 projects:

Trillium - Eastpointe SPC 3 - \$247,660 - Rank 6 in Tier 1
Trillium - Eastpointe SPC Combined - \$215,699 - Rank 7 in Tier 1
Trillium - Eostpointe SPC Southeast - \$84,127 - Rank 12 in Tier 1
Trillium - PSH #1 - \$1,235,328 - Rank 9 in Tier 1
Trillium - RRH - \$228,647 - Rank 10 in Tier 1
Trillium - RRH - \$28,647 - Rank 10 in Tier 1

Please find attached the corresponding scorecards for your 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 webpage at: https://www.ncceh.org/files/13764/

Thank you for your hard work on your applications over the last few weeks. Staff will be in touch soon about the next steps with your applications. We look forward to continuing to work with you.

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

NCCEH staffs the NC Balance of State Continuum of Care





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

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to Ashley, Andrea, Latonya, bos 🕶

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of project Review Committee proposed. The Steering Committee voted to approve the ranked list recommendation by the Project Review Committee without making any changes. The ranked list includes the following NCCEH projects:

NCCEH - HMIS Balance of State Renewal - \$769,299 - Rank 1 in Tier 1 NCCEH - FY24 NC BoS CoC SSO-CE Renewal - \$423,767 - Rank 2 in Tier 1 NCCEH - NC BoS CoC IPV CE Project - \$199,741 - Rank 23 in Tier 2 NCCEH - NC BoS CoC SSO-CE Expansion - \$2,200,680 - Rank 21 in Tier 2

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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© Tue, Sep 24, 12:00 PM (2 days ago) ☆ ← :



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

to catherine.kastleman, jacqueline.lucas@ncdps.gov, laura.hogshead, amanda.stapleton, bos 🕶

Dear NC Office of Recovery and Resiliency,

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 NCORR projects:

NCORR - NCORR FY24 CoC PSH - \$3,209,259 - Rank 14 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13754/

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

to Lori, Jessica, Sarah, bos 🕶

Dear Vaya Health,

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 projects:

Vaya - Vaya Health PSH Central Combo - \$540,938 - Rank 3 in Tier 1 Vaya - Vaya Health PSH Western Combo - \$466,538 - Rank 4 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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

to Melissa, bos 🕶

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 UCCS projects:

UCCS - FY24 CoC RRH UCCS Renewal - \$225,540 - Rank 13 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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bos@ncceh.org

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

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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 RCHH projects:

RCHH - RCHH Renewal Project Application FY2024 - \$290,039 - Rank 5 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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

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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 projects:

Pitt County - PittRRH2024 - \$130,382 - Rank 11 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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

to Bre, Teena, bos ▼

Dear Partners,

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 projects:

Partners - Partners Consolidated Renewal 2024 - \$296,697 - Rank 8 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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NC Balance of State CoC <bos@ncceh.org> to Michele, Amy, bos -

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Dear Diakonos.

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of 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 Diakonos projects:

Diakonos - Fifth Street Ministries PSH - \$152,360 - Rank 18 in Tier 2

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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CoC Application: Project Prioritization Ranking List Notification (External) > Indox x HUDICOC Competition 2024 x





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

Dear Brick Capital Community Development Corporation,

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 projects:

Brick Capital - Region 7 PSH - \$315,218 - Rank 19 in Tier 2

Brick Capital - Piedmont 1 PSH - \$1,198,173 - Rank 17 straddling Tier 1 and Tier 2

Please find attached the corresponding scorecards for your 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 webpage at: https://www.ncceh.org/files/13764/

Thank you for your hard work on your applications over the last few weeks. Staff will be in touch soon about the next steps with your applications. We look forward to continuing to work with you.

NC Balance of State CoC Team

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

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to Natasha, bos 🕶

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 CPCA projects:

CPCA - CPCA Breaking Barriers RRH - \$294,363 - Rank 15 in Tier 1

Please find attached the corresponding scorecard for your project. The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13764/

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

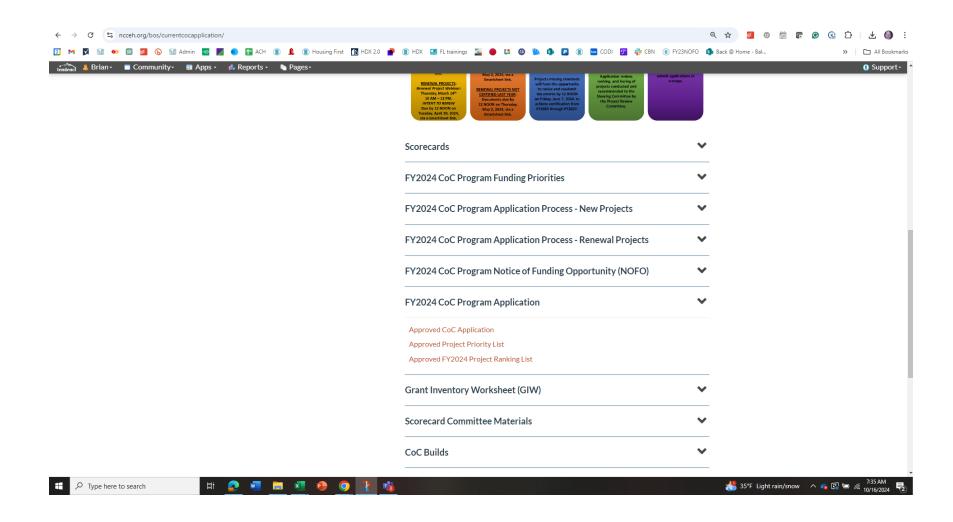
bos@ncceh.org

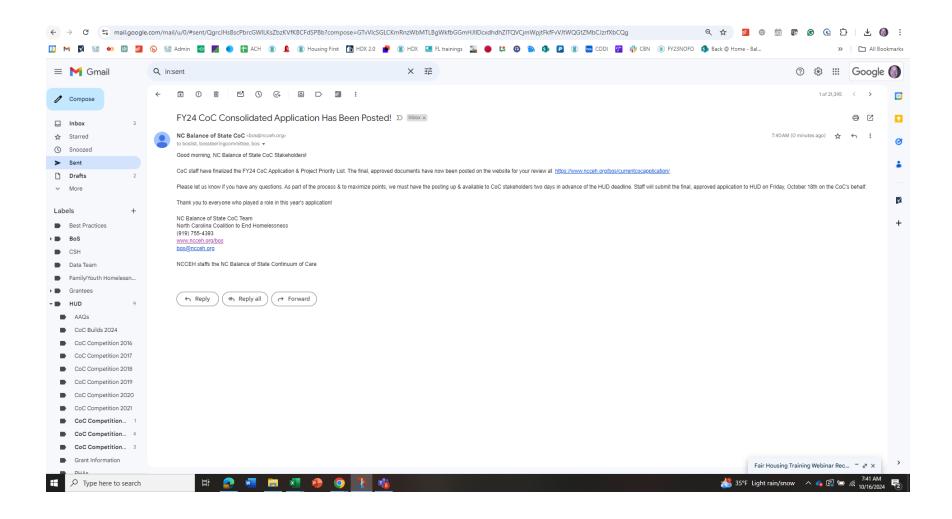
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North Carolina Balance of State CoC Local Competition Selection Results

| | Local Competition Selection Results | | | | | | | |
|----|--|------------|-------------------|------------|----|-----------------------------|----|----------------------|
| | Project Name | Score | Status | Rank | A | mount Requested from HUD | | Reallocated Funds |
| 1 | 2024 HMIS Renewal Balance of State | Not Scored | Accepted | 1 | \$ | 769,299.00 | | 0 |
| 2 | FY24 NC BoS SSO-CE Renewal | Not Scored | Accepted | 2 | \$ | 423,767.00 | | 0 |
| 3 | Vaya Health PSH Central Combo | 175.5 | Accepted | 3 | \$ | 540,938.00 | | 0 |
| 4 | Vaya Health PSH Western Combo | 175.5 | Accepted | 4 | \$ | 466,538.00 | | 0 |
| 5 | Renewal Project Application FY2024 | 159 | Accepted | 5 | \$ | 290,039.00 | | 0 |
| 6 | Eastpointe Shelter Plus Care 3 | 144 | Accepted | 6 | \$ | 247,660.00 | | 0 |
| 7 | Eastpointe Shelter Plus Care - Combined | 129 | Accepted | 7 | \$ | 215,699.00 | | 0 |
| 8 | Partners Consolidated Renewal 2024 | 119.5 | Accepted | 8 | \$ | 296,697.00 | | 0 |
| 9 | Trillium PSH #1 | 114 | Accepted | 9 | \$ | 1,235,328.00 | | 0 |
| 10 | Trillium RRH | 99 | Accepted | 10 | \$ | 228,647.00 | | 0 |
| 11 | PittRRH2024 | 98 | Accepted | 11 | \$ | 130,382.00 | | 0 |
| 12 | Eastpointe Shelter Plus Care - Southeast | 91 | Accepted | 12 | \$ | 84,127.00 | | 0 |
| 13 | FY24 COC-RRH_UCCS_Renewal_Grant | 79 | Accepted | 13 | \$ | 225,540.00 | | 0 |
| 14 | HUD CoC FY2024 New PSH Project | 77 | Accepted | 14 | \$ | 3,209,259.00 | \$ | 3,209,259.00 |
| 15 | CPCA Breaking Barriers RRH 2024 | 54.5 | Accepted | 15 | \$ | 294,363.00 | | 0 |
| 16 | Safe at Home 2024 | 21 | Accepted | 16 | \$ | 3,274,177.00 | | 0 |
| 17 | Piedmont 1 | 83.5 | Accepted | 17 | \$ | 1,198,173.00 | | 0 |
| 18 | 2024 Fifth Street Ministries PSH | 66.5 | Accepted | 18 | \$ | 152,360.00 | | 0 |
| 19 | Region 7 Permanent Supportive Housing | 28.5 | Accepted | 19 | \$ | 315,218.00 | | 0 |
| 20 | Trillium Welcome Home PSH | 134 | Accepted | 20 | \$ | 58,644.00 | | 0 |
| 21 | NC BoS CoC SSO-CE Expansion | Not Scored | Accepted | 21 | \$ | 2,200,680.00 | | 0 |
| 22 | Project LIFE Renewal 2024 | 9 | Accepted | 22 | \$ | 369,720.00 | | 0 |
| 23 | NC Balance of State CoC IPV CE Project | 85.5 | Accepted | 23 | \$ | 199,741.00 | | 0 |
| 24 | Safe at Home 2024 Expansion | 56.5 | Accepted | 24 | \$ | 841,237.00 | | 0 |
| 25 | Seeds of Change Renewal Project 2024 | 48 | Fully Reallocated | Not Ranked | | 0 | \$ | (394,368.00) |
| 26 | Project Hope Renewal 2024 | 38 | Fully Reallocated | Not Ranked | | 0 | \$ | (561,260.00) |
| 27 | Solid Ground Renewal 2024 | 34 | Fully Reallocated | Not Ranked | | 0 | \$ | (79,788.00) |
| 28 | Project Stable Solutions Renewal 2024 | 33 | Fully Reallocated | Not Ranked | | 0 | \$ | (77,271.00) |
| 29 | Northern PSH Combo | Not Scored | Fully Reallocated | Not Ranked | | 0 | \$ | (1,453,687.00) |
| 30 | Pathways to Permanently Housed Consolidated | Not Scored | Fully Reallocated | Not Ranked | | 0 | \$ | (410,029.00) |
| 31 | Thrive Rapid Rehousing | Not Scored | Fully Reallocated | Not Ranked | | 0 | \$ | (232,856.00) |
| 32 | 2024 NC Balance of State Planning Grant | Not Scored | Accepted | Not Ranked | \$ | 941,385.00 | | 0 |







Transforming Lives. Building Community Well-Being.

September 9, 2024

North Carolina Coalition to End Homelessness PO Box 27692 Raleigh, NC 27611

Re: Healthcare Leverage for Trillium's Welcome Home PSH Expansion Grant

To Whom It May Concern:

Trillium Health Resources (Trillium) will work closely with program participants to ensure the most vulnerable program participants receive the mental health, health and substance use services for which they are eligible.

This letter certifies that Trillium agrees to use NC Medicaid funded services for eligible mental health, health and substance use services as leverage for eligible households who participate in Trillium's Welcome Home PSH.

Estimated value of the services is \$20,000 over the course of 1 year based on the expected number of individuals served. These services are paired with the Trillium Welcome Home PSH program and will be available for the period beginning on 12/01/2025 to the end of the operating year on 11/30/2026.

Sincerely,



y B Futrell

