1A. Continuum of Care (CoC) Identification

Instructions:

The fields on this screen are read only and reference the information entered during the CoC Registration process. Updates cannot be made at this time. If the information on this screen is not correct, contact the HUD Virtual Help Desk at www.hudhre.info.

CoC Name and Number (From CoC Registration): NC-511 - Fayetteville/Cumberland County CoC

CoC Lead Agency Name: Cumberland County Community Development Department

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1B. Continuum of Care (CoC) Primary Decision-Making Group

Instructions:

The following questions are related to the CoC primary decision-making group. The primary responsibility of this group is to manage the overall planning effort for the entire CoC, including, but not limited to:
- Setting agendas for full Continuum of Care meetings
- Project monitoring
- Determining project priorities
- Providing final approval for the CoC application submission.
This body is also responsible for the implementation of the CoC's HMIS, either through direct oversight or through the designation of an HMIS implementing agency. This group may be the CoC Lead Agency or may authorize another entity to be the CoC Lead Agency under its direction.

Name of primary decision-making group: Continuum of Care Planning Council

Indicate the frequency of group meetings: quarterly (once each quarter)

If less than bi-monthly, please explain (limit 500 characters):

The Executive/Planning Committee meets on a monthly basis to conduct the business of long range planning for the continuum at large. Specific area committees such as membership, 10 Year Planning To End Homelessness, etc., are scheduled to meet on a monthly basis to monitor and carry out the annual plan as well as address local changes/issues/concerns bringing those to the Executive Planning Committee for review and potential action. In addition to the Chair, Co-Chair, Secretary, other members are encouraged to participate in these efforts. All business conducted by the Executive/Planning Committee is brought before the entire CoC membership for final approval prior to implementation.

Indicate the legal status of the group: Not a legally recognized organization

Specify "other" legal status:

Not applicable.

Indicate the percentage of group members that represent the private sector: (e.g., non-profit providers, homeless or formerly homeless persons, advocates and consumer interests) 69%

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* Indicate the selection process of group members: (select all that apply)

Elected:	
Assigned:	X
Volunteer:	X
Appointed:	X
Other:	

Specify "other" process(es):

Not applicable.

Briefly describe the selection process of group members. Description should include why this process was established and how it works (limit 750 characters):

The CoC maintains an open door membership strategy which allows all interested in improving our community network to have access to participation and decision making authority. Annual review of members by the Executive/Planning Committee allows the CoC to assess membership gaps. Gaps identified and nominations from the general membership are forwarded to the Membership Committee. Nominations are solicited from the full CoC Planning Council body to serve as Executive Members of the Council. The nominees are then elected to positions via majority rule vote. The Executive Committee, in turn, may solicit volunteers from the full continuum of care planning council body to serve as volunteers on other committees as needed.

* Indicate the selection process of group leaders: (select all that apply):

Elected:	X
Assigned:	X
Volunteer:	X
Appointed:	
Other:	

Specify "other" process(es):

Not applicable.

If administrative funds were made available to the CoC, would the primary-decision making body, or its designee, have the capacity to be responsible for activities such as applying for HUD funding and serving as a grantee, providing project oversight, and monitoring. Explain (limit 750 characters):

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Yes. Cumberland County has served as the Grantee and fiscal agent for as many as six continuum of care grants through its Community Development Department from 1995-2010. In that capacity, the County provided grant oversight, financial accountability as well as grant compliance through annual monitoring visits. The County's Community Development Department has the experience and willingness to take on administrative responsibilities if needed.

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1C. Continuum of Care (CoC) Committees, Subcommittees and Work Groups

Instructions:

Provide information on up to five of the CoCs most active CoC-wide planning committees, subcommittees, and workgroups. CoCs should only include information on those groups that are directly involved in CoC-wide planning activities such as project review and selection, discharge planning, disaster planning, completion of the Exhibit 1 application, conducting the point-in-time count, and 10-year plan coordination. For each group, briefly describe the role and how frequently the group meets. If one of more of the groups meet less than quarterly, please explain.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Committees and Frequency

Name of Group	Role of Group (limit 750 characters)	Meeting Frequency
Executive/Planning	This committee is comprised of membership leadership (Chair, Vice-Chair, Secretary, and Treasurer), Committee Chairs as well as representatives of recipients of McKinney-Vento Act funding. This committee is responsible for the development of annual goals and objectives and assessment of progress; development and update of CoC policies and procedures; training / implement annual goals objectives, develop Ranking Tools, PiT Survey Tools, carry out the Pit Survey, develop a PiT analysis of data collected for presentation to community and CoC planning, respond to emergent issues, and represent the CoC on the 10 Year Plan to End Homelessness Steering Committee.	Monthly or more
Membership/Outreach	This committee is responsible for the recruitment and retention of CoC membership. They develop CoC information packets to help new members navigate through the CoC structure. The Membership Committee designs & creates tools to increase community awareness of the CoC and the importance of membership.	Monthly or more
Ranking	This committee meets a minimum of two times each year to review, assess, and rank previously funded programs and current applicant¿s performance, experience, and services. The Ranking Committee reviews project leveraging, required match, CoC involvement, reviews APR performance, HMIS participation and Project presentation. The Committee accesses organizational capacity, provider experience, and program cost effectiveness. The Committee utilizes a graded scale to determine project ranking and submits results to the Executive/Planning Committee.	semi-annually (twice a year)
10 Year Steering	This committee is comprised of community stakeholders from the local government, faith-based organizations, homeless services providers, business and civic leaders whose primary role is to work on a strategy to end homelessness in the community.	Monthly or more

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Community Awareness	This committee is dedicated to reducing stereotypical images of homelessness and works diligently to bring institutional barriers which contribute to homelessness to community awareness. The committee Develops and incorporates common community language, incorporating HUD & McKinney Vento definitions concerning homelessness, emergency shelter, transitional housing, permanent housing, and supportive services into outreach materials, media interviews, and community presentations.	Monthly or more

If any group meets less than quarterly, please explain (limit 750 characters):

The Ranking Committee meets twice per year in response to proposals solicited for submission in the Continuum of Care SuperNOFA application. As this committee's sole function is to provide support for the SuperNOFA process, it is not necessary to meet more than semi-annually.

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1D. Continuum of Care (CoC) Member Organizations

Identify all CoC member organizations or individuals directly involved in the CoC planning process. To add an organization or individual, click on the icon.

Organization Name	Membership Type	Organization Type	Organization Role	Subpopulations
Kingdom Community Development Corporation	Private Sector	Non-pro...	Committee/Sub-committee/Work Group, Attend Consolidated P...	NONE
Better Health of Cumberland County	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Greens Home for Women	Private Sector	Non-pro...	Primary Decision Making Group	Substance Abuse
Legal Aid of FAyetteville	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Hope Harbor	Private Sector	Non-pro...	Primary Decision Making Group	Veterans, Su...
Salvation Army	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	Domestic Vio...
Center for Economic Empowerment and Development...	Private Sector	Non-pro...	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Accent Autobody & Paint	Private Sector	Businesses	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Cape Fear Valley Medical System	Private Sector	Hospita...	Attend 10-year planning meetings during past 12 months	NONE
Care Clinic	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Denise Giles	Individual	Formerl...	Primary Decision Making Group, Attend Consolidated Plan p...	Substance Abuse
Cumberland County Association For Indian People	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Catholic Social Charities	Private Sector	Non-pro...	Primary Decision Making Group	NONE

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Employment Source	Private Sector	Non-pro..	Primary Decision Making Group	NONE
Fayetteville State University	Public Sector	Sch ool ...	Attend Consolidated Plan planning meetings during past 12...	NONE
Myrover Reese Homes	Private Sector	Non-pro..	Attend 10-year planning meetings during past 12 months, C...	Veteran s, Su...
DHHS Dept of Vocational Rehabilitation and Inde...	Public Sector	Stat e g...	Attend Consolidated Plan planning meetings during past 12...	Seriousl y Me...
Cumberland County Local Management Entity (Ment...	Public Sector	Loca l g...	Primary Decision Making Group, Attend Consolidated Plan p...	Seriousl y Me...
Cumberland County Community Development	Public Sector	Loca l g...	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Cumberland County Health Department	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Fayetteville/Cumberland County Human Relations ...	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Fayetteville Metropolitan Housing Authority	Public Sector	Publi c ...	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Fayetteville Technical Community College	Public Sector	Sch ool ...	Committee/Sub-committee/Work Group, Attend 10-year planni...	NONE
Cumberland County Schools	Public Sector	Sch ool ...	Attend 10-year planning meetings during past 12 months, C...	Youth
City of Fayetteville Police Department	Public Sector	Law enf...	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Cumberland County Sherriff's Department	Public Sector	Law enf...	Attend 10-year planning meetings during past 12 months	NONE
Employment Security Commission	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Veteran's Administration	Public Sector	Othe r	Primary Decision Making Group, Attend Consolidated Plan p...	Veteran s, Su...
Covenant Love Family Church	Private Sector	Faith -b...	Committee/Sub-committee/Work Group, Attend 10-year planni...	NONE
Cumberland Community Action Program	Private Sector	Non-pro..	Attend Consolidated Plan planning meetings during past 12...	NONE
City Rescue Mission	Private Sector	Non-pro..	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Fayetteville Urban Ministries	Private Sector	Non-pro..	Attend Consolidated Plan planning meetings during past 12...	NONE
United Way of Cumberland County	Private Sector	Non-pro..	Primary Decision Making Group, Attend 10-year planning me...	NONE

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Cumberland Interfaith Hospitality Network	Private Sector	Non-pro...	Primary Decision Making Group, Attend Consolidated Plan p...	Seriousl y Me...
City of Fayetteville City Council Representative	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Cumberland County Board of Commissioners Repres...	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Parks Chapel Church	Private Sector	Faith -b...	Attend 10-year planning meetings during past 12 months, C...	NONE
Helen Pierce	Individual	Othe r	Attend 10-year planning meetings during past 12 months, C...	NONE
Peace Chapel	Private Sector	Faith -b...	Attend Consolidated Plan focus groups/public forums durin...	NONE
Cumberland County Planning Department	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Gospel Services Benevolent Society	Private Sector	Non-pro...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
City of Fayetteville Community Development Depa...	Public Sector	Loca l g...	Primary Decision Making Group, Attend Consolidated Plan p...	NONE
Deneen Morton	Private Sector	Busi ness es	Attend 10-year planning meetings during past 12 months, C...	NONE
Fayetteville Area System of Transit	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Family Fellowship Worship Center	Private Sector	Faith -b...	Attend 10-year planning meetings during past 12 months	NONE
Manna Church	Private Sector	Faith -b...	Attend 10-year planning meetings during past 12 months	NONE
Cumberland County Department of Social Services	Public Sector	Loca l g...	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Church of Jesus Christ	Private Sector	Faith -b...	Primary Decision Making Group	NONE
Steps & Stages: Disabled Veterans Resources Inc.	Private Sector	Non-pro...	Primary Decision Making Group	Veteran s
Bill Frye	Individual	Othe r	Primary Decision Making Group	NONE
Chris Russell	Individual	Othe r	Primary Decision Making Group	Veteran s
DSS - Care Center	Public Sector	Loca l g...	Primary Decision Making Group	Domesti c Vio...
Elder Anthony Carstarphen	Individual	Othe r	Primary Decision Making Group	NONE
James Weatherington	Individual	Othe r	Primary Decision Making Group	NONE
Jim Anderson	Individual	Othe r	None	NONE

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Heal the Land Ministries	Private Sector	Faith -b...	Primary Decision Making Group	NONE
Linnon China	Individual	Othe r	Primary Decision Making Group	NONE
NC Veterans Assistance Council	Private Sector	Fun der ...	Primary Decision Making Group, Attend 10-year planning me...	NONE
Martha Beatty	Individual	Othe r	Primary Decision Making Group	NONE
Town of Spring Lake	Public Sector	Loca l g...	Attend Consolidated Plan planning meetings during past 12...	NONE
Cecil Williams	Individual	Othe r	Primary Decision Making Group	NONE
Open Arms Ministry	Private Sector	Faith -b...	Primary Decision Making Group	NONE
Patricia Hernandez	Individual	Othe r	Primary Decision Making Group	NONE
Ray Miller	Individual	Othe r	Primary Decision Making Group	NONE
Renee McLaurin	Individual	Othe r	Primary Decision Making Group	NONE
Veterans Empowerment	Private Sector	Non- pro.. .	Primary Decision Making Group, Attend 10-year planning me...	Veteran s
Sherry Matthews	Individual	Othe r	Primary Decision Making Group	NONE
Operation In as Much	Private Sector	Non- pro.. .	Primary Decision Making Group, Committee/Sub-committee/Wo...	NONE
Venus Ford - The Jabez House	Individual	Othe r	Primary Decision Making Group	NONE
RHA	Private Sector	Non- pro.. .	Primary Decision Making Group, Attend 10-year planning me...	Veteran s
Habitat for Humanity	Private Sector	Non- pro.. .	Attend Consolidated Plan planning meetings during past 12...	NONE

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Kingdom Community Development Corporation

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Committee/Sub-committee/Work Group, Attend Consolidated Plan focus groups/public forums during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Better Health of Cumberland County

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend Consolidated Plan focus groups/public forums during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Education, Prescription Assistance, Healthcare

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1D. Continuum of Care (CoC) Member Organizations Detail

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 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Greens Home for Women

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Case Management

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Legal Aid of FAyetteville

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Legal Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
- Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Hope Harbor

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Veterans, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Case Management, Alcohol/Drug Abuse, Employment

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Salvation Army

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months, Attend Consolidated Plan focus groups/public forums during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Domestic Violence, HIV/AIDS

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Case Management, Utilities Assistance, Transportation, Rental Assistance, Soup Kitchen/Food Pantry

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Center for Economic Empowerment and Development (CEED)

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Education, Life Skills, Employment

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Accent Autobody & Paint

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Businesses

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cape Fear Valley Medical System

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Hospitals/med representatives

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Healthcare, Prescription Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Care Clinic

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Non-profit organizations

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Healthcare

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Denise Giles

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Formerly Homeless

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Substance Abuse

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Association For Indian People

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Utilities Assistance, Mortgage Assistance, Rental Assistance, Soup Kitchen/Food Pantry

1D. Continuum of Care (CoC) Member Organizations Detail

| Exhibit 1 2010 | Page 22 | 12/02/2010 |

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Catholic Social Charities

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Utilities Assistance, Rental Assistance, Soup Kitchen/Food Pantry

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Employment Source

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Education, Employment

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Fayetteville State University

Type of Membership:
(public, private, or individual)
Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
School systems/Universities

Role(s) of the organization:
(select all that apply)
Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
No

Services provided to homeless persons and families:
(select all that apply)
Education

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Myrover Reese Homes

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Veterans, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Case Management, Mental health, Alcohol/Drug Abuse

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: DHHS Dept of Vocational Rehabilitation and Independent Living

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) State government agencies

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Seriously Mentally Ill, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Education, Case Management, Life Skills, Employment

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Local Management Entity (Mental Health)

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Seriously Mentally Ill, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Street Outreach, Case Management, Utilities Assistance, Prescription Assistance, Mental health, Transportation, Alcohol/Drug Abuse, Rental Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual:	Cumberland County Community Development
Type of Membership: **(public, private, or individual)**	Public Sector
Type of Organization: **(Content depends on "Type of Membership" selection)**	Local government agencies
Role(s) of the organization: **(select all that apply)**	Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Lead agency for 10-year plan, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months, Attend Consolidated Plan focus groups/public forums during past 12 months, Authoring agency for Consolidated Plan
Subpopulation(s) represented by the organization: **(No more than two subpopulations)**	NONE
Does the organization provide direct services to homeless people?	No
Services provided to homeless persons and families: **(select all that apply)**	Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Health Department

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Prescription Assistance, Healthcare, HIV/AIDS

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual:	Fayetteville/Cumberland County Human Relations Commission
Type of Membership: **(public, private, or individual)**	Public Sector
Type of Organization: **(Content depends on "Type of Membership" selection)**	Local government agencies
Role(s) of the organization: **(select all that apply)**	Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months
Subpopulation(s) represented by the organization: **(No more than two subpopulations)**	NONE
Does the organization provide direct services to homeless people?	No
Services provided to homeless persons and families: **(select all that apply)**	Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Fayetteville Metropolitan Housing Authority

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Public housing agencies

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Case Management, Life Skills, Utilities Assistance, Transportation, Rental Assistance

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Fayetteville Technical Community College

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) School systems/Universities

Role(s) of the organization:
(select all that apply) Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Education

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual:	Cumberland County Schools
Type of Membership: (public, private, or individual)	Public Sector
Type of Organization: (Content depends on "Type of Membership" selection)	School systems/Universities
Role(s) of the organization: (select all that apply)	Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend Consolidated Plan focus groups/public forums during past 12 months
Subpopulation(s) represented by the organization: (No more than two subpopulations)	Youth
Does the organization provide direct services to homeless people?	Yes
Services provided to homeless persons and families: (select all that apply)	Street Outreach, Education

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: City of Fayetteville Police Department

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Law enforcement/corrections

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Street Outreach, Law Enforcement, Transportation

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Sherriff's Department

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Law enforcement/corrections

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Law Enforcement

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Employment Security Commission

Type of Membership:
(public, private, or individual)
Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Local government agencies

Role(s) of the organization:
(select all that apply)
Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Employment

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Veteran's Administration

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Veterans, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Street Outreach, Education, Case Management, Healthcare, Mental health, HIV/AIDS, Employment

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Covenant Love Family Church

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Street Outreach, Soup Kitchen/Food Pantry

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland Community Action Program

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Case Management, Life Skills

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: City Rescue Mission

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Street Outreach, Case Management, Soup Kitchen/Food Pantry

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Fayetteville Urban Ministries

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Education, Utilities Assistance, Rental Assistance, Soup Kitchen/Food Pantry

| Exhibit 1 2010 | Page 42 | 12/02/2010 |

1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: United Way of Cumberland County

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland Interfaith Hospitality Network

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Seriously Mentally Ill, Substance Abuse

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Case Management, Life Skills, Transportation, Rental Assistance

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1D. Continuum of Care (CoC) Member Organizations Detail

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: City of Fayetteville City Council Representative

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual:	Cumberland County Board of Commissioners Representative
Type of Membership: (public, private, or individual)	Public Sector
Type of Organization: (Content depends on "Type of Membership" selection)	Local government agencies
Role(s) of the organization: (select all that apply)	Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months
Subpopulation(s) represented by the organization: (No more than two subpopulations)	NONE
Does the organization provide direct services to homeless people?	No
Services provided to homeless persons and families: (select all that apply)	Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Parks Chapel Church

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

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1D. Continuum of Care (CoC) Member Organizations Detail

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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Helen Pierce

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Peace Chapel

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Faith-based organizations

Role(s) of the organization:
(select all that apply)
Attend Consolidated Plan focus groups/public forums during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
No

Services provided to homeless persons and families:
(select all that apply)
Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

| Exhibit 1 2010 | Page 49 | 12/02/2010 |

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Planning Department

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

| Exhibit 1 2010 | Page 50 | 12/02/2010 |

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
- Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Gospel Services Benevolent Society

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Case Management, Utilities Assistance, Rental Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

| Exhibit 1 2010 | Page 51 | 12/02/2010 |

Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: City of Fayetteville Community Development Department

Type of Membership:
(public, private, or individual)
Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Local government agencies

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group, Attend Consolidated Plan planning meetings during past 12 months, Lead agency for 10-year plan, Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group, Authoring agency for Consolidated Plan

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Utilities Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Deneen Morton

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Businesses

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months, Committee/Sub-committee/Work Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
- Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Fayetteville Area System of Transit

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Attend Consolidated Plan planning meetings during past 12 months, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Transportation

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Family Fellowship Worship Center

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 55 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
- Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Manna Church

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 56 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cumberland County Department of Social Services

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Utilities Assistance, Child Care, Rental Assistance

1D. Continuum of Care (CoC) Member Organizations Detail

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Instructions:

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Church of Jesus Christ

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 58 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Steps & Stages: Disabled Veterans Resources Inc.

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Non-profit organizations

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
Veterans

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Counseling/Advocacy, Street Outreach, Case Management, Life Skills, Transportation

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 59 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Bill Frye

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 60 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Chris Russell

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: Veterans
(No more than two subpopulations)

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families: Street Outreach
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 61 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: DSS - Care Center

Type of Membership:
(public, private, or individual) Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Local government agencies

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) Domestic Violence

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Case Management, Life Skills

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 62 | 12/02/2010 |

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 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Elder Anthony Carstarphen

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Exhibit 1 2010 | Page 63 | 12/02/2010

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: James Weatherington

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 64 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Jim Anderson

Type of Membership: Individual
(public, private, or individual)

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: None
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 65 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Heal the Land Ministries

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 66 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Linnon China

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 67 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: NC Veterans Assistance Council

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Funder advocacy group

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 68 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
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- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Martha Beatty

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 69 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Town of Spring Lake

Type of Membership:
(public, private, or individual)
Public Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Local government agencies

Role(s) of the organization:
(select all that apply)
Attend Consolidated Plan planning meetings during past 12 months, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
No

Services provided to homeless persons and families:
(select all that apply)
Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 70 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Cecil Williams

Type of Membership:
(public, private, or individual)
Individual

Type of Organization:
(Content depends on "Type of Membership" selection)
Other

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
No

Services provided to homeless persons and families:
(select all that apply)
Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

Exhibit 1 2010 | Page 71 | 12/02/2010

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Open Arms Ministry

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Faith-based organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Soup Kitchen/Food Pantry

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 72 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Patricia Hernandez

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 73 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Ray Miller

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

| Exhibit 1 2010 | Page 74 | 12/02/2010 |

Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Renee McLaurin

Type of Membership:
(public, private, or individual) Individual

Type of Organization: Other
(Content depends on "Type of Membership" selection)

Role(s) of the organization: Primary Decision Making Group
(select all that apply)

Subpopulation(s) represented by the organization: NONE
(No more than two subpopulations)

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families: Not Applicable
(select all that apply)

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Veterans Empowerment

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Non-profit organizations

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
Veterans

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Counseling/Advocacy, Street Outreach, Case Management

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Sherry Matthews

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Operation In as Much

Type of Membership:
(public, private, or individual) Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection) Non-profit organizations

Role(s) of the organization:
(select all that apply) Primary Decision Making Group, Committee/Sub-committee/Work Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? Yes

Services provided to homeless persons and families:
(select all that apply) Counseling/Advocacy, Life Skills, Soup Kitchen/Food Pantry

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Venus Ford - The Jabez House

Type of Membership:
(public, private, or individual) Individual

Type of Organization:
(Content depends on "Type of Membership" selection) Other

Role(s) of the organization:
(select all that apply) Primary Decision Making Group

Subpopulation(s) represented by the organization:
(No more than two subpopulations) NONE

Does the organization provide direct services to homeless people? No

Services provided to homeless persons and families:
(select all that apply) Not Applicable

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: RHA

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Non-profit organizations

Role(s) of the organization:
(select all that apply)
Primary Decision Making Group, Attend 10-year planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
Veterans

Does the organization provide direct services to homeless people?
Yes

Services provided to homeless persons and families:
(select all that apply)
Counseling/Advocacy, Case Management, Life Skills

1D. Continuum of Care (CoC) Member Organizations Detail

Instructions:

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Provide information about each CoC member organization, including individuals that are part of the CoC planning process. For each member organization, provide information on the following:
 - Organization name¿Enter the name of the organization or individual. If the individual is a victim of domestic violence, do not enter their actual name.
- Type of membership¿Public, private, or individual
- Type of organization
- Organization role in the CoC planning process
- Subpopulations represented¿No more than 2 may be selected
- Services provided, if applicable

Name of organization or individual: Habitat for Humanity

Type of Membership:
(public, private, or individual)
Private Sector

Type of Organization:
(Content depends on "Type of Membership" selection)
Non-profit organizations

Role(s) of the organization:
(select all that apply)
Attend Consolidated Plan planning meetings during past 12 months

Subpopulation(s) represented by the organization:
(No more than two subpopulations)
NONE

Does the organization provide direct services to homeless people?
No

Services provided to homeless persons and families:
(select all that apply)
Not Applicable

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1E. Continuum of Care (CoC) Project Review and Selection Process

Instructions:

The CoC solicitation of projects and the project selection process should be conducted in a fair and impartial manner. For each of the following items, indicate all of the methods and processes the CoC used in the past year to assess the performance, effectiveness, and quality of all requested new and renewal project(s).

In addition, indicate if any written complaints have been received by the CoC regarding any CoC matter in the last 12 months, and how those matters were addressed and/or resolved.

Open Solicitation Methods: **(select all that apply)**	f. Announcements at Other Meetings, e. Announcements at CoC Meetings, c. Responsive to Public Inquiries, b. Letters/Emails to CoC Membership
Rating and Performance Assessment Measure(s): **(select all that apply)**	b. Review CoC Monitoring Findings, q. Review All Leveraging Letters (to ensure that they meet HUD requirements), c. Review HUD Monitoring Findings, r. Review HMIS participation status, j. Assess Spending (fast or slow), p. Review Match, i. Evaluate Project Readiness, e. Review HUD APR for Performance Results, n. Evaluate Project Presentation, o. Review CoC Membership Involvement, f. Review Unexecuted Grants, a. CoC Rating & Review Commitee Exists, m. Assess Provider Organization Capacity, l. Assess Provider Organization Experience
Voting/Decision-Making Method(s): **(select all that apply)**	c. All CoC Members Present Can Vote, a. Unbiased Panel/Review Commitee, e. Consensus (general agreement), f. Voting Members Abstain if Conflict of Interest
Were there any written complaints received by the CoC regarding any matter in the last 12 months?	No

If yes, briefly describe complaint and how it was resolved (limit 750 characters):

Not applicable.

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1F. Continuum of Care (CoC) Housing Inventory Count--Change in Beds Available

For each housing type, indicate if there was a change (increase or reduction) in the total number of beds counted in the 2010 Housing Inventory Count (HIC) as compared to the 2009 HIC. If there was a change, please describe the reasons in the space provided for each housing type. If the housing type does not exist in your CoC, please select ¿Not Applicable¿ and indicate that in the text box for that housing type.

Emergency Shelter: No

Briefly describe the reason(s) for the change in Emergency Shelter beds, if applicable (limit 750 characters):

Safe Haven: Not Applicable

Briefly describe the reason(s) for the change in Safe Haven beds, if applicable (limit 750 characters):

Transitional Housing: Yes

Briefly describe the reason(s) for the change in Transitional Housing beds, if applicable (limit 750 characters):

Lisa's House of Care closed resulting in the reduction of 5 transitional housing beds for single males and/or females with HIV.

Permanent Housing: No

Briefly describe the reason(s) for the change in Permanent Housing beds, if applicable (limit 750 characters):

CoC certifies that all beds for homeless persons were included in the Housing Inventory Count (HIC) as reported on the Homelessness Data Exchange (HDX), regardless of HMIS participation and HUD funding: Yes

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1G. Continuum of Care (CoC) Housing Inventory Count - Data Sources and Methods

Instructions:

Complete the following items based on data collection methods and reporting for the Housing Inventory Count (HIC), including Unmet need determination. The information should be based on a survey conducted in a 24-hour period during the last ten days of January 2010. CoCs were expected to report HIC data on the Homelessness Data Exchange (HDX).

Indicate the type of data sources or methods used to complete the housing inventory count: (select all that apply)

HMIS plus housing inventory survey

Indicate the steps taken to ensure the accuracy of the data collected and included in the housing inventory count: (select all that apply)

Follow-up, Instructions, Updated prior housing inventory information, Other, Confirmation, Training, HMIS

Must specify other:

The Membeship Committee sent inquirees to agencies, organizations, or entities within the CoC jurisdiction involved in services to the homeless to ensure that their representation was included on the EHIC.

Indicate the type of data or method(s) used to determine unmet need: (select all that apply):

HUD unmet need formula

Specify "other" data types:

If more than one method was selected, describe how these methods were used together (limit 750 characters):

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2A. Homeless Management Information System (HMIS) Implementation

Intructions:

All CoCs are expected to have a functioning Homeless Management Information System (HMIS). An HMIS is a computerized data collection application that facilitates the collection of information on homeless individuals and families using residential or other homeless services and stores that data in an electronic format. CoCs should complete this section in conjunction with the lead agency responsible for the HMIS. All information should reflect the status of HMIS implementation as of the date of application submission.

 For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Select the HMIS implementation coverage area:	Regional (multiple CoCs)
Select the CoC(s) covered by the HMIS: (select all that apply)	NC-507 - Raleigh/Wake County CoC, NC-509 - Gastonia/Cleveland, Gaston, Lincoln Counties CoC, NC-504 - Greensboro/High Point CoC, NC-513 - Chapel Hill/Orange County CoC, NC-501 - Asheville/Buncombe County CoC, NC-502 - Durham City & County CoC, NC-506 - Wilmington/Brunswick, New Hanover, Pender Counties CoC, NC-511 - Fayetteville/Cumberland County CoC, NC-503 - North Carolina Balance of State CoC, NC-516 - Northwest North Carolina CoC, NC-500 - Winston Salem/Forsyth County CoC
Is the HMIS Lead Agency the same as the CoC Lead Agency?	No
Does the CoC Lead Agency have a written agreement with the HMIS Lead Agency?	Yes
Has the CoC selected an HMIS software product?	Yes
If "No" select reason:	
If "Yes" list the name of the product:	ServicePoint
What is the name of the HMIS software company?	Bowman Systems Inc.
Does the CoC plan to change HMIS software within the next 18 months?	No
Indicate the date on which HMIS data entry started (or will start): (format mm/dd/yyyy)	05/01/2006
Indicate the challenges and barriers impacting the HMIS implementation: (select all the apply):	Inadequate staffing, No or low participation by non-HUD funded providers, Inadequate resources

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If CoC indicated that there are no challenges or barriers impacting HMIS implementation, briefly describe either why CoC has no challenges or how all barriers have been overcome (limit 1000 characters).

Not applicable.

If CoC identified one or more challenges or barriers impacting HMIS implementation, briefly describe how the CoC plans to overcome them (limit 1000 characters).

Standardized and customized reporting, end user certification and refresher training, and focused technical assistance are some of the tools that CHIN staff use to assist continua. Most of the agencies who do not receive McKinney-Vento funding are small, volunteer-run organizations that do not have the resources, staff, or capacity to enter data into our HMIS. Without the requirement to participate in HMIS for funding, these agencies are resistant to put financial or volunteer hours into HMIS. The local CoC and CHIN staff will continue to educate these facilities about the statewide and program benefits of HMIS. CHIN staff is also exploring regional staff to asst with data entry for these agencies in order to compensate for inadequate resources and staff. The CoC will continue to explore the possibility of getting local funders to require HMIS participation as a ¿carrot¿ for non McKinney-Vento funded agencies to participate with our local HMIS.

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2B. Homeless Management Information System (HMIS) Lead Agency

Enter the name and contact information for the HMIS Lead Agency. This is the organization responsible for implementing the HMIS within a CoC. There may only be one HMIS Lead Agency per CoC.

Organization Name	North Carolina Housing Coalition
Street Address 1	118 St. Mary's Street
Street Address 2	
City	Raleigh
State	North Carolina
Zip Code Format: xxxxx or xxxxx-xxxx	27601
Organization Type	Non-Profit
If "Other" please specify	
Is this organization the HMIS Lead Agency in more than one CoC?	Yes

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2C. Homeless Management Information System (HMIS) Contact Person

Enter the name and contact information for the primary contact person at the HMIS Lead Agency.

Prefix:	Ms.
First Name	Laura
Middle Name/Initial	
Last Name	McDuffee
Suffix	
Telephone Number: (Format: 123-456-7890)	336-455-7316
Extension	
Fax Number: (Format: 123-456-7890)	919-881-0350
E-mail Address:	lmcduffee@nchousing.org
Confirm E-mail Address:	lmcduffee@nchousing.org

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2D. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

HMIS bed coverage measures the level of provider participation in a CoC¿s HMIS. Participation in HMIS is defined as the collection and reporting of client level data either through direct data entry into the HMIS or into an analytical database that includes HMIS data on an at least annual basis.

HMIS bed coverage is calculated by dividing the total number of year-round beds located in HMIS-participating programs by the total number of year-round beds in the Continuum of Care (CoC), after excluding beds in domestic violence (DV) programs. HMIS bed coverage rates must be calculated separately for emergency shelters, transitional housing, and permanent supportive housing.

The 2005 Violence Against Women Act (VAWA) Reauthorization bill restricts domestic violence provider participation in HMIS unless and until HUD completes a public notice and comment process. Until the notice and comment process is completed, HUD does not require nor expect domestic violence providers to participate in HMIS. HMIS bed coverage rates are calculated excluding domestic violence provider beds from the universe of potential beds.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the HMIS bed coverage rate (%) for each housing type within the CoC. If a particular housing type does not exist anywhere within the CoC, select "Housing type does not exist in CoC" from the drop-down menu.

* **Emergency Shelter (ES) Beds**	86%+
* **Safe Haven (SH) Beds**	Housing type does not exist in CoC
* **Transitional Housing (TH) Beds**	65-75%
* **Permanent Housing (PH) Beds**	86%+

How often does the CoC review or assess its HMIS bed coverage? At least Quarterly

If bed coverage is 0-64%, describe the CoC's plan to increase this percentage during the next 12 months:

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2E. Homeless Management Information System (HMIS) Data Quality

Instructions:

HMIS data quality refers to the extent that data recorded in an HMIS accurately reflects the extent of homelessness and homeless services in a local area. In order for the HMIS to present accurate and consistent information on homelessness, it is critical that an HMIS have the best possible representation of reality as it relates to homeless people and the programs that serve them. Specifically, it should be a CoCs goal to record the most accurate, consistent and timely information in order to draw reasonable conclusions about the extent of homelessness and the impact of homeless services in its local area. Answer the questions below related to the steps the CoC takes to ensure the quality of its data. In addition, CoCs will indicate their participation in the Annual Homelessness Assessment Report (AHAR) for 2009 and 2010 as well as whether or not they plan to contribute data to the Homelessness Pulse project in 2010.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the percentage of unduplicated client records with null or missing values on a day during the last ten days of January 2010.

Universal Data Element	Records with no values (%)	Records where value is refused or unknown (%)
* Social Security Number	0%	5%
* Date of Birth	0%	0%
* Ethnicity	0%	0%
* Race	0%	0%
* Gender	0%	0%
* Veteran Status	1%	3%
* Disabling Condition	6%	8%
* Residence Prior to Program Entry	1%	7%
* Zip Code of Last Permanent Address	1%	29%
* Name	0%	0%

How frequently does the CoC review the quality of client level data?   At least Monthly

How frequently does the CoC review the quality of program level data?   At least Monthly

Describe the process, extent of assistance, and tools used to improve data quality for agencies participating in the HMIS (limit 750 characters):

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CHIN uses comparative reporting to assist agencies as they improve their client and program data. The primary report is the monthly Data Quality Report that provides agencies and CoC with an overview of their data completeness, utilization rates, and inventory; however, agencies may request a report at any time during the month. Standardized ServicePoint reports are available continuously including: APR data, clients served, and client not served. For agencies that need improvement, on-site and on-line data entry technical assistance and training are available at no charge to agencies. In extreme cases, contract data entry assistance is available for agencies to help them catch up on data entry.

Describe the existing policies and procedures used to ensure that valid program entry and exit dates are recorded in the HMIS (limit 750 characters):

A commitment to accurate data entry, including program entry and exit dates, begins when agencies signed their Agency Participation Agreement. In this contract, agencies agree to adhere to CHIN's Standard Operating Policies which explicitly covered all HUD required data elements. Agencies and end users are reminded again during certification training. Program entry and exit dates are covered specifically in the materials. Program enrollment figures are included as elements on CHIN¿s monthly Data Quality Reports. When requested, CHIN staff can generate a report for participating agencies that lists all clients with their program entry and exit dates and indications of fields that remain incomplete.

Indicate which reports the CoC or subset of the CoC submitted usable data: (Select all that apply) None

Indicate which reports the CoC or subset of the CoC plans to submit usable data: (Select all that apply) 2010 AHAR

Does your CoC plan to contribute data to the Homelessness Pulse project in 2010? Yes

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2F. Homeless Management Information System (HMIS) Data Usage

Instructions:

CoCs can use HMIS data for a variety of applications. These include, but are not limited to, using HMIS data to understand the characteristics and service needs of homeless people, to analyze how homeless people use services, and to evaluate program effectiveness and outcomes.

In this section, CoCs will indicate the frequency in which it engages in the following.

- Integrating or warehousing data to generate unduplicated counts
- Point-in-time count of sheltered persons
- Point-in-time count of unsheltered persons
- Measuring the performance of participating housing and service providers
- Using data for program management
- Integration of HMIS data with data from mainstream resources

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the frequency in which the CoC uses HMIS data for each of the following:

Integrating or warehousing data to generate unduplicated counts:	At least Semi-annually
Point-in-time count of sheltered persons:	At least Semi-annually
Point-in-time count of unsheltered persons:	At least Semi-annually
Measuring the performance of participating housing and service providers:	At least Semi-annually
Using data for program management:	At least Annually
Integration of HMIS data with data from mainstream resources:	Never

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2G. Homeless Management Information System (HMIS) Data and Technical Standards

Instructions:

In order to enable communities across the country to collect homeless services data consistent with a baseline set of privacy and security protections, HUD has published HMIS Data and Technical Standards. The standards ensure that every HMIS captures the information necessary to fulfill HUD reporting requirements while protecting the privacy and informational security of all homeless individuals.

Each CoC is responsible for ensuring compliance with the HMIS Data and Technical Standards. CoCs may do this by completing compliance assessments on a regular basis and through the development of an HMIS Policy and Procedures manual. In the questions below, CoCs are asked to indicate the frequency in which they complete compliance assessment.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

For each of the following HMIS privacy and security standards, indicate the frequency in which the CoC and/or HMIS Lead Agency complete a compliance assessment:

* Unique user name and password	At least Annually
* Secure location for equipment	At least Annually
* Locking screen savers	At least Annually
* Virus protection with auto update	At least Annually
* Individual or network firewalls	At least Annually
* Restrictions on access to HMIS via public forums	At least Annually
* Compliance with HMIS Policy and Procedures manual	At least Annually
* Validation of off-site storage of HMIS data	At least Annually

How often does the CoC Lead Agency assess compliance with the HMIS Data and Technical Standards?	At least Annually
How often does the CoC Lead Agency aggregate data to a central location (HMIS database or analytical database)?	Never
Does the CoC have an HMIS Policy and Procedures manual?	Yes
If 'Yes' indicate date of last review or update by CoC:	10/11/2010
If 'No' indicate when development of manual will be completed (mm/dd/yyyy):	

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2H. Homeless Management Information System (HMIS) Training

Instructions:

Providing regular training opportunities for homeless assistance providers that are participating in a local HMIS is a way that CoCs can ensure compliance with the HMIS Data and Technical Standards. In the section below, CoCs will indicate how frequently they provide certain types of training to HMIS participating providers.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the frequency in which the CoC or HMIS Lead Agency offers each of the following training activities:

* Privacy/Ethics training	At least Monthly
* Data Security training	At least Monthly
* Data Quality training	At least Monthly
* Using Data Locally	At least Quarterly
* Using HMIS data for assessing program performance	At least Semi-annually
* Basic computer skills training	At least Monthly
* HMIS software training	At least Monthly

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2I. Continuum of Care (CoC) Sheltered Homeless Population & Subpopulation: Point-In-Time (PIT) Count

Instructions:

Although CoCs are only required to conduct a one-day point-in-time count every two years, HUD strongly encourages CoCs to conduct a point-in-time count annually, if resources allow. The purpose of the point-in-time count is to further understand the number and characteristics of people sleeping in shelters, on the streets, or in other locations not meant for human habitation.

Below, CoCs will indicate how frequently they will conduct a point-in-time count and what percentage of their homeless service providers participate. CoCs are also asked to describe whether or not there were differences between the most recent point-in-time count and the one prior. CoCs should indicate in the narrative which years they are comparing.

How frequently does the CoC conduct a point-in-time count? annually (every year)

Enter the date in which the CoC plans to conduct its next point-in-time count: (mm/dd/yyyy) 01/27/2010

Indicate the percentage of homeless service providers supplying population and subpopulation data for the point-in-time count that was collected via survey, interview, and/or HMIS.

Emergency Shelter: 100%

Transitional Housing: 100%

Comparing the most recent point-in-time count to the previous point-in-time count, describe any factors that may have resulted in an increase, decrease, or no change in both the sheltered and unsheltered population counts (limit 1500 characters).

A slight increases in the number of homeless families, single women, and veteran populations were noted. Higher unemployment rates, increased numbers of veterans in the general population due to proximity to Ft. Bragg, increased collaboration with the VA and an increase of Veteran Support Initiatives throughout the county resulting in better data collection have also contributed to the increase. Each year our CoC increases its capacity to get a more inclusive count, increasing awareness of sub populations, surveying individuals experiencing homelessness regarding contributing factors to individual and family homelessness and locations where they stay when not in the CoC system.

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2J. Continuum of Care (CoC) Sheltered Homeless Population & Subpopulations:Methods

Instructions:

Accuracy of the data reported in point-in-time counts is vital. Data produced from these counts must be based on reliable methods and not on ¿guesstimates.¿ CoCs may use one or more methods to count sheltered homeless persons. This form asks CoCs to identify and describe which method(s) they use to conduct their point-in-time counts. The description should demonstrate how the method(s) was used to produce an accurate count.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the method(s) used to count sheltered homeless persons during the last point-in-time count:
(Select all that apply):

Survey Providers:	X
HMIS:	X
Extrapolation:	
Other:	

If Other, specify:

Describe the methods used by the CoC, as indicated above, to collect data on the sheltered homeless population during the most recent point-in-time count. Response should indicate how the method(s) selected above were used in order to produce accurate data (limit 1500 characters).

Announcments were made preceeding the date. Training on Forms was provided to all Service Providers and on call support was also made available during the PiT Period. Data was collected within a 24 hr period PIT Count. Forms were distributed to all service providers, e-mail attached forms were also sent, and phone contact support was provided during the count period. Each submission was verified by phone and submitted to the designated recipient who then entered the cummulative date and submitted to the CoC for review and approval. A 100% return was attained for our CoC.

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2K. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation:Data Collection

Instructions:

CoCs are required to produce data on seven subpopulations. These subpopulations are the chronically homeless, severely mentally ill, chronic substance abuse, veterans, persons with HIV/AIDS, victims of domestic violence, and unaccompanied youth (under 18). Subpopulation is required for sheltered homeless persons and optional for unsheltered homeless persons, with the exception of chronically homeless persons. Sheltered chronically homeless people are those living in emergency shelters only.

In the 2010 CoC NOFA, the definition of Chronically Homeless Person has been expanded to include families with at least one adult member who has a disabling condition. The family must meet all the other standards for chronic homelessness in Section 4.d. of the 2010 NOFA, Definitions and Concepts. Because the definition of chronically homeless at the time of either the 2009 or 2010 point-in-time count was still limited to individuals, CoCs are only reporting on that data on this section of the Exhibit 1.

CoCs may use a variety of methods to collect subpopulation information on sheltered homeless persons and may employ more than one in order to produce the most accurate data. This form asks CoCs to identify and describe which method(s) they use to gather subpopulation information for sheltered populations during the most recent point-in-time count. The description should demonstrate how the method(s) was used to produce an accurate count.

For additional instructions, refer to the 'Exhibit 1 Detailed Instructions' which can be accessed on the left-hand menu bar.

**Indicate the method(s) used to gather and calculate subpopulation data on sheltered homeless persons
(select all that apply):**

HMIS	X
HMIS plus extrapolation:	
Sample of PIT interviews plus extrapolation:	
Sample strategy:	
Provider expertise:	
Interviews:	
Non-HMIS client level information:	X
None:	
Other:	

If Other, specify:

Describe the methods used by the CoC, as indicated above, to collect data on the sheltered homeless subpopulations during the most recent point-in-time count. Response should indicate how the method(s) selected above were used in order to produce accurate data on all of the sheltered subpopulations (Limit 1500 characters).

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Service Providers provided subpopulation data for their clients on the PIT Count and Survey. This data was submitted to a central location where it was compiled and reviewed, then sent for verification by the CoC prior to submitting to the State. Training of Service Providers in the areas of subpopulation definitions was carried out prior to the PIT Count Date and CoC members were available to Service providers during the PIT Count Period.

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2L. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation: Data Quality

Instructions:

The data collected during point-in-time counts is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level, plan services and programs to appropriately address local needs, and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, provide Congress and OMB with information on services provided, gaps in service, and performance, and to inform funding decisions. Therefore, it is vital that the quality of data reported is high. CoCs may undertake one or more actions to improve the quality of the sheltered population data. This form asks CoCs to identify the steps they take to ensure data quality.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the steps taken by the CoC to ensure the quality of the data collected for the sheltered population count:
(select all that apply)

Instructions:	X
Training:	X
Remind/Follow-up	X
HMIS:	X
Non-HMIS de-duplication techniques:	
None:	
Other:	

If Other, specify:

If selected, describe the non-HMIS de-duplication techniques used by the CoC to ensure the data quality of the sheltered persons count (limit 1000 characters).

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2M. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation: Methods

Instructions:

Accuracy of the data reported in point-in-time counts is vital. Data produced from these counts must be based on reliable methods and not on ¿guesstimates.¿ CoCs may use one or more methods to count unsheltered homeless persons. This form asks CoCs to identify which method(s) they use to conduct their point-in-time counts.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the method(s) used to count unsheltered homeless persons: (select all that apply)

Public places count:	X
Public places count with interviews:	X
Service-based count:	X
HMIS:	X
Other:	

If Other, specify:

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2N. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation - Level of Coverage

Instructions:

CoCs may employ numerous approaches when counting unsheltered homeless people. CoCs first need to determine where they will look to count this population. They may canvass an entire area or only those locations where homeless persons are known to sleep for example. This form asks CoCs to indicate the level of coverage they incorporate when conducting their unsheltered count.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate where the CoC located the unsheltered homeless persons (level of coverage) that were counted in the last point-in-time count: Known Locations

If Other, specify:

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2O. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation - Data Quality

Instructions:

The data collected during point-in-time counts is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level, plan services and programs to appropriately address local needs, and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, provide Congress and OMB with information on services provided, gaps in service, and performance, and to inform funding decisions. Therefore, it is vital that the quality of data reported is high. CoCs may undertake one or more actions to improve the quality of the unsheltered population data. This form asks CoCs to identify the steps they take to ensure data quality.

All CoCs should be engaging in activities to reduce the occurrence of counting unsheltered persons more than once during a point-in-time count. These strategies are knows as de-duplication techniques. De-duplication techniques should always be implemented when the point-in-time count extends beyond one night or takes place during the day at service locations used by homeless people that may or may not use shelters. On this form, CoCs are asked to describe their de-duplication techniques. Finally, CoCs are asked to describe their outreach efforts to identify and engage homeless individuals and families.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the steps taken by the CoC to ensure the quality of the data collected for the unsheltered population count:
(select all that apply)

Training:	X
HMIS:	X
De-duplication techniques:	X
Other:	

If Other, specify:

Describe the techniques used by the CoC to reduce the occurrence of counting unsheltered homeless persons more than once during the most recent point-in-time count (limit 1500 characters):

All enumerators were assigned an area and a specific timeframe for that area. Service providers operating multiple programs (shelter/feeding) were assigned areas within their service area to avoid duplication counts. Utilizing service providers as enumerators helped with face recognition helped the CoC reduce duplication in counts.

Describe the CoCs efforts to reduce the number of unsheltered homeless households with dependent children. Discussion should include the CoCs outreach plan (limit 1500 characters):

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The CoC is dedicated to the creation of additional emergency shelter beds, transitional housing beds, permanent housing with supportive services beds, and affordable housing opportunities. A HOPE VI program has begun construction in 2010, additional affordable housing projects are in planery stages, and an addtional permanent housing program with supportive services is under development. The CoC continues to work on collaboration, HMIS usage, and direct referral to rapidly fill existing beds in all programs. A focus on prevention services in the CoC and assuring the CoC membership includes community agencies, organizations, and resources which focus on prevention and rapid rehousing efforts is a priority for the CoC. The CoC carries out an annual Homeless Connect Program to assist with increased information awareness, the local public school system sends out a McKinney Vento Brochure with every child in the system to increase parent awareness of local homeless programs for their families. We have a designated PATH worker for families with children near or experiencing homelessness who provides direct referal to appropriate resources. The CoC continues to develop outreach efforts through community engagement and Public Service Announcements etc..

Describe the CoCs efforts to identify and engage persons that routinely sleep on the streets or other places not meant for human habitation (limit 1500 characters):

Our CoC members engaged in feeding programs and our newly opened homeless daycenter are the primary methods of engaging our street population. During meals trained volunteers begin the work of getting to know persons visiting those programs and indentifying their needs. This is a non-office setting with people who are not situated behind a desk creating a more casual and comfortable setting similar to the Safe Haven concept of developing trust in a non program environment. This is a community wide effort with over a hundred volunteers on a rotation basis.

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3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 1: Create new permanent housing beds for chronically homeless persons.

Instructions:

Ending chronic homelessness continues to be a HUD priority. CoCs can do this by creating new permanent housing beds that are specifically designated for this population. In the 2010 NOFA, a chronically homeless person is defined as an unaccompanied homeless individual with a disabling condition or a family with at least one adult member who has a disabling condition who has either been continuously homeless for at least a year OR has had at least four episodes of homelessness in the past three (3) years.

On this section, CoCs are to describe their short-term and long-term plans for creating new permanent housing beds for chronically homeless persons that meet the definition in the 2010 CoC NOFA. In addition, CoCs will indicate the current number of permanent housing beds designated for chronically homeless persons. This number should match the number of beds reported in the 2010 Housing Inventory Count (HIC) and entered onto the Homeless Data Exchange (HDX). CoCs will then enter number of permanent housing beds they expect to have in place in 12-months, 5-years, and 10-years. These future estimates should be based on the definition of chronically homeless in the 2010 CoC NOFA.

For additional instructions, refer to the 'Exhibit 1 Detailed Instructions' which can be accessed on the left-hand menu bar.

Describe the CoCs short-term (12-month) plan to create new permanent housing beds for persons that meet HUD's definition of chronically homeless (limit 1000 characters).

The CoC jurisdiction received HPRP funds through a local government agency. Those funds will be used to create additional permanent housing beds for the those who are homeless and chronically homeless. The Cumberland County Mental Health Department is one of the selected subgrantees. The population they serve includes Chronic Homeless. The CoC will encourage participation of those experiencing chronic homelessness in those programs. The CoC will also continue exploring funding sources for additional permanent housing beds for the community. The CoC will seek agreement from local government to require developers and managers of affordable housing initiatives utilizing local, state, federal funds to actively participate in the CoC. This will allow more effective planning regarding set aside units, enhance communication of vacancys, and increase understanding of the needs of the chronically homeless.

Describe the CoCs long-term (10-year) plan to create new permanent housing beds for persons that meet HUD's definition of chronically homeless (limit 1000 characters).

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The CoC will address the permanent housing needs of the chronically homeless by continuing to implement funding received through the HPRP. As resources are restricted due to the current economic climate, the CoC will continue to explore innovative ways to compile funding sources need to create additional permanent housing beds in the community. The CoC will seek to develop an ad hoc committee whose specific purpose would be the planning and pre-development of permanent housing beds for the chronically homeless. Additionally, our CoC will continue to work and meet the goals of establishing additional beds through our 10 year Plan.

How many permanent housing beds do you currently have in place for chronically homeless persons? 37

In 12-months, how many permanent housing beds designated for the chronically homeless do you plan to have in place and available for occupancy? 45

In 5-years, how many permanent housing beds designated for the chronically homeless do you plan to have in place and available for occupancy? 50

In 10-years, how many permanent housing beds designated for the chronically homeless do you plan to have in place and available for occupancy? 55

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3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 2: Increase the percentage of participants remaining in CoC funded permanent housing projects for at least six months to 77 percent or more.

Instructions:

Increasing the self-sufficiency and stability of permanent housing program participants is an important outcome measurement of HUD's homeless assistance programs. Each SHP-PH and S+C project is expected to report the percentage of participants remaining in permanent housing for more than six months on its Annual Progress Report (APR). CoCs then use this data from all of its permanent housing projects to report on the overall CoC performance on form 4C. Continuum of Care (CoC) Housing Performance.

On this section, CoCs are to describe short-term and long-term plans for increasing the percentage of participants remaining in all of its CoC funded permanent housing projects (SHP-PH or S+C) to at least 77 percent. In addition, CoCs will indicate the current percentage of participants remaining in these projects, as indicated on form 4C, as well as the expected percentage in 12-months, 5-years, and 10-years. CoCs that do not have any CoC funded permanent housing projects (SHP-PH or S+C) for which an APR was required, should indicate this in both of the narratives below and enter ¿0¿ in the first numeric field below.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Describe the CoCs short-term (12-month) plan to increase the percentage of participants remaining in CoC funded permanent housing projects for at least six months to 77 percent or higher (limit 1000 characters).

1. Encourage homeless representation in the decision/advisory capacity with all permanent housing providers as well as the CoC;
2. Encourage case management and support service training; and
3. Continue to support the development of community resource guides to ensure particpants and providers are aware of resources available to them.

Describe the CoCs long-term (10-year) plan to increase the percentage of participants remaining in CoC funded permanent housing for at least six months to 77 percent or higher (limit 1000 characters).

The CoC will continue to look at program structures to involve more self-determination rather than mandatory engagement so that consumers feel more in control of their destiny. The CoC will continue to review current membership and supports in community and actively recruit for membership.

What is the current percentage of participants remaining in CoC funded permanent housing projects for at least six months?   100

In 12-months, what percentage of participants will have remained in CoC funded permanent housing projects for at least six months?   95

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In 5-years, what percentage of participants will have remained in CoC funded permanent housing projects for at least six months? 95

In 10-years, what percentage of participants will have remained in CoC funded permanent housing projects for at least six months? 95

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3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 3: Increase the percentage of participants in CoC funded transitional housing that move into permanent housing to 65 percent or more.

Instructions:

The ultimate objective of transitional housing is to help homeless families and individuals obtain permanent housing and self-sufficiency. Each SHP-TH project is expected to report the percentage of participants moving to permanent housing on its Annual Progress Report (APR). CoCs then use this data from all of its CoC funded transitional housing projects to report on the overall CoC performance on form 4C. Continuum of Care (CoC) Housing Performance.

On this section, CoCs are to describe short-term and long-term plans for increasing the percentage of transitional housing participants moving from its SHP-TH projects into permanent housing to at least 65 percent.   In addition, CoCs will indicate the current percentage of SHP-TH project participants moving into permanent housing as indicated on form 4C, as well as the expected percentage in 12-months, 5-years, and 10-years. CoCs that do not have any CoC funded transitional housing projects (SHP-TH) for which an APR was required, should indicate this in both of the narratives below and enter ¿0¿ in the first numeric field below.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Describe the CoCs short-term (12-month) plan to increase the percentage of participants in CoC funded transitional housing projects that move to permanent housing to 65 percent or more (limit 1000 characters).

The CoC will continue to encourage PH provider membership in the local CoC. Continue to develop clear policies and procesures concerning referral of TH resident to PH programs. Encourage continued development of affordable permanent housing units. CoC will continue to support providers of supportive services with training, best practices, and shared learning opportunities to better meet the needs of persons in transitional housing program. The CoC will continue to make the community aware of institutional barriers which impede the success of transtion like public transportation, subsidized childcare, affordable housing, living wages, underemployment and unemployment.

Describe the CoCs long-term (10-year) plan to increase the percentage of participants in CoC funded transitional housing projects that move to permanent housing to 65 percent or more (limit 1000 characters).

Continue to develop clear policies and procesures concerning referral of TH resident to PH programs. Encourage continued development of affordable permanent housing units. The CoC will explore the development of an employer network through the faith community, linking employers with homeless persons seeking employment as stable income creates more stability in housing.

What is the current percentage of participants in CoC funded transitional housing projects will have moved to permanent housing? 59

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In 12-months, what percentage of participants in CoC funded transitional housing projects will have moved to permanent housing? 65

In 5-years, what percentage of participants in CoC funded transitional housing projects will have moved to permanent housing? 75

In 10-years, what percentage of participants in CoC funded transitional housing projects will have moved to permanent housing? 75

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3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 4: Increase percentage of participants in all CoC funded projects that are employed at program exit to 20 percent or more.

Instructions:

Employment is a critical step for homeless persons to achieve greater self-sufficiency, which represents an important outcome that is reflected both in participants' lives and the health of the community. Each CoC funded project (excluding HMIS dedicated projects only) is expected to report the percentage of participants employed at exit on its Annual Progress Report (APR). CoCs then use this data from all of its non-HMIS projects to report on the overall CoC performance on form 4D. Continuum of Care (CoC) Enrollment in Mainstream Programs and Employment Information.

On this section, CoCs are to describe short-term and long-term plans for increasing the percentage of all CoC funded program participants that are employed at exit to at least 20 percent.   In addition, CoCs will indicate the current percentage of project participants that are employed at exit, as reported on 4D, as well as the expected percentage in 12-months, 5-years, and 10-years. CoCs that do not have any CoC funded non-HMIS projects (SHP-PH, SHP-TH, SHP-SH, SHP-SSO, or S+C TRA/SRA/PRA/SRO) which an APR was required, should indicate this in both of the narratives below and enter ¿0¿ in the first numeric field below.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Describe the CoCs short-term (12-month) plan to increase the percentage of participants in all CoC funded projects that are employed at program exit to 20 percent or more (limit 1000 characters).

Continue to develop employment eligibility criteria to distribute to CoC membership. Explore the development of resident incentive plans for TH and PH providers to utilize in their internal programs. Work with the Employment Security Commission and Workforce Development Center to conduct annual training for providers on up to date services provided by their respective agencies.

Describe the CoCs long-term (10-year) plan to increase the percentage of participants in all CoC funded projects that are employed at program exit to 20 percent or more (limit 1000 characters).

Explore the develop of Memorandums of Understanding with Employment Security Commission, Work First Employment Iniative and Workforce Development Center to create direct employment linkage services for homeless. Review best practices with Faith Community Employment Referral programs and seek to implement them locally.

What is the current percentage of participants in all CoC funded projects that are employed at program exit? 66

In 12-months, what percentage of participants in all CoC funded projects will be employed at program exit? 50

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In 5-years, what percentage of participants in all CoC funded projects will be employed at program exit? 55

In 10-years, what percentage of participants in all CoC funded projects will be employed at program exit? 60

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3A. Continuum of Care (CoC) Strategic Planning Objectives

Objective 5: Decrease the number of homeless households with children.

Instructions:

Ending homelessness among households with children, particularly for those households living on the streets or other places not meant for human habitation, is an important HUD priority. CoCs can accomplish this goal by creating new beds and/or providing additional supportive services for this population.

On this section, CoCs are to describe short-term and long-term plans for decreasing the number of homeless households with children, particularly those households that are living on the streets or other places not meant for human habitation. In addition, CoCs will indicate the current total number of households with children that was reported on their most recent point-in-time count. CoCs will also enter the total number of homeless households with children that they expect to be able to report in 12-months, 5-years, and 10-years.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Describe the CoCs short-term (12-month) plan to decrease the number of homeless households with children. (limit 1000 characters)

CoC will establish a sub committee to focus on the identification, eligibility criteria, and gaps in preventative homeless services. This committee will make recommendations for action steps related to barriers to access of these services and the establishment of services necessary but not currently meeting the needs of homeless households with children to avoid a homeless episode. This committee will explore the best practices of homeless prevention programs in communities with similar demographics. CoC will continue to support providers of supportive services with training, best practices, and shared learning opportunities to better meet the needs of homeless families. The CoC will continue to make community aware of institutional barriers which impede the success of such households in efforts to avoid homelessness experiences related to services such as public transportation, subsidized childcare, affordable housing, living wages, underemployment and unemployment.

Describe the CoCs long-term (10-year) plan to decrease the number of homeless households with children. (limit 1000 characters)

The CoC will explore the development of an employer network through the faith community, linking employers with homeless persons seeking employment. Stable income creates more stability in housing. The CoC will continue to explore the development of partnerships to increase the affordable housing network particularly for those in the 50 percent median range.

What is the current total number of homeless households with children, as reported on the most recent point-in-time count?   145

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In 12-months, what will be the total number of homeless households with children?   140

In 5-years, what will be the total number of homeless households with children?   120

In 10-years, what will be the total number of homeless households with children?   90

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3B. Continuum of Care (CoC) Discharge Planning

Instructions:

The McKinney-Vento Act requires that State and local governments have policies and protocols in place to ensure that persons being discharged from a publicly- funded institution or system of care are not discharged immediately into homelessness. To the maximum extent practicable, Continuums of Care should demonstrate how they are coordinating with and/or assisting in State or local discharge planning efforts to ensure that discharged persons are not released directly onto the streets, homeless shelters, or into other McKinney-Vento homeless assistance programs (SHP, S+C, or SRO). For each system of care, CoCs are to address the following:

What: Describe the efforts that the CoC has taken to ensure that persons are not routinely discharged into homelessness. For foster care, CoCs should be specifically addressing the discharge of youth aging out of foster care. If there is a State mandate that requires publicly funded institutions to ensure appropriate housing placement, which does not include homelessness, please indicate this in the applicable narrative.

Where: Indicate where persons routinely go upon discharge. Response should identify alternative housing options that are available for discharged persons other than the streets, shelters, and/or McKinney-Vento homeless assistance programs.

Who: Identify stakeholders and/or collaborating agencies that are responsible for ensuring that persons being discharged from a system of care are not routinely discharged into homelessness.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

For each system of care identified below, describe the CoC¿s efforts in coordinating with and/or assisting in the development of local discharge planning policies that ensure persons are not routinely discharged into homelessness, including the streets, shelters, or other McKinney-Vento homeless assistance housing programs. Please review all instructions to ensure that each narrative is fully responsive. (limit 1500 characters)

Foster Care (Youth Aging Out):

The Children's Services Division of Cumberland County's Department of Social Services is responsible for the foster care program within the local CoC. The Department has developed protocols for transitional living plans for youth being discharged from the foster care systems. Social workers are charged with intentionally creating and/or allowing opportunities for youth to experience growth-enhancing interactions with the community. Components of these protocols include the requirement that each youth will have a stable place to live upon discharge other than HUD McKinney-Vento funded beds, as attested by the Memorandum of Agreement executed with the local CoC. Protocols include utilizing primary and backup discharge plans to minimize the likelihood of homelessness resulting from a disrupted plan.

Health Care:

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The Cape Fear Valley Hospital System (CFVHS), the local health care agency, is accredited by the Joint Commission on Accreditation of Healthcare Organizations. The Accreditation process requires that hospitals establish procedures to address the needs for continuing care, treatment and services after discharge or transfer from the hospital. CFVHS is aware that appropriate placements do not include HUD McKinney-Vento funded programs, as indicated in the Memorandum of Agreement the hospital system has executed with the local CoC. When patients are transferred or discharged, appropriate information related to the care, treatment, and services provided is exchanged with the other service providers. To facilitate discharge or transfer, the hospital assesses the patient's needs, plans for discharge or transfer, facilitates the discharge or transfer, and helps to ensure the continuity of care, treatment and services is maintained. In addition, hospitals that receive Medicare reimbursements must comply with discharge planning requirements that include a written discharge planning process that reveals a thorough, clear, comprehensive process that is understood by hospital staff. The hospital must also identify at an early stage of hospitalization all patients who are likely to suffer adverse health consequences upon discharge if there is no adequate discharge planning.

Mental Health:

Requirements for discharge planning for individuals in state psychiatric hospitals and alcohol and drug abuse treatment centers (ADATCs) have been codified in administrative code (10A NCAC 28F .0209).   Each facility and area program must develop a process for coordination and continuity of care for patients, particularly around treatment issues and issues related to discharge planning and community care that involves placements other than HUD McKinney-Vento funded programs. The facility, area program, and individual must collaborate on the development of a discharge plan for each individual leaving a facility.   All individuals discharged have, at a minimum, intake appointments scheduled for community services prior to discharge. The area program's success at engaging individuals following discharge is monitored by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services on a quarterly basis. Additional policies related to individuals with long term hospitalizations (30+ day hospitalization or discharge from a long term unit) prohibit placement in shelters or other homeless conditions.
At the local level Cumberland County's Mental Department, as the Local Management Entity (LME) handles administration of mental health services in the community. The LME is aware that individuals are not to be released onto the street or into McKinney-Vento programs, as evidenced by the Memorandum of Agreement it has executed with the local CoC.

Corrections:

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Under the guidance and support of the Secretary of Corrections, there is now shared responsibility between the 3 branches of N.C. Department of Correction (DOC), other state level agencies, and the community for the incarcerated community member. Discharge placements in appropriate housing options other than HUD McKinney Vento funded programs are always sought.   The Division of Prisons has a computerized system of tracking aftercare planning in health services which will guarantee the appropriate staff has universal access to plans in progress at all times and will afford management the opportunity to review for quality those plans as well as gather data for future planning of service provision.

At the local level, the Sheriff's Department is the responsible entity for the local jail system. Initial discussions have begun with jail officials, County Legal, and the CoC to explore viable options for implementing a formalized discharge planning in this area that does not conflict with each individual¿s court mandated order of release.

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3C. Continuum of Care (CoC) Coordination

Instructions:

A CoC should regularly assess its local homeless assistance system and identify shortcomings and unmet needs. One way in which a CoC can improve itself is through long-term strategic planning. CoCs are encouraged to establish specific goals and then implement short-term action steps. Because of the complexity of existing homeless systems and the need to coordinate multiple funding sources and priorities, there are often multiple long-term strategic planning groups. It is imperative for CoCs to coordinate, as appropriate, with each of these existing strategic planning groups to meet local needs.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Does the Consolidated Plan for the jurisdiction(s) that make up the CoC include the CoC strategic plan goals for addressing homelessness?

Yes

If yes, list the goals in the CoC strategic plan that are included in the Consolidated Plan:

The goal of the Continuum of Care is to address the needs of the homeless with a direct plan of action to increase housing and services available in the community. The Cumberland County Consolidated Plan lists the 2 core goals of the local continuum of care related to addressing homelessness in the community as follows:
Goal 1: Increase available funding for local homeless service/housing providers. This Goal also addresses 10-Year Plan to End Homelessness Priority 3 (Identify additional funding sources for local programs); and
Goal 2: Provide housing options by creating transitional housing beds for the homeless (chronic and/or families).
This Goal also addresses 10-Year Plan to End Homelessness Priority 9 (Develop Additional Affordable Housing Options).

Describe how the CoC is participating in or coordinating with the local Homeless Prevention and Rapid re-housing Program (HPRP) initiative, as indicated in the substantial amendment to the Consolidated Plan 2009 Action Plan (1500 character limit):

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The receipt of HPRP funds by the City entitlement jurisdiction have served as a much needed financial resource in community to provide additional housing options for the homeless and those at risk of homelessness. Continued coordination between the City, as the Grantee, and CoC membership is on-going as two member agencies serve as the entry point for receipt of HPRP funding. Other CoC member agencies serve as a source of referral by sending all clients with a potential need to the ¿entry point¿ agencies for further determination of eligibility. Uniform qualification standards are shared with all members of the CoC as a means of ensuring that CoC members are aware of the basic qualification standards for receipt of the funding. This method of coordination enables member agencies to be kept abreast of the funding that is available as well as eliminating the need for clients to travel to multiple agencies in order to determine eligibility for assistance.

Describe how the CoC is participating in or coordinating with any of the following: Neighborhood Stabilization Program (NSP) initiative, HUD VASH, or other HUD managed American Reinvestment and Recovery Act programs (2500 character limit)?

The Fayetteville /Cumberland County continuum of care jurisdiction is not a recipient of Neighborhood Stabilization Program (NSP) funds through a direct allocation. As a means of addressing 10 Year Planning goals, both the City of Fayetteville and Cumberland County participating jurisdictions, which are active members of the local Continuum of Care Planning Council (COCPC), sought NSP funding through the state's competitive offering. Unfortunately, neither application was successful. Several nonprofit member agencies of the CoC have been successful in applying to the State for NSP funding and have been successful. The agencies are in the beginning stages of acquiring properties; however, once renovated the units will serve as additional affordable housing options for those transitioning into permanent housing. This past year, the CoC also was fortunate to receive an additional allocation of HUD VASH vouchers to assist homeless veterans; bringing the total VASH vouchers in the community to 45.

Indicate if the CoC has established policies that require homeless assistance providers to ensure all children are enrolled in school and connected to appropriate services within the community?   Yes

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If yes, please describe the established policies that are in currently in place.

The CoC has established minimum standards for entities/facilicites/organizations providing services to the homeless. It requires that those providing services to children have written internal policies which require the following:
The Service Provider is required to contact the designated Cumberland County School Homeless Social Worker within 2 business days regarding school enrollement and appropriate services such as transportation, basic school supplies, and other resources provided by the School system on behalf of each school age child entering their programs. Documentation of such interventions should be in writing and maintained on site.

Describe the CoC's efforts to collaborate with local education agencies to assist in the identification of homeless families and inform them of their eligibility for McKinney-Vento education services. (limit 1500 characters)

CoC members began active conversations with the local school system eight years ago resulting in the establishment of a dedicated Homeless Program Coordinator within the schools. A Transportation plan was developed at this time which is extremely effective in assuring that within 24 hours of request, the student's transportation to and from their school at the time of homelessness. The School System developed an intensive informational brochure detailing all McKinney-Vento education services as well as points of contacts for other homeless services. This is distributed throughout the CoC and throughout the Schools system. The School System Coordinator is an active CoC participant.

Describe how the CoC has, and will continue, to consider the educational needs of children when families are placed in emergency or transitional shelter. (limit 1500 characters)

The CoC will begin the implementation of including performance standards around the educational needs of children for those providers working with this population. A committee will be established which will oversee the educational need of children, policies related to those needs, and assess potential changes and local issues/concerns on behalf of the children experiencing homelessness.

Describe the CoC's current efforts to combat homelessness among veterans. Narrative should identify organizations that are currently serving this population, how this effort is consistent with CoC strategic plan goals, and how the CoC plans to address this issue in the future.(limit 1500 characters)

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Concentrated outreach efforts by the CoC have generated interest from parties with specific goals of meeting the needs of veterans in the community. This past year, the following activities were accomplished in support of providing housing and services for veterans:

1) Coordinated efforts between our local Mental Health Agency, Public Housing Authority, and the Veterans Administration resulted in the receipt of 45 additional Section 8 vouchers for homeless veterans through the VASH program.

2) The addition of three nonprofits interested in providing services/housing for homeless veterans to the CoC membership. The CoC will continue to partner with the local VA and other community resources to provide technical assistance to new membership agencies, as needed.

3) The submission of a new permanent housing project for veteran women in this year¿s Continuum of Care Homeless Assistance funding cycle that will provide at least 14 additional permanent housing beds for veterans.

4) In support of the local 10 Year Plan to End Homelessness, both the City and the County entitlement jurisdictions have included in their respective consolidated plans specific goals geared towards increasing housing and services for the homeless. In addition, the City and County¿s commitment of CDBG/HOME resources will contribute towards the development of 20 additional transitional housing units for veterans.

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3D. Hold Harmless Need (HHN) Reallocation

Instructions:

Continuum of Care (CoC) Hold Harmless Need (HHN) Reallocation is a process whereby an eligible CoC may reallocate funds in whole or in part from SHP renewal projects to create one or more new permanent housing projects and/or a new dedicated HMIS project. A CoC is eligible to use the HHN Reallocation process if it's Final Pro Rata Need (FPRN) is based on it's HHN amount or if it is a newly approved merged CoC that used the Hold Harmless Merger process during the 2010 CoC Registration process.

 The HHN Reallocation process allows eligible CoCs to fund new permanent housing or dedicated HMIS projects by transferring all or part of funds from existing SHP grants that are eligible for renewal in 2010 into a new project. New reallocated permanent housing projects may be for SHP (one, two, or three years), S+C (five or ten years), and Section 8 Moderate Rehabilitation (ten years). New reallocated HMIS projects may be for one, two or three years.

 A CoC who¿s FPRN is based on its Preliminary Pro Rata Need (PPRN) is not eligible to reallocate existing projects through this process and should therefore always select "No" to the questions below.

 For additional instructions, refer to the 'Exhibit 1 Detailed Instructions' which can be accessed on the left-hand menu bar.

Does the CoC want to reallocate funds from one or more expiring SHP grant(s) into one or more new permanent housing or dedicated HMIS project(s)? No

Is the CoCs Final Pro Rata Need (FPRN) based on either its Hold Harmless Need (HHN) amount or the Hold Harmless Merger process? Yes

CoCs who are in PPRN status are not eligible to reallocate projects through the HHN reallocation process.

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4A. Continuum of Care (CoC) 2009 Achievements

Instructions:

In 2009, CoCs were asked to propose numeric achievements for each of HUD¿s five national objectives related to ending chronic homelessness and moving families and individuals to permanent housing. In 2010, CoCs will report on their actual accomplishments versus what was proposed in the previous application.

In the column labeled ¿2009 Proposed Numeric Achievement¿, enter the number of beds, percentage, or number of households that was entered in the 2009 application for the applicable objective. In the column labeled ¿Actual Numeric Achievement¿, enter the actual number of beds/percentage/number of households that the CoC has reached to date for each objective.

CoCs will also indicate whether or not they submitted an Exhibit 1 in 2009. If a CoC did not submit an Exhibit 1 in 2009, they should enter ¿No¿ to the question below. Finally, CoCs that did not fully meet the proposed numeric achievement for any of the objectives should indicate the reason in the space provided below.

For additional instructions, refer to the 'Exhibit 1 Detailed Instructions' which can be accessed on the left-hand menu bar.

Objective	2009 Proposed Numeric Achievement:		Actual Numeric Achievement	
Create new permanent housing beds for the chronically homeless.	5	Beds	37	Beds
Increase the percentage of homeless persons staying in permanent housing over 6 months to at least 77%.	75	%	85	%
Increase the percentage of homeless persons moving from transitional housing to permanent housing to at least 65%.	65	%	60	%
Increase percentage of homeless persons employed at exit to at least 20%	50	%	64	%
Decrease the number of homeless households with children.	5	Households	0	Households

Did CoC submit an Exhibit 1 application in 2009?   Yes

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If the CoC was unable to reach its 2009 proposed numeric achievement for any of the national objectives, provide a detailed explanation.

The CoC did not meet its projected increase of persons moving from transitional housing to permanent housing. One project had an unfortunant series of difficult circumstances in its attempt to target parents with chronic long term substance abuse and mental health issues. Even with family drug court support this project saw a significant decrease in program particpants successfully transitioning into perm. housing. The CoC did not reach its goal of decreasing the number of households with children experiencing homelessness. A high unemployment rate and local economy challenges are contributing factors to the rise in the numbers of homeless families and are not within the control of the CoC.

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4B. Continuum of Care (CoC) Chronic Homeless Progress

Instructions:

HUD must track each CoCs progress toward ending chronic homelessness. In the 2010 NOFA, a chronically homeless person is defined as an unaccompanied homeless individual with a disabling condition or a family with at least one adult member who has a disabling condition who has either been continuously homeless for at least a year OR has had at least four episodes of homelessness in the past three (3) years.

This section asks each CoC to track changes year to year in the number of chronically homeless persons as well the number of beds available for this population. CoCs will complete this section using data reported for the 2008, 2009, and 2010 (if applicable) Point-In-Time counts as well as data collected and reported on for the Housing Inventory Counts (HIC) for those same years. For each year, indicate the total unduplicated point-in-time count of the chronically homeless as reported in that year. For 2008 and 2009, this number should match the number indicated on form 2J of the respective year¿s Exhibit 1. For 2010, this number should match the number entered on the Homeless Data Exchange (HDX).

Next, enter the total number permanent housing beds that were designated for the chronically homeless in 2008 and 2009, as well as the number of beds that are currently in place. For 2010, this number of beds should match the number of beds reported in the 2010 HIC and entered onto the Homeless Data Exchange (HDX). CoCs should include beds designated for this population from all funding sources.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Indicate the total number of chronically homeless persons and total number of permanent housing beds designated for the chronically homeless persons in the CoC for 2008, 2009, and 2010.

Year	Number of CH Persons	Number of PH beds for the CH
2008	127	0
2009	115	0
2010	45	37

Indicate the number of new permanent housing beds in place and made available for occupancy for the chronically homeless between February 1, 2009 and January 31, 2010.   0

Identify the amount of funds from each funding source for the development and operations costs of the new permanent housing beds designated for the chronically homeless, that were created between February 1, 2009 and January 31, 2010.

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Cost Type	HUD McKinney-Vento	Other Federal	State	Local	Private
Development	$0	$0	$0	$0	$0
Operations	$0	$248,592	$0	$0	$0
Total	$0	$248,592	$0	$0	$0

If the number of chronically homeless persons increased or if the number of permanent beds designated for the chronically homeless decreased, please explain (limit 750 characters):

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4C. Continuum of Care (CoC) Housing Performance

Instructions:

All CoC funded non-HMIS projects are required to submit an Annual Progress Report (APR) within 90 days of a given operating year. To demonstrate performance on participants remaining in permanent housing for more than six months, CoCs must use data on all permanent housing projects that should have submitted an APR for the most recent operating year. Projects that did not submit an APR on time must also be included in this calculation.

Complete the table below using data entered for Question 12(a) and 12(b) for the most recently submitted APR for all permanent housing projects (SHP-PH or S+C TRA/SRA/SRO/PRA) within the CoC that should have submitted one. Enter totals in field¿s a-e. The ¿Total PH %¿ will be auto-calculated after selecting ¿Save.¿ Please note, the percentage is calculated as c. +d. divided by a. +b. multiplied by 100. The last field (e.) is excluded from the calculation.

CoCs that do not have any SHP-PH or S+C projects for which an APR was required should select ¿No¿ to the question below. This only applies to CoCs that do not have any CoC funded permanent housing projects currently operating within their CoC that should have submitted an APR.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Does the CoC have any permanent housing projects (SHP-PH or S+C) for which an APR was required to be submitted?   Yes

Participants in Permanent Housing (PH)	
a. Number of participants who exited permanent housing project(s)	2
b. Number of participants who did not leave the project(s)	14
c. Number of participants who exited after staying 6 months or longer	2
d. Number of participants who did not exit after staying 6 months or longer	12
e. Number of participants who did not exit and were enrolled for less than 6 months	2
TOTAL PH (%)	88

Instructions:

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HUD will also assess CoC performance in moving participants in SHP transitional housing programs into permanent housing. To demonstrate performance, CoCs must use data on all transitional housing projects that should have submitted an APR for the most recent operating year. Projects that did not submit an APR on time must also be included in this calculation.

Complete the table below using cumulative data entered for Question 14 on the most recently submitted APR for all transitional housing projects (SHP-TH) within the CoC that should have submitted one. Once amounts have been entered into a & b, select ¿Save.¿ The ¿Total TH %¿ will be auto-calculated. Please note, the percentage is calculated as b. divided by a., multiplied by 100. CoCs that do not have any SHP-TH projects for which an APR was required should select ¿No¿ to the question below. This only applies to CoCs that do not have any CoC funded transitional housing projects currently operating within their CoC that should have submitted an APR.

For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Does CoC have any transitional housing projects (SHP-TH) for which an APR was required to be submitted? Yes

Participants in Transitional Housing (TH)	
a. Number of participants who exited TH project(s), including unknown destination	49
b. Number of SHP transitional housing participants that moved to permanent housing upon exit	29
TOTAL TH (%)	59

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4D. Continuum of Care (CoC) Enrollment in Mainstream Programs and Employment Information

Instructions:

 HUD will assess CoC performance in assisting program participants with accessing mainstream services to increase income and improve outcomes such as health, education, safety, and/or economic outcomes of homeless persons. To demonstrate performance, CoCs must use data on all non-HMIS projects (SHP-PH, SHP-TH, SHP-SH, SHP-SSO, S+C TRA/SRA/PRA/SRO) that should have submitted an APR for the most recent operating year. Projects that did not submit an APR on time must also be included in this calculation.

 Complete the table below using cumulative data entered for Question 11 on the most recently submitted APR for all non-HMIS projects within the CoC that should have submitted one. Each CoC shall first indicate the total number of exiting adults. Next, enter the total number of adults that exited CoC non-HMIS project with each source of income. Once amounts have been entered, select ¿Save¿ and the percentages will be auto-calculated. CoCs that do not have any non-HMIS projects for which an APR was required should select ¿No¿ to the question below. This only applies to CoCs that do not have any CoC funded non-HMIS projects currently operating within their CoC that should have submitted an APR.

 For additional instructions, refer to the ¿Exhibit 1 Detailed Instructions¿ which can be accessed on the left-hand menu bar.

Total Number of Exiting Adults: 51

Mainstream Program	Number of Exiting Adults	Exit Percentage (Auto-calculated)	
SSI	2	4	%
SSDI	1	2	%
Social Security	0	0	%
General Public Assistance	0	0	%
TANF	5	10	%
SCHIP	0	0	%
Veterans Benefits	1	2	%
Employment Income	31	61	%
Unemployment Benefits	0	0	%
Veterans Health Care	0	0	%
Medicaid	24	47	%
Food Stamps	25	49	%
Other (Please specify below)	5	10	%
CHILD SUPPORT			
No Financial Resources	4	8	%

The percentage values will be calculated by the system when you click the "save" button.

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Does the CoC have any non-HMIS projects for which an APR was required to be submitted?   No

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4E. Continuum of Care (CoC) Participation in Energy Star and Section 3 Employment Policy

Instructions:

HUD promotes energy-efficient housing. All McKinney-Vento funded projects are encouraged to purchase and use Energy Star labeled products. For information on Energy Star initiative go to: http://www.energystar.gov

A "Section 3 business concern" is one in which: 51% or more of the owners are section 3 residents of the area of service; or at least 30% of its permanent full-time employees are currently section 3 residents of the area of service, or within three years of their date of hire with the business concern were section 3 residents; or evidence of a commitment to subcontract greater than 25% of the dollar award of all subcontracts to businesses that meet the qualifications in the above categories is provided. The "Section 3 clause" can be found at 24 CFR Part 135.

Has the CoC notified its members of the Energy Star Initiative?   Yes

Are any projects within the CoC requesting funds for housing rehabilitation or new construction?   No

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4F. Continuum of Care (CoC) Enrollment and Participation in Mainstream Programs

It is fundamental that each CoC systematically help homeless persons to identify, apply for, and follow-up to receive benefits under SSI, SSDI, TANF, Medicaid, Food Stamps, SCHIP, WIA, and Veterans Health Care as well as any other State or Local program that may be applicable.

Does the CoC systematically analyze its projects APRs in order to improve access to mainstream programs? Yes

If 'Yes', describe the process and the frequency that it occurs.

The CoC Ranking Committee reviews the progress of each applicant submitting an application during the SuperNOFA process at least on an annual basis. During this review, particular attention is paid to the percentage of residents that transitioned to and/or maintained permanent housing as well as the number and percentage of residents that have accessed mainstream resources at program exit. Points are given to each applicant based on the percentages reported in the APR; with the highest percentages receiving hte highest points. The results of this review are used to assess those areas in which providers are encountering difficulty in assisting its clients in accessing; and are reported to the CoC Planning Committee for follow-up.

Does the CoC have an active planning committee that meets at least 3 times per year to improve CoC-wide participation in mainstream programs? Yes

If "Yes", indicate all meeting dates in the past 12 months.

The CoC Planning Committee meets quarterly to conduct regular business and on a monthly basis as needed to discuss issues pertinent to improving CoC wide participation in mainstream programs.
1/13/2010,1/27/2010,6/24/2010,10/26/2010

Does the CoC coordinate with the State Interagency Council on Homelessness to reduce or remove barriers to accessing mainstream services? No

**Does the CoC and/or its providers have specialized staff whose primary responsibility
is to identify, enroll, and follow-up with homeless
persons on participation in mainstream programs?** Yes

If yes, identify these staff members Provider Staff

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Does the CoC systematically provide training on how to identify eligibility and program changes for mainstream programs to provider staff.   Yes

If "Yes", specify the frequency of the training.   annually (every year)

Does the CoC use HMIS as a way to screen for mainstream benefit eligibility?   No

If "Yes", indicate for which mainstream programs HMIS completes screening.

Inquiry with our CoC HMIS provider, has determined that the HMIS system does not currently screen for mainstream programs. However, the HMIS can be programmed to conduct screening with additional programing. The CoC will explore obtaining qualifying criteria for each program and forwarding the information to the HMIS provider in the upcoming year.

Has the CoC participated in SOAR training?   Yes

If "Yes", indicate training date(s).

August 28-29, 2007;
June 25-26, 2008; and
August 4-5, 2008.

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4G: Homeless Assistance Providers Enrollment and Participation in Mainstream Programs

Indicate the percentage of homeless assistance providers that are implementing the following activities:

Activity	Percentage
1. Case managers systematically assist clients in completing applications for mainstream benefits. **1a. Describe how service is generally provided:**	100%
Upon entry to programs clients current contact with mainstream benefit programs is assessed and reviewed for other programs that the client may meet eligibiltiy criteria. Case managers may accompany the clients during the application process or request the application where appropriate and assist the client on site to help with greater application accuracy and to assist with any questions or follow up that may be necessary for the client to access mainstream benefits. Releases of information between all parties are traditionally authorized during this process to enhance communication between all parties involved for purpose of advocacy, accuracy, and successful applications.	

Activity	Percentage
2. Homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.	100%

Activity	Percentage
3. Homeless assistance providers use a single application form for four or more mainstream programs: **3.a Indicate for which mainstream programs the form applies:**	0%
Not applicable	

Activity	Percentage
4. Homeless assistance providers have staff systematically follow-up to ensure mainstream benefits are received.	100%
4a. Describe the follow-up process:	
Case managers are responsible to verify that applications were received and follow up on the approval process, additional information needed, and eligibility criteria should occur through out the process.	

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Continuum of Care (CoC) Project Listing

Instructions:

 IMPORTANT: Prior to starting on the CoC Project Listing, CoCs should carefully review the CoC Project Listing Instructions and the CoC Project Listing training module, both of which are available at www.hudhre.info/esnaps.

 To upload all Exhibit 2 applications that have been submitted to this CoC, click on the "Update List" button. This process will take longer based upon the number of projects that need to be located. The CoC can either work on other parts of Exhibit 1 or it can log out of e-snaps and come back later to view the updated list. To review a project, click on the next to each project to view project details.

EX1_Project_List_Status_field List Updated Successfully

Project Name	Date Submitted	Grant Term	Applicant Name	Budget Amount	Proj Type	Prog Type	Comp Type	Rank
The Step-Up Semi-...	2010-11-17 10:01:...	1 Year	The Salvation Arm...	35,594	Renewal Project	SHP	TH	F
Leath Commons 2010	2010-11-14 18:10:...	1 Year	Cumberland IHN	120,588	Renewal Project	SHP	PH	F
Ashton Woods 2010	2010-11-16 21:26:...	1 Year	Cumberland IHN	262,736	Renewal Project	SHP	TH	F
Robin's Meadow Tr...	2010-11-17 11:57:...	1 Year	Cumberland County...	84,134	Renewal Project	SHP	TH	F
Women Veterans Pe...	2010-11-12 18:06:...	1 Year	Step & Stages Dis...	47,844	New Project	SHP	PH	P1
The Care Center T...	2010-11-17 09:58:...	1 Year	The Salvation Arm...	148,015	Renewal Project	SHP	TH	F
The Bonanza Perma...	2010-11-17 09:56:...	1 Year	The Salvation Arm...	80,057	Renewal Project	SHP	PH	F

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