Before Starting the CoC Application

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

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

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

- 1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
- 3. All information provided to ensure it is correct and current.
- 4. Responses provided by project applicants in their Project Applications.
- 5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal ULID's funding determination.

appeal HÚD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

1A-3. CoC Designation: CA

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

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1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation—Participation in Coordinated Entry.
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.
	In the chart below for the period from May 1, 2022 to April 30, 2023:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	No
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	Yes	No
9.	Law Enforcement	Yes	Yes	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	Yes	No
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

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16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	No
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	No	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	Organizations serving homeless Veterans	Yes	Yes	Yes
35.	Legal Aid	Yes	Yes	Yes
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1B-2.	Open Invitation for New Members.
	NOFO Section V.B.1.a.(2)
	Describe in the field below how your CoC:
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

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1) The CoC holds monthly Governance Board (GB) calls, & our 13 Regional Committees (RCs) also hold regular meetings, inviting stakeholders to attend. Any person may attend, ask questions, & provide input on discussion topics. The CoC maintains an email distribution list, regularly engaging local stakeholders to sign-up to join (current list has 338 stakeholders). The list delivers news, asks for feedback, connects people to resources, & announces policy changes/funding competitions. Staff regularly engage agencies interested in deeper involvement, inviting them to attend GB meetings, review website materials, & connect locally with RCs. Staff & RC leadership engage stakeholders to build new/stronger partnerships. 2) The CoC communicates in multiple ways to ensure people have access to relevant information, including recorded webinars, phone calls, posted website materials in multiple formats, & an email address to contact staff directly to connect to resources. The CoC encourages people with lived experience (PLE) to get involved in decisionmaking & leadership roles. The CoC engages PLE at events, using stakeholders & peers to invite/encourage involvement. The Nominations Committee engages PLE to join the GB as voting members annually. The CoC formed the Lived Expertise Advisory Council (LEAC) in 07/21. Staff & LEAC members outreach PLE across the CoC's geographic area throughout the year to join the LEAC, which reviews & evaluates CoC policies & procedures to ensure equity & effectiveness & seeks opportunities to educate stakeholders & elected officials. Two co-chairs lead the LEAC's work & recruit recent/current PLE to help the CoC make informed decisions. The CoC uses the closed captioning function on web platforms during meetings to ensure hearing impaired individuals can fully participate. 3) The RE Subcommittee (RES) engages diverse organizations to collaborate with the CoC. The RES holds an annual dialogue series, engaging a diverse array of panelists to share their expertise on topics such as the effects of environmental racism on homelessness, language access for Hispanic/Latina/e/o people experiencing homelessness. & the impact of declining affordable housing on marginalized homeless populations.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.
	NOFO Section V.B.1.a.(3)
	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

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1) The CoC has an inclusive governance structure & conducts open meetings to solicit feedback from stakeholders. The CoC has multiple levels of coordination & options to participate, including regional & CoC-wide groups. It gathers & incorporates diverse thinking into planning in four major ways: subcommittees, surveys, training, & direct engagement. The GB includes representation from each of its 13 RCs & at-large members representing PLE, sector leaders (DV, PHAs, affordable housing, healthcare), & NC govt depts (DHHS, DPS, DEdu). Membership breadth ensures the CoC incorporates & considers diverse perspectives in all planning & policy-making. Subcommittees include people across the CoC to share local efforts & engage directly in planning to recommend strategies/priorities to the GB. The RES & LEAC bring diverse perspectives from BIPoC & PLE. The CoC vets every policy/planning document through subcommittees, surveys, and/or individual stakeholder conversations, incorporating ideas & updates prior to approval by the GB. Through regular training, the CoC provides information on policies/strategies & offers opportunities for attendees to express local challenges to help the GB update them to better serve HHs for greater impact. 2) The CoC uses its website/email list to advertise CoC meetings. It publishes all materials prior to GB meetings & incorporates a feedback loop, typically presenting policies several times prior to an official vote, soliciting feedback from members & encouraging members to solicit local feedback. The CoC holds all GB & subcommittee meetings virtually with a phone option, allowing people from across the CoC to participate. 3) The CoC communicates in multiple ways to ensure people have access to relevant information, including recorded meetings, phone calls, posted website materials in multiple formats, & an email address to contact staff to connect to resources. The CoC uses closed captioning on web platforms to ensure hearing impaired people can fully participate. 4) The CoC's inclusive design allows input throughout the process to improve its approaches. Subcommittees create policy & recommend strategies/initiatives. They provide reports to the GB, asking for feedback & official approval. The GB tasks subcommittees to develop procedures for approved policies & strategies, evaluating progress through data & local stakeholder reporting, shifting direction based on feedback from people implementing them locally.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications-the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	

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1,3) Staff emailed stakeholders upon release of the FY23 NOFO that opens the competition & updated the CoC's website with competition information & how to apply for funding. Regional Committee (RC) leadership forwarded this email to their local email distribution lists. The CoC advertises funding opportunities on its website year-round with CoC staff available for one-on-one consults. The CoC announced an intent to apply (ITA) process at public, monthly GB meetings (February-July 2023), on its website, through its email distribution list (338 stakeholders), & in RC meetings & local email lists. CoC staff held a webinar for agencies interested in applying for new FY23 CoC Program projects on 02/22/23, recording & posting the webinar on the CoC website. The webinar explained eligible activities, provided an overview of the application process, defined CoC & HUD thresholds & standards, & encouraged new agencies to submit an ITA & schedule a staff call to discuss the proposed project. The CoC received 11 ITAs including 7 agencies never having received annual CoC Program funds. The CoC posted approved FY23 CoC Program Funding Priorities (on 04/04/23) & new & renewal scorecards (on 04/04/23) to the website prior to the FY23 NOFO release. Staff assisted agencies to understand project eligibility, CoC priorities, & regional needs. 2) The CoC posted instructions for new & renewal applicants on 07/13/23, highlighting required documents, timelines, & links for submission. Staff emailed stakeholders on 07/13/2023 through its email distribution list with links to CoC competition materials & timelines, encouraging RC leadership to forward information to stakeholders. 4) The CoC communicates in multiple ways to ensure people have access to information, including recorded webinars, conference/individual calls, written materials in multiple formats (Word, pdf, others), posting materials to a public website, & an email where people can contact staff directly to schedule meetings/access resources.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
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- Frequently Asked Questions

1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.
	NOFO Section V.B.1.b.
	In the chart below:
1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.

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

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18.	
1C-2.	CoC Consultation with ESG Program Recipients.
	NOFO Section V.B.1.b.
	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

1) NC DHHS serves as the ESG Program Recipient in NC. CoC staff work closely with the NC ESG Office (ESGO) to set the funding formula & design an application process to subgrant funds fairly across the CoC's 13 RCs. In 2022-23, CoC staff worked with the ESGO to update its RFP process & funding application. CoC staff joined a representative workgroup (current grantees, CoC Leads, ESGO staff) to review all aspects of the RFP to help CoCs better evaluate agencies applying for funding. This workgroup's feedback facilitated the creation of an updated application to enhance the ability to measure performance, services, equity initiatives, & administrative capacity. The CoC holds monthly calls with the ESGO to discuss current challenges, technical assistance needs, & funding competition processes. The CoC & ESGO agree on the next steps and work together to address challenges. 2) During monthly calls, the ESGO shares current subrecipient monitoring findings & works together to develop performance improvement plans with CoC staff taking a lead role on technical assistance. As part of the annual ESG competition, ESGO & CoC staff identify projects with programmatic design & performance standards issues through review of policies & procedures & CAPERs/APRs, making funding conditional upon participation in technical assistance with CoC staff. 3,4) The CoC publishes annual PIT/HIC data on its website, posting CoC-, regional-, & county-level analysis. The website maintains PIT/HIC data since 2009. Upon request, staff provide more detailed information through email & virtual meetings to Con Plan jurisdictions. CoC staff work closely with state partners such as NC DHHS, NC Commerce, NC Public Safety, NC Housing Finance Agency, & the NC Interagency Council on Coordinating Homeless Programs (ICCHP) who oversee many of the processes of the NC Con Plan. Staff meet regularly with jurisdictional staff, providing PIT/HIC & HMIS data to fulfill Con Plan requirements & collaborate on strategy creation & updates related to homeless or at-risk of homelessness populations.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

1C-4.	CoC Collaboration Related to Children and Youth-SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

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

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

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

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

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CoC stakeholders & providers partner at the local level with early childhood service providers & work closely with Community Action Agencies (CAA), which have formal agreements to connect families with Early Head Start & Head Start. Many CAA join monthly RC meetings to share resources & connect with providers serving families with school age children. The CoC funds 3 CAA to provide RRH resources to families with children. CoC staff participate on statewide committees to provide homeless children access to development resources, childcare, & PH. State-level professionals from NC Division of Child Development & Early Education, NC Child Care Development Fund, NC Infant MH Assoc., NC State University, NC Dept. of Public Instruction, & NC DHHS join this initiative. The SEA Director serves as an at-large member of the CoC GB, providing resources/training to members & connecting RCs to LEAs. CoC staff participate in SEA monthly & annual meetings, providing information to LEAs on CoC processes, resources, & CE education, highlighting ways to connect families with children to housing & services. In 01/23, HMIS Lead staff provided an overview of the annual PIT count & solicited feedback & volunteers on locating youth experiencing homelessness on the night of the count to LEAs. RCs invite LEAs to play a role in the Unsheltered Access Coordination planning & implementation process to identify, engage, & connect people experiencing unsheltered homelessness to services & housing through the CE system. LEAs play an essential role in locating homeless youth, conducting CE assessments. & making referrals to regional by-name lists. LEAs serve on committees, provide insight & connection to youth resources outside the homeless service system. The CoC includes school districts as part of Sharing Agreements in the CE system, allowing them to fully participate in local case conferencing. The CoC collaborates with the NC Dept. of Public Instruction (DPI) which oversees the state's Head Start, Early Head Start, & Public Pre-K programs. Per a CoC agreement, the Head Start Coordinator at DPI will provide an initial training to the GB in 10/23 with follow-up technical assistance in the 13 RCs as needed through the fall.

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

NOFO Section V.B.1.d.

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

In its programmatic written standards, the CoC adopted specific language to guide funded programs about their responsibility to work with families with children. In the service section of the SO, ES, TH, RRH, HP, & PSH written standards, the following guidance appears: "Program staff will connect families with children to appropriate educational services, including, but not limited to, Early Head Start, Head Start, Public Pre-K, community colleges, & others. Staff will liaise with the local homeless school liaison to ensure coordination, allowing youth to attend their school of origin & receive eligible educational & other services allowable under McKinney-Vento." The CoC's Anti-Discrimination Policy includes a Family Separation Policy, clearly prohibiting children of any gender from separation from their parent(s) despite their age. This allows parents to care & make decisions for their children's education. The NC SEA Director serves as an at-large member of the CoC GB. Per a CoC agreement, the Head Start Coordinator at DPI will provide initial training to the GB in 10/23 with follow-up technical assistance in the 13 RCs as needed through the fall. This training & technical assistance will prepare local providers, providing them local Early Head Start, Head Start, & Public Pre-K contacts & the appropriate referral process for eligible children living in ES or places not meant for human habitation.

1C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section V.B.1.d.

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

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

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

NOFO Section V.B.1.e.

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

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	Organizations	
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	No
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:
1.	update CoC-wide policies; and
	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

1,2) Since 2014, NC Coalition Against Domestic Violence (NCCADV) staff has served as a CE Council (CEC) member. The CEC developed CE P&Ps in conjunction with a wide variety of stakeholders including VSPs & PLE of interpersonal violence, providing feedback, support, & perspective. NCCADV staff assist the CoC to conduct the annual CE evaluation & provide ongoing expertise as the CoC updates its CE P&Ps including the development & implementation of a new CE standardized assessment tool to replace the VI-SPDAT. NCCADV staff also serve as a CoC GB member. With longstanding connections to the entire NC VSP network, NCCADV includes survivors in policy & program development to ensure services provided by the DV & homeless sectors meets urgent & long-term needs. NCCADV evaluates programs, providing survivor feedback during GB & subcommittee meetings to ensure that the system remains trauma-informed. CoC staff serve on NCCADV's State Steering Committee (SSC) which oversees a CDC-funded initiative to ensure that providers across NC understand & have resources necessary to implement trauma-informed care to survivors. The SSC provides a framework for training & TA initiatives, develops P&Ps for staff for implementation purposes, reviews community data, & troubleshoots challenges experienced at the local level. CoC staff offer a range of TA activities to providers, including VSPs, to improve & implement best practices such as Housing First, Harm Reduction, & Trauma-Informed Care (TIC). The CoC conducts ESTA cohorts focused on lowering barriers & works with ES to transform services to become more housing-focused. The cohort design incorporates peer sharing between agencies participating in TA, allowing VSPs with expertise in safety planning & TIC to share practices with general admission ES. ES use this insight to incorporate trauma-informed practices into their P&Ps & begin to operationalize them with existing & new staff. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure DV & homeless systems work closely together: NCCADV provides training for providers & CE Leads, focusing on survivor needs; TIC; risk assessment & safety planning; & impacts on CE. NCCEH provides training to NC VSPs, focusing on homelessness/housing resources & how to connect with PH resources. In 10/22, CoC staff provided a comprehensive training on RRH best practices to VSPs. In 08/23, CoC staff provided landlord engagement training to VSPs to assist in their work to house survivors.

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1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

1,2) CoC staff provide ongoing technical assistance that includes traumainformed, survivor-centered services & partners with NCCADV to enhance training & connect providers to ongoing resources to operationalize practices for survivors. A CoC staff member serves on NCCADV's State Steering Committee which oversees a CDC-funded initiative to ensure that service providers across the state understand & have the resources necessary to implement traumainformed care to survivors. This committee provides a framework for training & technical assistance initiatives, develops policies & procedures for staff for implementation purposes, reviews data from communities, & troubleshoots challenges experienced at the local level. Annually, NCCEH & NCCADV coordinate reciprocal trainings to ensure DV & homeless systems work closely together: NCCADV provides training for providers & CE Leads, focusing on survivor needs; trauma-informed care; risk assessment & safety planning; & impacts on CE. NCCEH provides training to NC VSPs, focusing on homelessness/housing resources & how to connect with safe, confidential methods of PH resources. NCCEH & NCCADV record trainings & post the recordings on their respective websites. NCCADV staff serve on the CoC's CE Council alongside regional CE Lead staff. This body evaluates the CE system, making crucial policy decisions. NCCADV staff provide insight into the system protocols to ensure survivor safety remains paramount & consults with individual CE Leads to discuss local challenges & form baselines to use for individual TA with VSPs, homeless service providers, & CE staff. Upon launch of NCCADV's new Safe at Home DV Bonus RRH project in 10/22, NCCADV & CoC staff trained CE Leads on the new initiative, revisiting best practices such as trauma-informed, survivor-centered approaches & safety planning protocols. CoC staff, during monthly calls with CE Leads, have a standing agenda item to discuss survivor connections to the system, challenges local communities face with providing access & services to survivors, & resources needed to improve survivor impact.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety planning protocols; and	

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2. confidentiality protocols.

(limit 2,500 characters)

1,2) CoC staff provide ongoing technical assistance that includes traumainformed, survivor-centered services including safety planning & confidentiality protocols. NCCADV staff serve on the CoC's CE Council alongside regional CE Lead staff. As key partners, NCCADV staff helped develop the initial CE policies & procedures in conjunction with a wide variety of stakeholders including VSPs & people with lived experience of interpersonal violence, providing feedback, support, & perspective to ensure safety planning & confidentiality protocols were in place to protect & support survivors. NCCADV staff provide ongoing insight into system protocols to ensure safety & confidentiality remain paramount & consult with individual CE staff to discuss local challenges & form baselines to use for individual TA with VSPs, homeless service providers, & CE staff. The CoC operates its CE system through HMIS. To ensure access to permanent housing for survivors being referred through VSPs & household safety & confidentiality, the CoC addresses specific referral protocols for survivors in its CE policies & procedures. VSPs use a coding system to protect households being referred to the CE By-Name List (BNL), listing households being referred to regional CE Leads on a protected, template Excel workbook. The regional CE Lead uses this workbook to add households by code to the BNL for discussion at regular case conferencing meetings. Only referring VSPs know the household's code, attending case conferencing to discuss their households. Once referred to a permanent housing provider, the referring VSP provides a warm handoff to connect the household with the housing provider. VSPs & housing providers work closely to ensure survivor households have the resources they need & take into consideration their desires in relation to location & type of housing needed to maintain their long-term safety. CoC staff engage local VSPs to understand CE protocols to safely connect their households to the BNL, often providing individual training to VSP staff & working collaboratively with the VSP & regional CE Lead to address any safety or confidentiality concerns. Staff reflect these concerns to the CEC during monthly meetings, allowing the subcommittee to address challenges & update CE policies & procedures as needed to improve safety & confidentiality approaches.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

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 The CoC uses de-identified, aggregate data from several sources to assess the needs of individuals & families experiencing interpersonal violence to understand how these households flow through the CoC's system of care. These sources include data from comparable databases, NCCADV & the Council on Women, the annual PIT count, CE BNLs, & the CoC-wide Safe at Home DV Bonus RRH project. 2) Data from NCCADV & the Council on Women allow the CoC to understand the full scope of services & housing needs for people experiencing interpersonal violence across the full geographic area. This sets a baseline understanding of how other data sources within the CoC's control measure total need, fueling continuous quality improvement on data collection methods, program implementation, & evaluation approaches. The CoC evaluates data from regional CE BNLs, indicating the number of people experiencing interpersonal violence that the system has assessed & added to the BNL, the types of households accessing CE, the number & types of referrals made to emergency & permanent housing programs, & the number of households moving into permanent housing. With the launch of the Safe at Home DV Bonus RRH project in 10/22, the CoC & NCCADV review subgrantee APRs quarterly to measure the number of households enrolled into the project, evaluating the geographic & racial/ethnic diversity of households, the time it takes from enrollment to permanent housing placement, & the percentage of households exiting to a permanent destination. The CoC & NCCADV can use this data from the project to determine where challenges may be presenting to focus technical assistance opportunities. In the long-term, the CoC hopes to produce the HUD CSV export with the HMIS implementation's custom data element of NC County of Service to understand the scope of services & housing provided in every CoC county. This will allow the CoC to add de-identified, aggregate DV client data safely to the CoC's data dashboard (the current dashboard only includes data from HMIS). In the short-term, the CoC has contracted with a consultant to build mini-dashboards that visualize CoC-APR data, allowing it to compare performance between DV CE services & HMISbased CE services.

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.
	NOFO Section V.B.1.e.
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.

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1) The CoC updates its VAWA Emergency Transfer Plan (VETP) & provides a training webinar for providers across the geographic area annually. The CoC collaborates with partner VSPs as well as NCCADV to ensure that the plan continues to take a trauma-informed, survivor-centered approach & meets the needs of survivors. The CoC GB approved the updated VETP at its 04/04/23 meeting & held a mandatory training for all CoC- & ESG-funded projects on 05/12/23. CoC staff recorded the training & made the recording available on the CoC website. 2,3) The CoC required all funded agencies not in attendance at the live training to confirm that project staff watched the training. As part of the CoC's VETP, all agencies must inform participants at intake their rights to request an emergency transfer, the process they should follow to make a request, & the action the agency will take on their behalf to secure a safe & timely transfer. Upon an emergency transfer request, agencies must inform CoC staff of any requests, providing relevant, de-identified information about the household. Staff log all requests, periodically following up on the status of the transfer. Staff assist providers when challenges arise, connecting them across regions with the CoC and to other NC CoC's when safety concerns or when households request a transfer outside of the NC-503 geographic area.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
		,
	Describe in the field below how your CoC:	
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and	
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.	

 Since 2014, NCCADV staff has served as a CE Council (CEC) member. The CEC developed P&Ps in conjunction with a variety of stakeholders including VSPs & PLE of interpersonal violence, providing feedback, support, & perspective. NCCEH & NCCADV collaborate on a variety of initiatives. The CoC relies heavily on NCCADV's expertise on trauma-informed care (TIC) & survivor-centered services, ensuring the CoC-level & programmatic P&Ps integrate these approaches. As part of CE, providers conduct a Prevention & Diversion Screening Tool. The first question is "Are you currently residing with, or trying to leave, an intimate partner, family member, caregiver, or other person in your HH who threatens or makes your feel fearful?" Upon yes, the CoC immediately refers the HH to a local VSP. CE accounts for survivor HHs referred through VSPs outside HMIS with CE Leads manually adding HHs with a unique code to the BNL. VSPs participate in local case conferencing meetings, providing relevant information & serving as a liaison when CE makes referrals for survivor HHs to PH providers. The CoC launched a CoC-wide DV Bonus RRH project in 10/22. Under NCCADV's administration, 9 selected VSPs accept referrals from local BNLs for HHs meeting category 4 of the homeless definition, providing housing location, financial assistance, & housing stabilization services. This project expands the capacity of the CoC to serve survivor HHs, specifically utilizing providers dedicated to survivors. 2) CoC staff serve on NCCADV's State Steering Committee which oversees a CDC-funded initiative to ensure that providers across NC understand & have resources necessary to implement TIC to survivors. It provides a framework for training & TA, develops P&Ps for implementation purposes, reviews community data, & troubleshoots systemic barriers & challenges experienced at the local level that get in the way of safely housing & providing services to survivors. CoC staff hold monthly calls with regional CE Leads. Staff & CE Leads discuss ongoing access & capacity challenges with special focus on survivors. Staff brainstorm solutions to these challenges & organize them for discussion at CEC meetings, which uses the brain trust of all regional CE Leads & statewide members, including staff from NCCADV. Challenge discussions & potential solutions at the CEC inform ongoing changes to CE P&Ps to improve safe, comprehensive access for survivors.

	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

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1,2) The CoC has a strong partnership with NCCADV, with staff from both agencies sitting on reciprocal Governance & Advisory Boards, providing training/TA to providers in both systems, & collaborating on the implementation of the CoC-wide, DV Bonus RRH project. By deepening current & building new relationships with state coalitions for survivors, the CoC can partner to develop a more comprehensive feedback loop from survivors themselves through community forums, surveys, & individual service on subcommittees, workgroups, & advisory & governance boards. While the CEC currently includes 3 PLE of interpersonal violence, the CoC will update membership guidelines to ensure more diversity of lived experience including PLE of DV, SA, & human trafficking & from both professional settings & at-large community members. The CoC will also evaluate each subcommittee & advisory board membership slate to ensure the inclusion of at least 1-2 PLE of interpersonal violence to assist with CoC decision-making in all areas of coordination, policy, & program work. As part of its annual CE evaluation, the CoC surveys participating provider agencies, people enrolled in RRH & PSH in the last year, & people currently experiencing homelessness entering CE. For current & former CE participants (including survivors), surveys offer an opportunity to highlight the most helpful types of assistance, the effectiveness of CE to provide those resources, provider strengths/weaknesses to communicate expectations, & evaluation of the timeliness of service/housing connections. The CEC formed a CE Equity Core Team including CE Leads, CoC staff, & PLE (including a PLE of interpersonal violence) to develop a new assessment to replace the VI-SPDAT. The CoC will pilot the new assessment in 4 RCs through 09/23, collect feedback, evaluate data, & update the new assessment with the hope to launch the new assessment as a replacement to the VI-SPDAT across the full CoC in 01/24. Upon launch of the new assessment, the CoC will enhance the annual CE evaluation process to include both individual interviews & in-person forums to solicit feedback from participants. A new SSO-CE DV Bonus project will allow NCCEH to hire a dedicated DV CE specialist to travel across the CoC's geographic area to hold interviews & forums specifically with survivors with a range of lived experience that it can incorporate in decision-making on how to make the CE system work more effectively & safely for survivors.

1C-6.		Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.		
		NOFO Section V.B.1.f.		
	1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individu families receive supportive services, shelter, and housing free from discrimination?	uals and	Yes
	2.	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?		Yes
	,	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equa Accordance With an Individual's Gender Identity in Community Planning and Development Programs Identity Final Rule)?	ll Access in Gender	Yes
	1C-6a.	Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.		
		NOFO Section V.B.1.f.		

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	Describe in the field below:
	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti- discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

1,2) The CoC updates its ADP annually, providing training to providers & stakeholders. It uses 2 subcommittees, Racial Equity & Lived Expertise Advisory Council, to review & update current policies. They gather feedback on challenges, consider other CoC policies, engage LGBTQ+ & other organizations serving marginalized populations, & research emerging best practices to inform updates. The GB will consider approval of the annual ADP update in 10/23, & staff will hold a mandatory training for stakeholders on 10/5/23. Staff will record & post the training on the CoC website immediately after. The CoC requires all funded agencies not in attendance at the live training to confirm that project staff watched the webinar. The ADP requires providers to include a compliant ADP as part of project P&Ps. This includes: a plan to train new staff & an annual staff training on the ADP; intake procedures that provide the plan to all participants; reference to HUD's Equal Access Rule, privacy laws, & other federal, state, & local laws; an equal access policy that includes LGBTQ+, transgender, & gender non-conforming persons; a family separation policy; a faith-based activities policy; & procedures that demonstrate how clients, staff, & volunteers will carry out policies. The CoC provides a checklist to help agencies ensure they have all required elements in their ADP. 3) Upon initial adoption of a CoC-wide ADP, all funded agencies submitted P&Ps, demonstrating compliance. Since initial review, the CoC evaluates project P&Ps as part of the annual CoC & ESG competitions. The CoC prioritizes agencies for funding having compliant ADPs. Agencies approved for funding without a compliant ADP must show proof of the addition of an ADP policy as a condition of funding. 4) The CoC's ADP has a 3-step grievance procedure: a) anyone can submit a complaint to administrators; b) administration must address the grievance with staff client, & other parties involved. If the grievance cites administration, the agency must identify a neutral body, such as a Board subcommittee, to make decisions about any grievance; c) if the client is not satisfied with an outcome or client fears retaliation, a complaint may be filed with NCCEH. NCCEH follows up, collecting client & agency documentation. If an agency has disregarded the ADP, staff will work on a performance improvement plan, &/or in the most egregious circumstances, inform the GB to take remedial action.

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

NOFO Section V.B.1.g.

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

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

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Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Housing Authority of the City of Greenville	22%	No	Yes
Western Piedmont Council of Governments	28%	Yes-HCV	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.
	NOFO Section V.B.1.g.
	Describe in the field below:
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

 96 PHAs exist in the CoC. The CoC regularly engages PHAs, including the two largest, to adopt preferences. Western Piedmont Council of Governments (WPCOG), the CoC's largest PHA, has adopted a preference for people experiencing homelessness, & the Greenville Housing Authority (GHA), the CoC's second largest PHA, has adopted a preference for Moving On clients from PSH. Both WPCOG & GHA serve in leadership roles in their respective RCs & partner with the CoC & its providers to provide & secure affordable units for people experiencing homelessness. The CoC invites PHAs to regular RC meetings, provides information/data about homelessness in their catchment areas, & works with PHA staff to adopt preferences for HHs experiencing homelessness. CoC staff with local stakeholders provide education & assist PHAs to understand how to implement preferences in their Admin Plans. CoC staff collaborate with PIH & CPD staff at the HUD Field Office in Greensboro, engaging individual PHAs together when challenges & questions arise & regularly hold training/informational webinars for PHAs across the CoC to understand CoC work, goals, & local collaborations in which they can get involved. The CoC has built strong relationships with the majority of PHAs that received EHVs. CoC staff have begun conversations with these PHAs about the next phase of our collaboration now that the majority of vouchers have been issued/leased. This includes applying & incorporating preferences for any available mainstream, FUP, FYI, & additional EHVs. In 2023, the CoC initiated a multi-step plan to engage other PHAs. Starting in 09/23, CoC staff will work with RC leadership to identify PHAs already involved in CoC work but do not already have a preference. Once identified, CoC staff will partner with local housing providers to schedule an introductory conversation to discuss potential collaborations, including the adoption of preferences for general, family, &/or Veteran homelessness &/or Moving On from PSH/RRH. Staff will assist PHAs to update their Admin Plans & provide TA upon launch of any preference, addressing referral challenges, barriers, & lease up issues. 2) N/A.

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	1C-7b.	Moving On Strategy with Affordable Housing Providers.		
		Not Scored–For Information Only		
		Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:		
1.	Multifamii	ly assisted housing owners		Yes
	PHA	·		Yes
3.	Low Inco	me Housing Tax Credit (LIHTC) developments		Yes
4.	Local low	-income housing programs		Yes
	Other (lim	nit 150 characters)		
5.	NC DHH	S Targeted/Key Program		Yes
	1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.		
		NOFO Section V.B.1.g.		
		In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:	•	
	1.	Emergency Housing Vouchers (EHV)	Yes	
	2.	Family Unification Program (FUP)	No	
	3.	Housing Choice Voucher (HCV)	Yes	
	4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes	
		Mainstream Vouchers	Yes	
		Non-Elderly Disabled (NED) Vouchers	No	
		Public Housing	Yes	
	8.	Other Units from PHAs:		
			No	
	1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessnes	ss.	
		NOFO Section V.B.1.g.		
	1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes	
			Progr	am Funding Sour
	_	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint	Family	/ Unification

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10	C-7e. Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	
	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
1C-	7e.1. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	
	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
	If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
Housing Authority	•	
Housing Authority		
Western Piedmont		
Foothills Regiona		
Bladenboro Housin	1	
Roanoke-Chowan I	Re	
Chatham County H	lo	
North Carolina Co		
Rockingham Housi		
Rockingham Housi	ın	

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

Name of PHA: Housing Authority of the City of Concord

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

Name of PHA: Housing Authority of the City of Greenville

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

Name of PHA: Western Piedmont Council of Governments

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

Name of PHA: Foothills Regional Commission

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

Name of PHA: Bladenboro Housing Authority

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

Name of PHA: Roanoke-Chowan Regional Housing Authority

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

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Name of PHA: Chatham County Housing Authority

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

Name of PHA: North Carolina Commission of Indian Affairs

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

Name of PHA: Rockingham Housing Authority

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

Name of PHA: Wadesboro Housing Authority

1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;FY 2023 CoC Application Navigational Guide;

1D-2a. Project Evaluation for Housing First Compliance.

NOFO Section V.B.1.i.

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- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D	-1. Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	
	Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are no discharged directly to the streets, emergency shelters, or other homeless assistance programs	at i.
1. Foster Care	No.)
2. Health Care	Ye	es
3. Mental Health Care	Ye	es
4. Correctional Facilities Yes		
10	-2. Housing First–Lowering Barriers to Entry.	
10	NOFO Section V.B.1.i.	
1. [inter the total number of new and renewal CoC Program-funded PSH. RRH. SSO non-coordinated	1 25
e F	ontry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	
e	inter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated intry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	25
E t	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinationary, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and rioritizing rapid placement and stabilization to permanent housing.	ated 100%

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

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	Describe in the field below:
1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

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

1D-3.	Street Outreach—Scope.
	NOFO Section V.B.1.j.
	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and

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4. how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1,2,3) To ensure full SO coverage to engage all persons experiencing unsheltered homelessness (PEUH) across the entire geographic area, the CoC launched a new initiative in 06/21. It developed a new leadership role in each of its 13 RCs called an Unsheltered Access Coordinator (UAC) to facilitate a plan to identify & connect all PEUH to CE. In 06/23, the CoC held an in-person workshop for RCs to create their regional SO plan. RCs created system maps. identifying SO, ES, TH, RRH, HP, & PSH projects, other essential services. & service gaps. RCs outlined plans for assertive & passive outreach; the agencies responsible for providing basic needs, ongoing services, conducting CE assessments, & entering HMIS data; & frequency of outreach across the region. RCs planned navigation of PEUH in the system, highlighting how they would work with local ES for access to interim housing, collect contact information & provide ongoing support, & enter HMIS data. RCs developed an evaluation & continuous improvement plan to ensure frequent, consistent, quality SO. Passive outreach occurs daily at agencies participating in CE & at least weekly at non-participating agencies through identified staff. The frequency of assertive outreach depends on each RC's capacity. However, the CoC requires assertive outreach no less than quarterly. CoC staff hold monthly virtual meetings with UACs to provide ongoing training & TA, discuss the current status of plan implementation, discuss challenges, offer opportunities to highlight RC best practices, & evaluate progress & data. 4) Since launch of its SO process, the CoC has provided ongoing training & TA, holding webinars with UACs, CE Leads, & other stakeholders to understand the CoC's approach & standards working with PEUH, especially people with the highest vulnerabilities & historically disconnected from the system. Webinars focused on best practices such as Harm Reduction, Housing First, & Trauma-Informed Care, outlining basic principles & providing scenarios from experienced SO staff of how to successfully work with disenfranchised HHs. Webinars discussed personcentered case management approaches that allow HHs to make decisions for themselves & define their own needs. Staff provide individual TA with stakeholders upon request to brainstorm solutions to difficult cases to better engage PEUH & ensure quick connection to needed services & PH.

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

NOFO Section V.B.1.k.

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

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes
4.	Implemented community wide plans	Yes	Yes

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5.	Other:(limit 500 characters)		
		No	No

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.I.	

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	2,272	1,223

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

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

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

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.
	NOFO Section V.B.1.m
	Describe in the field below how your CoC:
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

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1) CoC staff keep abreast of changes to mainstream benefits such as Medicaid, Food Stamps, SSI/SSDI, TANF, & others at the federal & state levels to inform the GB & CoC stakeholders. Mainstream partners attend GB, RC, & NCCEH's Local Leadership Response Call, & other webinars to educate providers on how to connect clients to benefits & share updates that will affect access. The GB includes representation from NC DHHS & other statewide sector leaders who provide updates on mainstream benefits. CoC staff relay mainstream benefit updates & information using a CoC-wide email distribution list, make announcements at subcommittee meetings, & hold webinars to share best practices. RC leadership share mainstream benefit information with local stakeholders at meetings, inviting others to share updates & opportunities. 2,3) NCCEH serves as the SOAR state lead & addresses issues with accessing SSA programs, including health insurance. SOAR caseworkers create relationships with local SSA & Disability Determination Services staff to provide information & answer questions. Dedicated SOAR staff increase the chances of positive outcomes. In the last three years, 15 case managers in the CoC completed SOAR training & began assisting clients to submit applications to SSA. NCCEH holds monthly case conferencing meetings & a dedicated NCCEH Project Specialist works 1:1 with trained SOAR staff to review medical narratives, provide connections to SSA & DDS staff, & troubleshoot difficult cases. The CoC also maintains close partnerships with health care navigators, Managed Care Organizations (MCOs), free clinics, legal aid, & DSS to ensure access to health insurance programs. Two CoC staff sit on state committees overseeing the implementation of Medicaid expansion in the state, offering specific insight into the rollout plan for vulnerable populations. CoC staff train providers to ensure participants eligible for Medicaid are quickly identified & enrolled. Staff work closely with NC Medicaid & newly identified MCOs serving under its Medicaid waiver to ensure housing supports & access to other benefits for its members. Staff work with homeless, housing, & behavioral health providers to understand new rules under NC's Medicaid plan, which allows billing for tenancy supports & how to access them appropriately to provide more comprehensive care for the households with severe service needs.

1D-7. Increasing Capacity for Non-Congregate Sheltering.

NOFO Section V.B.1.n.

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

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During the pandemic, CoC staff engaged & partnered with local emergency management departments, NC DHHS, & providers to develop non-congregate shelter using a FEMA waiver. Through this initiative 2/3 of the CoC's counties had non-congregate shelter options. While many of these shelters have since closed due to decreased funding availability, many CoC counties found other funding, including re-allocating current ES funding to ensure non-congregate shelter options exist for vulnerable populations, including people experiencing unsheltered homelessness (PEUH). Currently the CoC has non-congregate shelter for general populations in 8 counties & for Veterans & survivors of interpersonal violence in all counties. With the implementation of Back@Home BoS in 10/23, a CoC-wide rehousing program seeded through Special CoC NOFO funding with leveraged state & other Federal resources, all 79 counties will have non-congregate shelter options for households experiencing unsheltered homelessness with severe service needs. CoC stakeholders have seen the benefit of having non-congregate shelter options; many PEUH who have refused to enter a congregate ES have been willing to take a room in a hotel/motel. This provides a safe space for PEUH & gives providers an easier way to work with HHs to access services & PH. Staff work closely with stakeholders in communities where no ES currently exists who want to develop shelter options. Staff encourage stakeholders to consider non-congregate project & facility design, connecting them to successful, low-barrier, housingfocused, non-congregate shelter programs in other communities.

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

 While people in the sector have long known that homelessness is a public health crisis, the pandemic underscored for the larger community how precarious the lives of people experiencing homelessness can be. The pandemic forced CoCs & providers to develop relationships with stakeholders outside the sector who have always had a vested interest to end homelessness but were often difficult with which to connect. The CoC connected with emergency management departments, NC DHHS, FQHCs, hospital systems, & others. These relationships forged during the crisis allowed communities to bring experts to the table to discuss, plan for, & develop P&Ps to respond to infectious disease outbreaks such as COVID-19 & MPox. Having state & local public health partners at the table on a regular basis helps the CoC & its partners create & update policies, especially important with the emergence of public health emergencies. This assists the CoC divert HHs presenting for services problem solve other, safer options for ES, identify potential funding sources to quickly implement safety initiatives. & highlight other resources local providers need to ensure continued service delivery while maintaining the safety of staff & clients. 2) During the pandemic NCCEH scheduled a weekly COVID Local Leadership Response Sharing Call, inviting NC leaders including staff from NC DHHS & NC Public Safety to share resources, address challenges, & work on protocols for safety of people experiencing homelessness. As the pandemic became endemic, NCCEH shifted to monthly calls & set agendas focused on long-term system planning, offering examples of emerging best practices; space for state & local experts & homeless providers & leaders to share & develop ideas; & time to build stronger relationships. Calls reflect ongoing system challenges, including ongoing public health issues, with call participants brainstorming ideas, developing solutions, & creating new, stronger infrastructure to address future infectious disease outbreaks.

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

 As of 03/20, NCCEH held regular COVID Local Leadership Response calls, inviting NC leaders to share emerging resources for pandemic response. As the pandemic became endemic, NCCEH shifted to monthly calls & set agendas focused on long-term system planning, offering examples of emerging best practices; space for state & local experts & homeless providers & leaders to share & develop ideas; & time to build stronger relationships. Calls reflect ongoing system challenges, including ongoing public health issues, with call participants brainstorming ideas, developing solutions, & creating new, stronger infrastructure to address future infectious disease outbreaks. Upon updates to CE prioritization protocols. CoC staff trained stakeholders about new prioritization protocols & updated resources on the CoC website for regional CE Leads to use as they organized local BNLs & facilitated discussions during case conferencing to prioritize HHs. With a CoC-wide email distribution list, CoC staff continue to forward public health news & resources to stakeholders & connect stakeholders to emerging public health best practices & initiatives, highlighting upcoming trainings & TA opportunities to help communities & providers develop strong, pro-active plans to address public health emergencies before a crisis emerges. As communities & providers seek resources, CoC staff schedule individual calls to discuss public health initiatives, connect them to local & state resources through DHHS, DPS, DSS, Health Departments, FQHCs, & hospital systems, & facilitate conversations to plan for future public health emergencies. 2) During the pandemic, CoC staff worked with NC DHHS & DPS to develop a comprehensive response across the CoC to address safety for people experiencing homelessness, including the creation of non-congregate shelter & access to FEMA resources. CoC staff helped RCs connect to Emergency Management Departments, hospital systems, & FQHCs. The partnerships formed during the pandemic have continued to play a key role in ongoing conversations & planning for future public health emergencies. CoC staff bring providers, RC leadership, & local emergency service personnel together to have conversations to discuss challenges, connection to resources, & planning. When difficulties arise where provider agencies & CoC staff cannot adequately connect to local emergency resources, ČoC staff use its connection at the state level with NC DHHS & DPS to liaise with county personnel.

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

(limit 2,500 characters)

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1) The CoC's CE system serves 100% of the CoC geographic area, dividing the CoC into 13 local referral zones, which the CoC's RCs facilitate with oversight by the CEC. These zones designate access points, hold regular case conferencing meetings, populate BNLs, & facilitate referrals to PH providers. Every zone implements a local plan based on the CoC's CE written standards overseen & facilitated by an elected CE Lead. CE Leads ensure that all counties within the zone conduct regular engagement of providers, advertise the system comprehensively to ensure access. & work closely with the elected UAC to outreach PEUH. 2) The CoC currently uses two standardized CE assessments. The first assessment, called the Prevention & Diversion Screen, uses front door providers to help HHs determine if they have other safe, natural resources they can use rather than entering the system & ES. This tool begins with a question to determine if the HH is experiencing interpersonal violence.; if so the HH gets immediately referred to a local VSP. The second assessment, the VI-SPDAT, determines HH vulnerability & assists the CE system to determine the most appropriate PH intervention. The CoC houses recorded trainings on how to conduct these assessments on its website. Local CE Leads provide regular updates on assessment protocols to providers, connecting new staff conducting assessments to recorded trainings & providing TA as needed. 3) The CoC conducts a CE evaluation annually. As part of the evaluation, the CoC surveys participating project staff, & HHs that currently or recently used CE. As part of the evaluation, the CEC uses feedback to identify annual goals to improve the system, using monthly meetings to set timelines for updates & communicating using a continual feedback loop to system leaders & providers about updates being implemented. After evaluating feedback & reviewing the CoC's annual RE analysis, the CEC identified problems using the VI-SPDAT. which based on data reviewed, showed a disproportionate prioritization of HHs identifying as White in the highest priority areas. The CEC formed a CE Equity Core Team including CE Leads, CoC staff, & people with lived experience to develop a new assessment to replace the VI-SPDAT. The CoC will pilot the new assessment in 4 CE zones through 09/23, collect feedback, evaluate data, & update the new assessment with the hope to launch the new assessment as a replacement to the VI-SPDAT across the full CoC in 01/24.

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

		-
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1)The CoC evaluates & updates its CE processes to ensure that HHs least likely to access services have opportunities, especially in the CoC's most rural areas. RCs work with SSVF providers VAMCs, law enforcement, health care systems, DSS, & others to identify HHs who have trouble accessing CE. The CoC partners with healthcare agencies & VSPs to provide language lines & communication options for people with disabilities. In 06/21, the CoC developed a new leadership role in each of its 13 RCs called an Unsheltered Access Coordinator (UAC) to facilitate a plan to identify & connect all PEUH to CE. RC plans outline plans for assertive & passive outreach; agencies responsible for providing basic needs, ongoing services, conducting CE assessment, & entering HMIS data; & outreach frequency across the region. Plans also define how RCs will navigate PEUH in the system, highlighting how they would work with local ES for access to interim housing, collect contact information & provide ongoing support, & collect & enter HMIS data. 2) ES use a diversion screen to prioritize beds for HHs with no other options. The CoC uses the VI-SPDAT to prioritize HHs most in need of limited PH resources. 3) Local case conferencing meetings facilitate conversations to assign responsibility to find hard-to-reach HHs with the assigned provider engaging regularly to ensure quick access to PH. Starting in 10/23, the new CoC-wide rehousing program, seeded through SNOFO funding, will begin implementation. CE will refer HHs with severe services needs to rehousing teams, helping HHs navigate the system, connect to mainstream resources, access ES, assist them to access PH, & help HHs transition from homelessness to PH through continued housing stabilization services. 4) Currently, many HHs referred to CE lack a service provider to help them navigate the system, & the CoC often must rely on CE Leads &/or UACs to fill service gaps. While this reduces burdens on HHs navigating the system. the number of HHs without service provision is often more than these two roles can handle. With that in mind, the CoC developed a rehousing team model, wherein designated teams would navigate HHs with severe services needs, working with HHs to transition from homelessness to housing. The CoC will launch its CoC-wide rehousing program in 10/23, helping HHs navigate the system, connect them to mainstream resources, help them become document ready & access PH, & case manage HHs until stabilized in housing.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.
	NOFO Section V.B.1.p.
	Describe in the field below how your CoC through its centralized or coordinated entry:
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

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 The CoC's CE system serves the entire geographic area by dividing the CoC into 13 local referral zones, which the CoC's RCs facilitate with oversight by the CoC's CE Council. Each zone has a local advertisement plan based on the CoC's CE written standards with the elected regional CE Lead overseeing local plans to ensure the system reaches all person's experiencing homelessness. CE Leads proactively outreach & engage local providers & entities that work with people experiencing homelessness, explaining CE & how to participate & refer HHs for services & PH. They collaborate with the elected Unsheltered Access Coordinator (UAC) to facilitate the local plan to identify, engage, & provide navigation services to PEUH to ensure that this vulnerable population connects to CE. In areas where no current service providers exist, RCs assign providers from other counties to conduct regular outreach, advertisement, & set up centralized call centers to provide access to CE. 2,3) The CoC takes a twostep approach to inform participants of their rights & remedies available under federal, state, & local fair housing & civil rights laws. First, regional CE leads provide information to participants as needed, answering questions & liaising with appropriate stakeholders when violations or concerns emerge. Second. after referral for enrollment & placement in housing, PH providers work closely with participants to determine HH needs & desires, assisting them to locate appropriate housing. Providers provide hands on support during housing search, assisting participants to look at units, converse with landlords & property owners, & understand their rights under various fair housing & civil rights laws. When suspected violations occur, providers seek assistance from NC Legal Aid & other pro-bono attorneys to determine next steps. CoC stakeholders take advantage of annual fair housing & civil rights trainings held throughout the 79-county geographic catchment area to stay up-to-date on changes & resources to assist participants to understand their rights. Upon suspected violations of fair housing &/or civil rights laws, CoC staff work with providers & other stakeholders to connect with contacts at NC Legal Aid to assist. NC Legal Aid & CoC staff work closely with Con Plan jurisdictions to understand violations, challenges to adequately housing marginalized populations, & ask for assistance when necessary to intervene.

	-10.	Advancing Racial Equity in Homelessness–Conducting Assessment.	
		NOFO Section V.B.1.q.	
			,
1.	Has	your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Ente	r the date your CoC conducted its latest assessment for racial disparities.	09/12/2023
1D-1		Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of	
1D-1		Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance. NOFO Section V.B.1.q.	
1D-1		Homeless Assistance.	

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2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1) The CoC's RE Subcommittee (RES) produces an annual RE Analysis. Using tools created by national partners, the CoC conducts an analysis of PIT, HMIS, & CE data to identify who accesses & succeeds in the system. RES members & CoC & HMIS Lead staff evaluate relevant data; draft the analysis report, using HUD's CoC Assessment Tool, NAEH's RE Tool, & HUD's Stella Performance Module; & present findings, challenges, & prioritized goals to the CoC GB for approval. The analysis focuses on answering four basic questions: a) who does the CoC serve in comparison to people in NČ & people in poverty? b) who accesses PH in the CoC's system? c) how does the system support people to end their homelessness? d) who has access to CE & PH resources? Outside the analysis, NCCEH, as the HMIS Lead, employs a Data Analyst who uses datasets including PIT, LSA, & SSO-CE data to perform deeper analysis than an annual assessment can provide, helping the GB & RES to understand the intersectionality of gender & race/ethnicity & impacts regionally. 2) The RE Analysis demonstrates that people identifying as White made up 70% of the entire population in the CoC geographic area while showing significantly lower rates in poverty & homelessness. In stark contrast, people identifying as Black consist of 19% of the CoC's population while the % of people identifying as Black increased when looking at poverty (31%), homelessness (37%), & families experiencing homelessness (53%). When analyzing people identifying as Black & where they experience homelessness, the majority access ES & do so at a higher % (42% vs 37%) than in the overall homeless population. While people identifying as Black experience unsheltered homelessness at a lower % than they do in the overall homeless population (27% vs. 37%), people in families identifying as Black have a much higher % of unsheltered homelessness than in people identifying as Black in the overall homelessness population (59% vs. 37%) & versus people in families identifying as White (59% versus 33%). While the CoC has lower raw numbers for other PoC, people identifying as Native Hawaiian/PI, Asian, & Alaska Native/American Indian show similar disproportionality to people identifying as Black when comparing overall population to rates of poverty & homelessness. Especially stark are exits to PH destinations for NH/PI (31%) & Asian (23%) populations which demonstrate far lower exits to PH than other populations (AN/AI (42%); Black (37%); White (33%)).

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

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

1.	1. The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	
2. The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.		Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes

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The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
Other:(limit 500 characters)	
	No
	of racism and homelessness. The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector. The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness. The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity. The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness. The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system. The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness. Other:(limit 500 characters)

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

In 2019, the CoC updated its Governance Charter to create a standing RE Subcommittee (RES) to conduct an annual RE analysis & recommend datainformed action steps to the GB to improve equity. The RES has a diverse membership (race, sexual orientation, gender identity, geographic, ethnicity) that brings multiple perspectives to governance decisions, providing regular updates & recommendations to the GB. The RES creates an equity section for funding competition scorecards in collaboration with the CoC's Scorecard Committee, setting equity benchmarks & standards for funded agencies based on the CoC's equity priorities. The Equity Section evaluates an agency's ability to: provide quidelines in languages other than English; employ bilingual staff; provide interpreter services; implement the CoC's Anti-Discrimination Policy, train staff on RE, include BIPoC & PLE on the Board of Directors; & hire BIPoC & PLE in leadership positions. The RES also formed a Prioritization Workgroup that morphed into a standing CE Equity Core Team. Through evaluation of CE assessment data, the Core Team identified significant disparity issues with the current CE assessment (VI-SPDAT). The evaluation determined that the VI-SPDAT prioritized people identifying as White disproportionately in the highest scoring categories. The Core Team, comprised of RES members, CoC staff, regional CE Leads, & PLE, joined researchers from UNC & Duke, healthcare experts, & staff from NC DHHS & Public Health to develop a new CE assessment & prioritization process. The Core Team launched a pilot in 06/23. using the newly developed assessment along with the VI-SPDAT in four regional CE referral zones. The Core Team will analyze data collected during the pilot phase as well as gather qualitative data from stakeholders using the new tool & feedback from PLE that connected with the CE system during the pilot phase. The Core Team will update the draft assessment based on the collected data with the hope to launch the new CE assessment across the CoC in early 2024. The RES holds a RE Dialogue Series annually, providing CoC stakeholders an opportunity to learn about & discuss relevant & emerging topics from expert panelists. Recent topics discussed include: the effects of environmental racism on homelessness, language access for Hispanic/Latina/e/o people experiencing homelessness, & the impact of declining affordable housing on marginalized homeless populations.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC uses.	

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 The CoC evaluates several key measures to determine & track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance. From the annual RE Analysis, the CoC has a baseline understanding of the percentages of people identifying as different races/ethnicities in the homeless service system in comparison to the general population & in poverty. This helps the CoC to understand how BIPoC access programs & succeed in PH projects. The CoC focuses on access to services/PH, exits to permanent destinations, & returns to homelessness. While less robust than HMIS data, we review PIT count data to determine the # of BIPoC experiencing unsheltered homelessness in comparison to the % of the respective race in the total homeless population. We also review the % of BIPoC who access program types such as ES, TH, RRH, & PSH, comparing the % of people of each race/ethnicity who access these services versus the % of that respective race in the total homeless population. For each program type, the CoC wants to understand & evaluate where HHs exit, paying special attention to comparisons of positive/negative outcomes per race/ethnicity. In conjunction with these exit data, the CoC monitors returns data. The CoC seeks to understand whether the system successfully helps HHs of different races/ethnicities & prevents them from returning to the system after 2 years. After evaluating feedback & reviewing the CoC's annual RE analysis, the CEC identified problems using the VI-SPDAT, which based on data reviewed, showed a disproportionate prioritization of HHs identifying as White in the highest priority areas. The CEC formed a CE Equity Core Team of stakeholders including CE Leads, CoC staff, & PLE to develop a new assessment to replace the VI-SPDAT. The CoC will pilot the new assessment in 4 CE zones through 09/23, collect feedback, evaluate data, & update the new assessment with the hope to launch the new assessment as a replacement to the VI-SPDAT across the full CoC in 01/24. After launch, the Core Team will evaluate data monthly to determine the effectiveness of the new assessment/prioritization process to more equitably prioritize HHs for PH. 2) The CoC uses several tools to track progress including, but not limited to, the annual PIT/HIC, HMIS, Stella P, & CE data. The CoC & HMIS Lead use several software tools to evaluate & visualize data including, but not limited to, R script, Canva, Google Suite, custom data dashboards, & Tableau.

1D-11. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.

NOFO Section V.B.1.r.

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

The CoC approved the formation of a Lived Expertise Advisory Council (LEAC) in 07/21. The CoC developed this subcommittee to improve its ability to make governance & funding decisions & provide technical assistance by explicitly incorporating the perspectives of people with lived experience of homelessness (PLE). The LEAC improves the provision of services to PLE, & the policies that govern these services, across the CoC through insights & expertise that come directly from PLE first-hand. The LEAC consists of people who currently experience or have previously experienced homelessness, including persons experiencing unsheltered homelessness (PEUH). LEAC membership intentionally incorporates diverse perspectives: people of different races/ethnicities; PLE that work in the field; people that have experienced the CoC's CE system & programs; & people residing across the CoC's full geographic area. LEAC members participated in the NC Conference on Ending Homelessness, using the forum to educate but also to encourage PLE in attendance to join the LEAC &/or other CoC subcommittees. The LEAC works with regional CE Leads & local providers to identify PLE currently in or have recently been housed through the system. Individual LEAC members with the help of CoC staff schedule calls or virtual meetings to discuss the CoC's & LEAC's work, recruiting them to join the LEAC. The CoC ensures that at least one member of the LEAC serves on other CoC subcommittees including the CEC, Funding & Performance Subcommittee, RES, Nominations Committee Veterans Subcommittee, & others. CoC subcommittees manage the day-to-day decision-making & oversight of the CoC's work, evaluating data, providing recommended strategies, drafting & implementing policies & procedures, training CoC stakeholders, & setting performance benchmarks. The CoC formed a CE Equity Core Team to participate in a HUD CE Equity Initiative in 2022. The Core Team focused on developing a long-term strategy to improve equity in the system. To form the Core Team, CoC staff along with the RES directly outreached & engaged a diverse slate of PLE identified by local RC, CE, & providers, 43% of the Core Team consists of PLE. This diverse committee joined researchers & healthcare experts to develop a new CE assessment to address issues with the VI-SPDAT that disproportionately prioritizes HHs identifying as White for the highest-level PH interventions.

1D-11a. Active CoC Participation of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	1	7
2.	Participate on CoC committees, subcommittees, or workgroups.	2	12
3.	Included in the development or revision of your CoC's local competition rating factors.	0	1
4.	Included in the development or revision of your CoC's coordinated entry process.	1	3

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

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

(limit 2,500 characters)

The CoC encourages all agencies within the CoC geographic area to hire PLE in direct service & leadership roles including agency management & Boards of Directors. As part of funding competitions, the CoC incentivizes agencies to employ & include PLE in decision-making by the inclusion of questions in competition scorecards. The first question concerns PLE on agency Boards of Directors (BOD): how many members of your BOD have experienced homelessness? Agencies with BOD that comprise 20% or more PLE receive maximum points. The second question concerns hiring PLE in all aspects of an agency's work: do agency hiring announcements cite lived experience of homelessness as a relevant skill for open positions at all levels in the agency? Agencies that show a preference for PLE receive maximum points. CoC staff serve on the planning committee for the annual NC Conference on Ending Homelessness. Staff encourage decision-makers to include both opportunities for PLE to participate as speakers/panelists in the conference as well as providing scholarships to PLE to attend & learn. The CoC compensates PLE who play a role in decision-making & professional development opportunities in governance, subcommittee & training meetings at an hourly rate equal to the hourly rate identified by the National Low Income Housing Coalition as the wage necessary to rent a 2-BR unit. Locally, RC leadership & providers encourage PLE to attend Regional Committee meetings to provide feedback, ask questions, & participate in local initiatives. These connections assist providers to form relationships with PLE that want to get more involved which often leads to employment & professional development opportunities. In a recent survey of homeless service providers in the CoC, 65% of responding agencies, when asked whether they hire/would hire PLE, 65% of respondents reported they do/would hire PLE to fill a variety of roles in their agencies including, but not limited to, shelter staff, case management, food services, facility maintenance, program management, street outreach services, & peer support.

1D-11c.	1D-11c. Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	
	Describe in the field below:	
1.	how your CoC routinely gathers feedback from people experiencing homelessness;	
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and	
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.	

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(limit 2,500 characters)

1) The CoC approved the formation of a Lived Expertise Advisory Council (LEAC) in 07/21 to improve its ability to make governance & funding decisions & provide TA by explicitly incorporating the perspectives of PLE. The LEAC consists of people who currently or have previously experienced homelessness, including PEUH. Membership intentionally incorporates diverse perspectives: people of different races/ethnicities, work in the field, have experienced the CoC's CE system & programs & reside across the CoC's full geographic area. The LEAC participated in the NC Conference on Ending Homelessness, educating & encouraging PLE to join the LEAC &/or other CoC subcommittees. Members use their experience in the CoC system & interaction with ESG/CoC projects to review CoC P&Ps, provide recommendations to the GB, & determine whether the CoC implements its P&Ps equitably & effectively. 2) As part of its CE evaluation process, the CoC develops a set of surveys to gather feedback from a range of stakeholders, including participating providers, PEH entering the CE system, & PLE in PSH & RRH projects that experienced the system in the prior year. Since all ESG & CoC Program-funded projects must participate in CE, participant surveys capture a range of data including how projects assisted them with PH access, they learned about the project to seek services, the types & quality of services received, challenges faced while in the project, & things they would change about their experience. 3) Through feedback & highlighted challenges, the LEAC developed a CoC Client Bill of Rights (CBR) Policy that applies to all providers working with PEH. The CBR sets clear guidance & expectations for CoC providers & the role they play to assist PEH as quickly as possible with the greatest amount of respect & humility. The CBR includes a robust grievance policy, allowing participants to file a grievance when they believe their rights have been violated. Grievances received at the CoClevel allow the GB to form an ad hoc committee to hear evidence, determine if an agency violated the CBR, & in violation cases, potentially de-fund &/or publicly censure agencies with the most egregious behavior toward clients.

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

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The CoC has engaged city, county, & state government in several ways to ensure they understand the impact of the lack of affordable housing on all people, especially people experiencing homelessness. 1) The CoC discussed with state officials the challenges with current NC restrictions on inclusionary zoning, which prioritizes higher market rents & limits units for people experiencing homelessness with extremely low incomes. By overturning this restriction, NC cities/counties within the CoC could require all developers to includes a designated percentage of units in every development as affordable. CoC stakeholders have approached jurisdictional governments to increase housing density, especially in urban areas where HHs experiencing homelessness need to connect to transportation, behavioral & physical health services, & employment. 2) Many CoC stakeholders have regular meetings with their elected officials on city councils/county commissions as well as government staff in community development departments. These meetings provide opportunities to educate decision-makers on how government can transform policies & reduce regulatory barriers to housing development. CoC stakeholders have advocated for the allowance of accessory units, reimbursement/waiving of certain development fees for nonprofit development organizations to reduce costs to make housing more affordable. & making income a protected class to ensure people experiencing homelessness have access to permanent housing.

Yes

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

FY2023 CoC Application

1	E-1. Web Posting of Your CoC's Local Competition Deadline–Advance Public Notice.	
	NOFO Section V.B.2.a. and 2.g.	
	You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their	07/13/2023
	project applications to your CoC-meaning the date your CoC published the deadline.	
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition—meaning the date your CoC published the deadline.	07/13/2023
1	E-2. Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
		· ·
	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes

4. Provided points for projects that addressed specific severe barriers to housing and services.

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5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
1E	-2a. Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
		_
	You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.	
	Complete the chart below to provide details of your CoC's local competition:	
1.	What were the maximum number of points available for the renewal project form(s)?	189
2.	How many renewal projects did your CoC submit?	26
3.	What renewal project type did most applicants use?	PH-PSH
1E	-2b. Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	
		-
	Describe in the field below:]
	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;	
	2. how your CoC analyzed data regarding how long it takes to house people in permanent housing;	
	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and	
	4. considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.	
		_

 As part of the CoC Program competition, renewal applicants submit a prior calendar year APR, which staff use to analyze performance measures in the CoC application renewal scorecard. Because of the inherent problems with HUD Data Standards that muddle HMIS data on CH, the CoC, in conjunction with the HMIS Lead, developed a custom report that better represents the total HHs experiencing CH in projects as well as the total new HHs experiencing CH entering projects during the CY. CoC staff pull the custom CH report as well as the returns SPM report to analyze each renewal project. 2) The CoC reviews information from Q22C to analyze data on the length of time between project enrollment and HH move into PH. This helps the CoC also understand the # of HHs that exit without move into PH. 3,4) The CoC prioritizes projects that serve people with disabling conditions such as substance use disorders, mental illness, & others requiring significant support to maintain PH; CH people who may be more susceptible to victimization, illness, & death; HHs experiencing interpersonal violence; people identifying as LGBTQ+; & unaccompanied or parenting youth 18-24. The CoC prioritizes projects that follow a Housing First approach & serve low- or no-income HHs or people who have difficulty engaging in services. Projects that serve vulnerable populations receive additional points on the CoC-approved scorecards. Projects with more points rank higher on the final prioritization list. The CoC historically ranks projects following Housing First tenets higher on the ranked list. All new & renewal projects on the final ranked list met Housing First standards this year. The CoC also evaluates & ranks projects based on their adherence to SAMHSA's PSH Key Elements & USICH's RRH Program Standards & Benchmarks, which prioritize services to vulnerable populations & pair services to HH needs. Projects meeting more programmatic standards rank higher on the final prioritization list. Additionally, the CoC established funding priorities to ensure adequate geographic coverage of PSH in the CoC & to scale up RRH services & financial assistance to ensure vulnerable populations have access to housing & appropriate services. The CoC ranked a CoC-wide RRH project on the final prioritization list to expand the scope of the CoC's impending CoC-wide rehousing project seeded through Special CoC Program NOFO funding.

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

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1,2) The CoC uses a Scorecard Committee (SC) to develop CoC competition scorecards. The SC meets in advance of the competition to determine factors needed to evaluate applications, using the CoC's & HUD's priorities to shape recommended scorecards for the CoC GB to approve. For this year's competition, the SC included representatives from each of the CoC's 13 RCs as well as members of the CoC's RES & LEAC. SC members share information locally, gathering input from fellow CoC stakeholders. 50% of members were BIPoC. Staff post scorecards in advance of the GB approval meeting. The CoC holds open GB meetings & encourages members/non-members to ask questions & provide feedback. The GB approved the SC recommendation unanimously. BIPoC comprise 51% of GB membership. The CoC uses a Project Review Committee (PRC) to review, score, & rank CoC applications. The scoring process pairs one PRC/CoC staff member to review each application independently. After review, the pair hold a call to discuss each question, averaging scores to complete a total application score. The PRC creates options for ranking project applications, discussing CoC precedents, priorities, geographic coverage, performance, & spending. The PRC produces a recommended prioritization ranking list for the GB to approve. 44% of PRC members were BIPoC. The CoC holds open GB meetings & encourages members/non-members (without a conflict) to ask questions & provide feedback. The GB approved the PRC recommendation unanimously. BIPoC comprise 51% of GB membership. 3) The RES consults with the SC annually to develop an Equity Section in CoC scorecards which sets key equity benchmarks to measure agencies commitment to & implementation progress to serve populations disproportionately affected by homelessness. The section includes benchmarks for an agency's ability to provide guidelines in other languages; bilingual staff; interpreter services; inclusion of Anti-Discrimination Policies in programmatic P&Ps; RE staff training; equal access hiring clauses; % of BIPoC Board members & leadership staff; % of PLE on Boards & staff.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.
	NOFO Section V.B.2.f.
	Describe in the field below:
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

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 The CoC established funding priorities for the competition with a primary priority to ensure funding is being used well, including potentially reallocating funding from projects with patterns of low spending & poor performance. These priorities guide the CoC's Project Review Committee's (PRC) work, which scores applications & recommends project ranking & reallocation to the CoC GB. With the help of the established funding priorities, the PRC uses several precedents to order the final ranking list that also helps determine when reallocation happens. The CoC uses adherence to several key standards including Housing First, best practice program design elements (SAMHSA's Key Elements of PSH; USICH's RRH Program Standards & Benchmarks), & Anti-Discrimination Policy compliance as guiding principles. 2,3) The PRC identified one renewal project through its process that deserved consideration for reallocation: Community Link's (CL) PRC Rapid Rehousing Renewal project. The CL project missed several RRH Program Standards & Benchmarks & the Anti-Discrimination Policy compliance standard & scored only 27% of possible points in the renewal scorecard. The total number of points for the project was 32% lower than the next highest scoring operating renewal RRH project & scored lower than the two new RRH project applications, which has a smaller universe of possible points in the new application scorecard. The PRC decided due to poor performance, not meeting key standards (which both new RRH project applications met), & the ability for one of the new RRH project applications to cover the same geographic area to reallocate the CL PRC RRH project. This reallocation allows the CoC to include a new HMIS expansion grant needed to cover increased costs for HMIS activities & a new CoC-wide RRH project to expand the scope of the impending CoC-wide RRH program seeded through the SNOFO. 4) N/A.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	
	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
1	E-5. Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	
1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you	08/22/2023

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	Projects Accepted-Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	
apı	ter the date your CoC notified project applicants that their project applications were accepted and a liked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified plicants on various dates, enter the latest date of any notification. For example, if you notified plicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/22/2023
1E-5b	. Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	
2. I 3. I 4. I 5. I	Project Names; Project Scores; Project Scores; Project accepted or rejected status; Project Rank–if accepted; Requested Funding Amounts; and Reallocated funds.	
1E-5c	. Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline. NOFO Section V.B.2.g. and 24 CFR 578.95.	
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	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
pai 1. 1	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B.	09/21/2023
pai 1. t	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen. ter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or truer's website—which included: the CoC Application; and	
pai 1. t	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen. Iter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or riner's website—which included: the CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. IE-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved	
pai 1. 1	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen. ter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or trner's website—which included: the CoC Application; and Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. 1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	

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2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
 - Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.		
	Not Scored–For Information Only		
Ente	er the name of the HMIS Vendor your CoC is o	surrently using.	WellSky
2A-2.	HMIS Implementation Coverage Area.		
	Not Scored–For Information Only		
	•		
Sele	ect from dropdown menu your CoC's HMIS co	/erage area.	Multiple CoCs
2A-3.	HIC Data Submission in HDX.		
	NOFO Section V.B.3.a.		
Ente	er the date your CoC submitted its 2023 HIC date	ata into HDX.	04/28/2023
			0 1/20/2020
	Ta		
2A-4.	Comparable Database for DV Providers–CoC Data Submission by Victim Service Providers	and HMIS Lead Supporting Data Coll .	lection and
	NOFO Section V.B.3.b.		
	In the field below:		
1.	describe actions your CoC and HMIS Lead ha providers in your CoC collect data in HMIS co	ave taken to ensure DV housing and s mparable databases;	ervice
2.	state whether DV housing and service provide comparable database—compliant with the FY	ers in your CoC are using a HUD-com 2022 HMIS Data Standards; and	pliant
E\/000	22 0-0 41:1:	D [1	00/04/0000

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3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

1) The CoC & HMIS Lead have taken multiple actions to ensure VSPs collect data in HMIS comparable databases. The CoC & HMIS Lead conduct annual outreach to each VSP to strengthen relationships & confirm comparability of databases used. The CoC & HMIS Lead provide targeted outreach, sharing aggregated HUD & HMIS Lead resources & share these publicly online on the CoC website. The HMIS Lead created a checklist for VSPs to confirm that their chosen database collects the current data standards requirements. The CoC offers paper forms for data collection as well as Data Standards training that are not software specific & offer access to the HMIS Lead's Learning Management System so VSPs have trainings on Privacy & Security requirements for HMIS/comparable databases, FY24 Data Standards updates, & HMIS workflow trainings that detail data collection stages & data element definitions. The CoC & HMIS Lead coordinate with NCCADV & the NC ESG Office to troubleshoot & consult on federal reporting. The HMIS Lead holds individual training sessions with CoC Leads & VSPs to support leveraging ESG CAPER & CoC APR reports on an as needed basis. 2) According to the most recent annual outreach efforts, 72% of all VSPs in the CoC used a comparable database. 100% of CoC- & ESG-funded VSPs used a comparable database. 3) The CoC's HMIS implementation is compliant with the FY2022 HMIS Data Standards. The HMIS implementation uses WellSky Community Solutions, which is ready for FY2024 Data Standards & has the necessary reports such as ESG-CAPER, CoC-APR, SSVF Export, SPMs, LSA Export, HUD CSV, and the Hashed CSV Exports.

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	2,665	661	1,268	63.27%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	384	9	174	46.40%
4. Rapid Re-Housing (RRH) beds	515	32	479	99.17%
5. Permanent Supportive Housing (PSH) beds	1,617	0	1,378	85.22%
6. Other Permanent Housing (OPH) beds	1,237	0	0	0.00%

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

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

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

(limit 2,500 characters)

1) The CoC's Funding & Performance Subcommittee (FPS) developed & oversees a plan to increase HMIS bed coverage to the minimum 85% coverage rate. The approved plan, which sets ambitious goals, required a change in the CoC Governance Charter, assigning HMIS recruitment activities to the Regional Lead Alternate (RLA) position in each of the CoC's Regional Committees. The CoC tasked RLAs to form subcommittees to develop a local engagement plan with all eligible agencies not currently participating in HMIS. The FPS created several resources to assist RLAs to understand their responsibilities & to help guide them during engagement efforts including a recorded webinar training; the most recent HIC, highlighting agencies not participating in HMIS; sample scripts; an FAQs document, & an HMIS guide to provide to agencies. CoC staff assigned as the primary contact for RCs provide an extra layer of support. working with RLAs to schedule conversations, helping interested agencies understand their next steps, & providing a warm handoff to the HMIS Lead to begin agency/project set-up & licensing. 2) RLAs work with their local subcommittees, assigning members engagement tasks with identified non-HMIS participating agencies. Members outreach agencies, using prepared HMIS recruitment materials, answering questions, explaining benefits, & providing information. When an agency requires more information, RLAs connect to their primary CoC staff member contact to have more in-depth conversations. Staff schedule meetings with agencies, answering questions & providing resources including how to connect with the HMIS Lead to begin the agency/project set-up & licensing processes. The primary CoC staff person works closely with HMIS Lead staff to ensure a smooth, timely process to get agencies onto HMIS, using a Smartsheet to provide updates so all parties understand the current status of participation. When challenges appear, CoC, agency, & HMIS Lead staff work together to address issues to shorten the time it takes to gain access to the system.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578; FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and

(limit 2,500 characters)

FY2023 CoC Application

- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC conducted its 2023 PIT count.	01/25/2023
2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
I	·	
2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	
	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

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 In order to hold the PIT count at times & locations where youth were most likely located, the CoC partnered with local youth programs, including afterschool programs, faith-based programs, LGBTQ+ agencies, & youth housing & services providers to plan & conduct the 2023 PIT count. The CoC partners with the SEA & LEAs to identify school-age youth who may not visit youth service programs. HMIS Lead staff presented to the full contingent of homeless school liaisons in the CoC on 01/11/23 to discuss PIT eligibility, define the NC BoS CoC's PIT process & timelines. & answer questions. HMIS & CoC staff held a virtual forum with local youth program providers in 01/23 to get feedback, brainstorm ideas, & develop procedures that would help the CoC better locate & count youth experiencing homelessness least likely to access mainstream homeless & housing resources. The conversations with homeless school liaisons & local youth program providers guided the CoC's process. 2) Youth experiencing homelessness participated in regional PIT planning committees. HMIS Lead & CoC staff worked closely with local RC stakeholders. including youth-centered programs, to identify youth willing & able to help plan for the annual count. 3) Stakeholders involved in planning the count, brainstormed & implemented specific initiatives to engage youth in locations specific to the population. The CoC advertised on social media to increase & build awareness of youth counts to elicit help in planning. The CoC counted outside school hours & when youth programs were operational to increase opportunities to find youth experiencing homelessness. RC leadership engaged youth providers that had not counted in prior years & conducted counts in these facilities. Through increased & creative efforts, the CoC improved its youth count, showing a 62% increase in the number of youth experiencing homelessness counted in 2023 versus 2022.

2B-4.	PIT Count-Methodology Change-CoC Merger Bonus Points.
	NOFO Section V.B.5.a and V.B.7.c.
	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
3.	describe how the changes affected your CoC's PIT count results; or
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

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 The CoC did not make changes to its sheltered PIT count methodology in 2023. 2) The CoC updated its unsheltered PIT count methodology for the 2022 count to better understand the scope of unsheltered homelessness & ensure that PEUH better connect to services & housing. For the 2023 PIT count, the CoC took lessons learned from the new methodology to enhance training & TA that resulted in a more comprehensive & accurate unsheltered count. Under the old methodology, the CoC spent months planning the unsheltered PIT count, utilizing a plethora of resources for a one-day count but not adequately connecting PEUH to services & housing. To ensure it effectively engages PEUH connecting them to the resources they need, the CoC launched a new initiative in 06/21, creating a role in each RC called an Unsheltered Access Coordinator (UAC). UACs with the help of local stakeholders develop an unsheltered outreach & engagement plan. In 2022, the CoC leveraged this new process to count PEUH by using data through the HMIS CE BNL report. In the 7 days after the PIT count night, the UAC leads a team to contact PEUH on the BNL. verifying their place of residence on the night of the count. After the 7-day window, CoC staff pull the BNL to count the total number of PEUH. As a new process in 2022, UACs & stakeholders participating in the unsheltered PIT count had a steep learning curve, limiting their efforts to count effectively. Understanding the need for increased support, HMIS Lead & CoC staff formed a planning team specific to the unsheltered PIT count, focusing on supporting UACs plan for & implement their unsheltered count. Starting in 09/22, the unsheltered PIT count planning team worked with UACs, creating new resources & training guides, holding monthly virtual office hours, & engaging UACs through phone calls to help prepare their regional unsheltered count processes & troubleshoot emerging challenges. 3) With enhanced TA, the CoC saw a dramatic rise in the number of PEUH counted in 2023 vs 2022. The # of PEUH counted increased 69% year-over-year. The CoC believes this increase correlates to UACs feeling more comfortable & knowledgeable in the 2nd year under the new methodology. 4) N/A.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.
	NOFO Section V.B.5.b.
	In the field below:
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time

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 The CoC determines risk factors to identify persons becoming homeless for the first time by screening each person presenting for services with a tool called the Prevention & Diversion Screen, using data collected from the tool to evaluate common factors seen in HHs presenting for services. This allows programs to use diversion approaches, assisting people to problem solve to identify alternative PH resources rather than immediately entering shelter. 2) The CoC actively works to increase resources for diversion activities, including financial assistance & mediation services. The CoC received a multi-year Bezos Day 1 Families Fund (D1FF) grant to pilot diversion practices in three geographically diverse sites in the CoC. The funding targets HHs with children, allowing agencies to provide financial supports to divert people from congregate shelter. Funded communities have integrated this important resource into their CE systems, using case conferencing to prioritize HHs for financial assistance. The CoC contracts with The Listening Group to provide quarterly training & coaching to communities to learn how to successfully engage HHs & divert them from the system. The CoC continually evolves the program, evaluating the success of strategies & leveraging lessons learned to improve practices. The CoC will launch a new CoC-wide rehousing program in 10/23. This program will use a flex pool model to braid a variety of funding, including awarded SNOFO funding, to meet the needs of households experiencing & at-risk of homelessness. While SNOFO funding will target HHs experiencing homelessness with severe service needs, other funding sources will allow the program to pay for mediation services & financial assistance to target HHs at imminent risk of homelessness, thus reducing the flow of HHs without a history of homelessness into the system. 3) A Project Specialist from NCCEH oversees diversion services in the CoC, working closely with RC leadership & individual agencies to implement best practices, educate local providers on tools & mediation skills. & seek local resources for diversion efforts to reduce the number of first-time homeless HHs.

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

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(limit 2,500 characters)

(limit 2,500 characters)

1) The CoC CE system prioritizes HHs for RRH & PSH based on LOTH, & the CoC works closely with providers to increase accessibility to PH. Written standards focus on program design, ensuring projects incorporate Housing First approaches & other best practices (SAMHSA's PSH Key Elements; USICH's RRH Program Standards). CoC staff provide ongoing training on standards & pull HMIS reports to evaluate progress on turnover rates, targeting, & positive exits. With the release of EHVs, the CoC entered into MOUs with PHAs, defining the following priority populations: a) HHs ready to move on from PSH & RRH; b) HHs with the longest length of unsheltered homelessness & where documentation is unavailable. Exiting HHs from PSH & RRH creates flow in the system, freeing up slots for HHs with long histories of homelessness. Prioritizing HHs with the longest LOTH with documentation issues that would prevent them from entering funded PH programs means providers can connect vulnerable HHs to PH more quickly. The CoC is in the development phase of a regional data dashboard that will highlight SPMs, allowing the RCs to track current & historical client counts, system inflow/outflow, exits to PH, demographic breakdowns, & HH progress. In 2024, CoC staff will introduce the dashboard to each of the CoC's 13 RCs, training local leadership on how to use the dashboard, facilitate discussions to develop local strategies to reduce LOTH, & measure progress over time. The CoC will launch its first CoC-wide rehousing program in 10/23, seeded with funding awarded through the SNOFO. Focused on HHs experiencing homelessness severe service needs, specifically PEUH or a history of unsheltered homelessness, the CoC will increase its ability to house vulnerable HHs, many of which have long LOTH. 2) Staff hold monthly calls with regional CE Leads to review the current regional BNL & discuss challenges. In advance of the meeting, staff pull several data points from the BNL including any HHs with LOTH longer than 364 days, comparing data month-to-month & annually to determine progress & discuss regional challenges. All local CE systems hold regular case conferencing meetings, use BNLs that identify HHs with high vulnerability & long LOTH & connect them to available PH resources. 3) An NCCEH Project Specialist focuses exclusively on the CE system, working with regional CE Leads to strategize how to target people with the longest histories of homelessness & to reduce the LOTH.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC's Strategy
	NOFO Section V.B.5.d.
	In the field below:
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

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1)The CoC uses many strategies to increase the rate at which persons exit ES, TH, & RRH to PH destinations. Through written standards, the CoC sets termination procedures, limiting the reasons for ending assistance to HHs. Staff provide ongoing TA to providers on standards, working with program staff on difficult cases & providing guidance on ways to engage vulnerable HHs to improve PH exits. Staff provide TA to ES using a cohort model, bringing together ES to focus on NAEH's 5 Keys to Effective ES. Staff design cohorts to educate ES on low-barrier models/housing-focused services; identify barriers needing removal; operationalize updated P&Ps, & set bold 3-month goals to increase exits to PH. At the end of a 3-month intensive process, ES begin implementation of updated services, & staff meet with ES monthly to evaluate progress on goals. In 10/23, staff will launch a quarterly ES forum, highlighting outside experts, including peer ES, to provide advanced training, leaving ample time for ES to ask questions on emerging challenges, share practices, & brainstorm solutions with peers. The CoC evaluates ES performance based on the following benchmarks: 50% of participants have disabling conditions; median length of project participation is 90-180 days; 10% of adults increase earned cash income, 40% of participants exit to PH. The CoC evaluates RRH performance based on the following benchmarks: 20% of adults increased earned cash income; median length of project participation is 180-270 days; 80% of HHs exit to PH. 2) The CoC currently has a 99.5% PH retention rate or exits to PH destinations in its PSH programs. The high rate is due to the CoC's implementation of a performance improvement process with PSH programs, wherein staff review program/client documents to evaluate program compliance, adherence to best practices, & performance. After review, staff work with program staff to implement action plans, setting goals & timelines for improvement. The CoC evaluates PSH performance based on the following benchmarks: 25% of HHs experienced unsheltered homelessness at entry (existing projects); 75% of HHs experienced or had a history of unsheltered homelessness prior to entry (new projects); 80% of participants exit to PH. In 2024, staff will begin quarterly calls with programs to evaluate APR performance data & provide TA to improve services. 3) An NCCEH Project Specialist oversees the CoC's strategy to increase the rate that people exit or retain PH.

2C-4.	Returns to Homelessness–CoC's Strategy to Reduce Rate.
	NOFO Section V.B.5.e.
	In the field below:
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

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 The CoC uses BNL data to identify HHs returning to homelessness. It evaluates HH & program data to determine common factors of HHs returning to the system & use these factors to help develop strategies to decrease returns. 2) The CoC prioritizes & targets limited homelessness prevention funding for return homelessness, meaning HHs that have a history of homelessness or that exited from RRH/PSH projects previously. The CoC written standards require a progressive engagement approach in its funded PH programs, allowing regional CE Leads & rehousing agencies to transition higher needs HHs at risk of returning to homelessness without continuing supports from RRH to PSH or available EHVs or HCVs set-aside for moving on HHs. The CoC's number one priority for use of available EHVs is for HHs to move on from PSH/RRH programs. This priority is especially important for RRH participants who cannot access PSH due to eligibility/availability & need continuing housing subsidy & supports to sustain PH long-term. CoC staff provide ongoing TA to ES on best practices & work with program staff on difficult cases, providing guidance on ways to engage landlord/hard-to-house clients to improve PH exits. CoC staff provide TA to ES using a cohort model, bringing together ES to focus on NAEH's 5 Keys to Effective Shelter. Staff design cohorts to educate ES on lowbarrier models/housing-focused services; identify barriers needing removal; operationalize new low-barrier, housing-focused P&Ps, & set bold 3-month goals to increase exits to PH. At the end of a 3-month intensive process, ES begin implementation of updated services, & staff meet with ES monthly to evaluate progress on goals using the APR. In 10/23, CoC staff will launch a quarterly forum for ES, bringing in outside experts, including peer ES, to provide more advanced training, leaving half of the forum for ES to ask questions on emerging challenges, share practices, & brainstorm solutions with their peers. 3) An NCCEH Project Director works with PH programs to improve performance. An NCCEH Project Specialist works with CE Leads on local CE implementation & oversees the CoC's BNL.

2C-5.	Increasing Employment Cash Income–CoC's Strategy.
	NOFO Section V.B.5.f.
	In the field below:
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

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 The CoC takes a dual approach to help HHs access employment/increase cash income. One, it engages stakeholders to assist the CoC to develop a comprehensive plan. The CoC engages the NCWorks (NCW) Commission, designated as NC's Workforce Development Board, to discuss strategies that NC can use to engage service providers in their work to connect PEH to sustainable, living wage employment. Staff met with the Rural Economic Development Division Asst Secretary at NC Commerce (NCC) in 08/23 to discuss potential collaborations, including using NC funding initiatives to award resources to ES, Community Action Agencies, & others to address employment & job training opportunities for PEH. The CoC met with the Division of Workforce Solutions Asst Secretary at NCC in 09/23 to connect to local Workforce Development boards to foster partnerships to align with the impending launch of the CoC's CoC-wide rehousing program seeded through awarded SNOFO funding. Two, the CoC connects locally to employment providers & services. CoC members, such as Vocational Rehabilitation (VR), NCW, & Work First (WF), provide direct assistance to PEH to increase employment income. Staff review HMIS data with program staff, comparing current & past performance on employment income, brainstorming strategies, setting goals. & having conversations with local job resources to support work procurement. In CY22, CoC-funded programs helped 10% of participants increase employment income. The CoC advertises all employment-related resources to stakeholders through monthly meetings & email list. These resources include job fairs & listings, employment training, & employment provider news. 2) 100% of funded programs connect HHs to mainstream employment programs. They collaborate with mainstream services such as VR, NCW, WF, Goodwill, & DSS work programs to increase job placement, improve skills, mentor participants, & decrease barriers. The CoC encourages providers to formalize partnerships through MOUs. 22% of the CoC funding portfolio lies with Managed Care Organizations (MCO). Each MCO has a Supported Employment program, helping HHs with behavioral health issues find & maintain long-term employment. This program is available to provide employment support to HHs in PSH/RRH across the CoC. 3) An NCCEH Project Specialist works with state & local communities to help HHs increase income & access employment.

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

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 The CoC employs several strategies to increase non-employment cash income. Members across the CoC, such as VAMCs, DSS, & NC Legal Aid staff, provide direct assistance to people experiencing homelessness to increase non-employment cash income from sources such as VA disability & pensions. TANF, & SSI/SSDI. The CoC also has trained SOAR workers who help people with disabilities to navigate the often-complex SSA system to access disability benefits. The CoC sets non-employment cash income benchmarks in funding competitions, maximizing points for projects that increase non-employment cash income for 30% of HHs. CoC staff review HMIS data with program staff, comparing current & past performance on non-employment cash income. They brainstorm strategies, set goals, & have conversations with local benefit resources to support income procurement. In CY22, CoC-funded programs helped 39% of stayers & leavers increase non-employment cash income. The CoC incentivizes programs applying for CoC & ESG funding to increase nonemployment cash income through extra points on scorecards. The CoC advertises & encourages providers to send staff to regular SOAR trainings, connecting them to the NCCEH staff member who serves as the SOAR state lead. The CoC emphasizes using SOAR to apply for SSA benefits to increase non-employment income for people with disabling conditions. Over 3 years, 15 caseworkers have been SOAR-trained & worked with clients to access SSA benefits. Many CoC providers have formal relationships with local benefit specialists, inviting them into ES/TH/Food programs to work directly with program participants. CoC staff seek state & local resources that can help increase access to non-employment cash income & connect them to regional leadership & specific providers to build partnerships locally. 2) An NCCEH Project Specialist works with NC & local entities & providers in the CoC to help increase non-employment cash income & access. An NCCEH Project Specialist oversees all trained SOAR caseworkers in the state.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-	1. New Pl	H-PSH/PH-RRH Project–Leveraging H	lousing Resources.		
	NOFO	Section V.B.6.a.			
	You mu Screen		mmitment attachment to the 4B. Attacl	hments	
Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?					
3A-	2. New Pl	H-PSH/PH-RRH Project-Leveraging H	lealthcare Resources.		
	NOFO Section V.B.6.b.				
You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.					
Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?				Yes	
3A-3. Leveraging Housing/Healthcare Resources–List of Projects.					
NOFO Sections V.B.6.a. and V.B.6.b.					
If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.					
Project Name		Project Type	Rank Number	Leverage 1	Гуре
Back@Home-BoS Ann PH-RRH 28 Both					

|--|

3A-3. List of Projects.

1. What is the name of the new project? Back@Home-BoS Annual RRH

2. Enter the Unique Entity Identifier (UEI): UDLHCUUWF3J8

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your 28 CoC's Priority Listing:

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
Ta		Nia
for I	our CoC requesting funding for any new project application requesting \$200,000 or more in funding nousing rehabilitation or new construction?	NO
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
		1
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

		1
3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
		-
proje	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other eral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

(limit 2,500 characters)

N/A

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 - 24 CFR part 578;
 - FY 2023 CoC Application Navigational Guide;
 - Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4,	A-1. New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	
	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
4A	-1a. DV Bonus Project Types.	
	NOFO Section I.B.3.I.	
		_
	Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.	
		_
	Project Type	1
1.	SSO Coordinated Entry	Yes
2.	PH-RRH or Joint TH and PH-RRH Component	No
Yo	u must click "Save" after selecting Yes for element 2 PH-RRH or Joir TH/RRH Component to view questions 4A-3b. through 4A-3h.	nt
4,	A-2. Information About the Project Applicant for the New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project.	
	NOFO Section I.B.3.I(3)	
	Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:	

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1.	Applicant Name	North Carolina Coalition to End Homelessness
2.	Project Name	FY23 NC BoS CoC DV Bonus SSO-CE
3.	Project Ranking on Priority Listing	29
4.	Unique Entity Identifier (UEI)	DLNXX954H879
5.	Amount Requested	\$963,600

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

	Describe in the field below:
1.	the inadequacies of your CoC's current Coordinated Entry that limits its ability to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and
2.	how the proposed project addresses inadequacies identified in element 1 of this question.

(limit 2,500 characters)

1) The CoC has 55 projects serving people experiencing interpersonal violence across the CoC w/ approximately 1/3 participating regularly in CE. For participating VSPs, the system's safety protocols can often prohibit VSPs from fully participating because most are low-capacity projects w/ competing priorities for their time & attention. Due to prohibitions from entering survivor data into HMIS, the CoC uses an alternative process to collect VSP referrals. Using an Excel spreadsheet, VSPs complete a coded entry for each HH & email the sheet to the CE Lead to manually enter in the BNL. While CE Leads (CEL) try to fill gaps, current resources used to fund CEL activities do not allow any region to provide dedicated CE staff, limiting efforts to assist participating VSPs. CEL engage non-participating VSPs. However, these efforts remain inconsistent due to time constraints & the effort required to sufficiently address safety concerns & the ongoing TA needed to help them participate. Often VSPs choose not to participate due to a lack of understanding of the CE process, not trusting CE to protect HH safety, & the unwillingness to attend case conferencing meetings regularly. The lack of financial resources to support CEL activities means that fewer VSPs participate in CE & fewer HHs access PH. Inconsistent referrals &/or a lack of VSP participation has slowed the recently launched CoC-wide, DV Bonus-funded RRH project (S@H) & will continue to impede the project's effectiveness until issues have been addressed. 2) The new SSO-CE DV Bonus project will address these issues by: a) NCCEH will increase funding to subcontracted CEL, allowing each region to hire full-time, dedicated CE staff. CEL will increase capacity to fully implement protocols to increase survivor access to the BNL; support participating VSPs, adding capacity to get HHs added to the BNL; engage non-participating VSPs to understand CE & address safety concerns, provide training, TA, & consistent follow-up; b)NCCEH will hire a dedicated DV CE specialist to work with subcontracted CEL to improve survivor access; build stronger partnerships with NCCADV & NC Coalition Against Sexual Assault to support provider engagement efforts; facilitate feedback forums with VSPs & survivors to improve the system; staff CEC meetings to update CE P&Ps; & engage local VSPs with CEL through TA; c) new NCCEH CE staff will liaise with providers participating in S@H, providing TA as needed to increase access to referrals.

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

(limit 2,500 characters)

1,2) The new SSO-CE DV Bonus project (DVBP) allows the CoC to increase participation of survivors with a range of lived experience of interpersonal violence (SLEIV) in governance, decision-making, & policy & program development. The CoC has a strong partnership with NCCADV, with staff from both agencies sitting on reciprocal Governance & Advisory Boards, providing TA to providers in both systems, & collaborating on the implementation of the CoC-wide, DV Bonus RRH project. The DVBP allows the CoC to build new relationships with the NC Coalition Against Sexual Assault & NC Stop Human Trafficking, key coalitions including other types of SLEIV. By deepening current & building new relationships with state coalitions, the CoC can develop a more comprehensive feedback loop through community forums, surveys, & participation on subcommittees, workgroups, & boards. While the CEC includes 3 SLEIV, the CoC will update membership protocols to ensure more diversity including PLE of DV, SA, & human trafficking. The CoC will evaluate subcommittee & advisory board membership slates to ensure inclusion of at least 1-2 SLEIV to assist with decision-making in all areas of coordination. policy, & program work. In its annual CE evaluation, the CoC surveys participating agencies, people enrolled in RRH/PSH programs in the last year, & PEH entering CE. For current/former CE participants (including SLEIV), surveys offer an opportunity to highlight types of assistance that would be most helpful, CE effectiveness to provide services/resources, provider strengths/weaknesses to communicate expectations, & evaluation of service/housing connection timeliness. The CEC formed a CE Equity Core Team including CE Leads, CoC staff, & PLE (including a SLEIV) to develop a new assessment to replace the VI-SPDAT. The CoC will pilot the new assessment in 4 RCs through 09/23. collect feedback, evaluate data, & update the new assessment with the hope to launch the new assessment as a replacement to the VI-SPDAT in the full CoC in 01/24. Upon launch of the new assessment, the CoC will update the annual CE evaluation process to include both individual interviews & in-person forums to solicit feedback from participants. The DVBP allows NCCEH to hire a dedicated DV CE specialist to hold interviews/forums across the CoC's geographic area specifically with SLEIV that can be incorporated in decisionmaking on how to make CE work more effectively & safely.

Applicant Name	
This list contains no items	

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4B. Attachments Screen For All Application Questions

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

	_				
1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.				
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.				
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.				
4.	Attachments must mate	ch the questions they	are associated with.		
5.	Only upload documents responsive to the questions posed-including other material slows down the review process, which ultimately slows down the funding process.				
6.	If you cannot read the	attachment, it is likely	we cannot read it either.		
	. We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).				
	. We must be able t	o read everything yo	u want us to consider in any attachment.		
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.				
8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.				
Document Typ	Document Type		Document Description	Date Attached	
1C-7. PHA Ho Preference	meless	No	PHA Homeless Pref	09/14/2023	
1C-7. PHA Mo Preference	oving On	No	Moving On Preference	09/13/2023	
1D-11a. Lette Working Grou	r Signed by p	Yes	Letter Signed by	09/15/2023	
1D-2a. Housing First Evaluation		Yes	Housing First Eva	09/14/2023	
1E-1. Web Posting of Local Competition Deadline		Yes	Web Posting of Lo	08/28/2023	
1E-2. Local Competition Scoring Tool		Yes	Local Competition	09/07/2023	
1E-2a. Scored Forms for One Project		Yes	Scored Forms for	08/28/2023	
1E-5. Notificat Rejected-Redu	ion of Projects uced	Yes	Notification of P	09/07/2023	
1E-5a. Notifica Accepted	ation of Projects	Yes	Notification of P	09/07/2023	
1E-5b. Local C Selection Res	Competition ults	Yes	Local Competition	08/23/2023	
1E-5c. Web Po Approved Con Application		Yes	Web Posting-CoC-A	09/21/2023	

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes	Notification of C	09/21/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY2023 HDX Compet	08/23/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leverage	09/19/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal	09/21/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: Moving On Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

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Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Web Posting-CoC-Approved Consolidated

Application

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Attachment Details

Document Description: Notification of CoC-Approved Consolidated

Application

Attachment Details

Document Description: FY2023 HDX Competition Report

Attachment Details

Document Description: Housing Leverage Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

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Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/23/2023
1B. Inclusive Structure	09/21/2023
1C. Coordination and Engagement	09/21/2023
1D. Coordination and Engagement Cont'd	09/21/2023
1E. Project Review/Ranking	09/21/2023
2A. HMIS Implementation	09/19/2023
2B. Point-in-Time (PIT) Count	09/21/2023
2C. System Performance	09/21/2023
3A. Coordination with Housing and Healthcare	09/21/2023
3B. Rehabilitation/New Construction Costs	09/19/2023
3C. Serving Homeless Under Other Federal Statutes	09/19/2023

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4A. DV Bonus Project Applicants 09/19/2023

4B. Attachments Screen 09/21/2023

Submission Summary No Input Required

HCV ADMINISTRATIVE PLAN

EFFECTIVE 4/1/2023

Western Piedmont Council of Governments



Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

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

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

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

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

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

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

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

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

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

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

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

WPCOG Policy

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

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

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

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

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

4-I.C. ACCESSIBILITY OF THE APPLICATION PROCESS

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

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

Limited English Proficiency

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

4-I.D. PLACEMENT ON THE WAITING LIST

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

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

Ineligible for Placement on the Waiting List

WPCOG Policy

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

Eligible for Placement on the Waiting List

WPCOG Policy

The PHA will send written notification of the preliminary eligibility determination within 30 business days of receiving a complete application.

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

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

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

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

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

4-II.B. ORGANIZATION OF THE WAITING LIST [24 CFR 982,204 and 205]

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

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

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

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

WPCOG Policy

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

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

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

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

WPCOG Policy

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

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

Closing the Waiting List

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

WPCOG Policy

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

Reopening the Waiting List

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

WPCOG Policy

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

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

Hickory Daily Record

Lenoir News Topic

Morganton News Herald

Taylorsville Times

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

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

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

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

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

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

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

WPCOG Policy

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

4-II.E. REPORTING CHANGES IN FAMILY CIRCUMSTANCES

WPCOG Policy

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

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

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

Purging the Waiting List

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

WPCOG Policy

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

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

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

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

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

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

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

Removal from the Waiting List

WPCOG Policy

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

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

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

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

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

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

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

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

Targeted Funding [24 CFR 982.204(e)]

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

WPCOG Policy

The PHA administers the following types of targeted funding:

Family Unification Program

Mainstream Vouchers

Emergency Housing Vouchers

HUD-VASH Vouchers

Regular HCV Funding

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

4-III.C. SELECTION METHOD

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

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

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

WPCOG Policy

The PHA will use the following local preferences:

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

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

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

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

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

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

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

WPCOG Policy

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

Order of Selection

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

WPCOG Policy

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

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

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

5. Homeless families will receive 1 point.

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

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

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

4-III.D. NOTIFICATION OF SELECTION

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

WPCOG Policy

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

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

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

4-III.E. THE APPLICATION INTERVIEW

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

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

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

WPCOG Policy

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

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

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

Any required documents or information that the family is unable to provide must be provided within 15 days of the request letter. (Chapter 7 provides details about longer submission deadlines for particular items, including documentation of eligible noncitizen status). If the family is unable to obtain the information or materials within the required time frame, the family may request an extension. If the required documents and information are not provided within the required time frame (plus any extensions), the family will be sent a notice of denial (See Chapter 3).

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

4-III.F. COMPLETING THE APPLICATION PROCESS

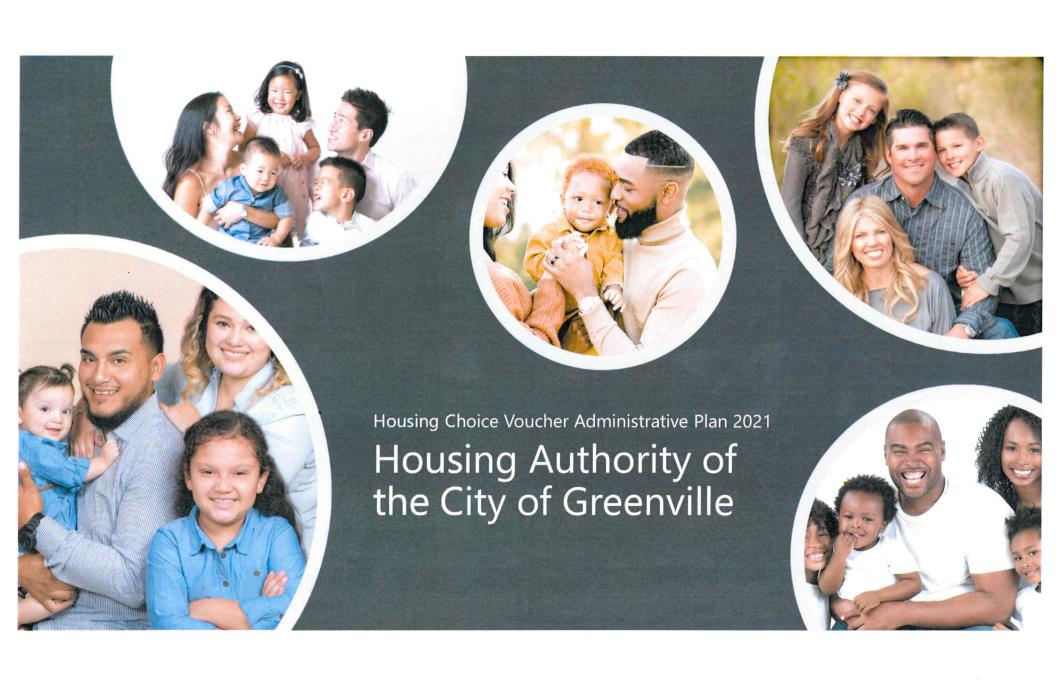
The PHA must verify all information provided by the family (see Chapter 7). Based on verified information, the PHA must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference that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

WPCOG Policy

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

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

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



Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

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

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

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

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

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

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

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

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

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

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

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

HACG Policy

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

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

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

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

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

4-I.C. ACCESSIBILITY OF THE APPLICATION PROCESS

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

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

Limited English Proficiency

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

4-I.D. PLACEMENT ON THE WAITING LIST

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

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

Ineligible for Placement on the Waiting List

HACG Policy

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

Eligible for Placement on the Waiting List

HACG Policy

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

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

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

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

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

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

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

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

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

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

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

HACG Policy

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

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

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

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

HACG Policy

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

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

Closing the Waiting List

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

HACG Policy

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

Reopening the Waiting List

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

HACG Policy

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

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

Daily Reflector

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

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

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

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

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

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

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

HACG Policy

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

4-II.E. REPORTING CHANGES IN FAMILY CIRCUMSTANCES

HACG Policy

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

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

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

Purging the Waiting List

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

HACG Policy

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

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

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

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

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

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

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

Removal from the Waiting List

HACG Policy

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

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

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

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

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

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

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

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

Targeted Funding [24 CFR 982.204(e)]

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

HACG Policy

The HACG administers the following types of targeted funding:

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

Regular HCV Funding

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

4-III.C. SELECTION METHOD

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

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

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

HACG Policy

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

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

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

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

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

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

HACG Policy

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

Order of Selection

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

HACG Policy

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

4-III.D. NOTIFICATION OF SELECTION

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

HACG Policy

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

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

Who is required to attend the interview

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

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

4-III.E. THE APPLICATION INTERVIEW

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

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

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

HACG Policy

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

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

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

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

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

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

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

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

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

4-III.F. COMPLETING THE APPLICATION PROCESS

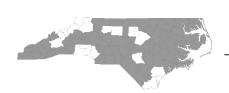
The HACG must verify all information provided by the family (see Chapter 7). Based on verified information, the HACG must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference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

HACG Policy

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

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

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



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

To Whom It May Concern,

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

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

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

With continued involvement and leadership of the LEAC, its members support the plans & strategies outlined in the FY2023 CoC Program Application submitted to HUD to serve the most vulnerable populations experiencing homelessness.

Alyce Knaflich

Pocusigned by:

Pocusigned by:

Rachelle Dugan

Pocusigned by:

Pachelle Dugan

Pocusigned by:





Agency Name: Click or tap here to enter text.

Staff Reviewer: Click or tap here to enter text.

Date of Review: Click or tap here to enter text.

Document Review

Document Type	Compliance Issue	Question to Answer	Me	ets Standard?	Notes	Potential Solution
Job Description: Program Director Staff and Training Form	Written standards	Is the staff member qualified for the program?		Degree Experience	Click or tap here to enter text.	Click or tap here to enter text.
Job Description: Case Manager Staff and Training	Written Standards	Is the staff member qualified for the program?		Degree Experience	Click or tap here to enter text.	Click or tap here to enter text.
Form		Does the job description describe case management activities appropriate for the program?		Tenancy Supports CM in home Use CM Tool Income Supports	Click or tap here to enter text.	Click or tap here to enter text.
		Does the job description describe housing search and location services?		Yes No	Click or tap here to enter text.	Click or tap here to enter text.

Job Description: Housing Specialist Staff and Training Form	Written Standards	Is the staff member qualified for the program?	Degree Experience	Click or tap here to enter text.	Click or tap here to enter text.
		Does the job description describe housing search and location services?	Yes	Click or tap here to enter text.	Click or tap here to enter text.
Staff and Training Form	Written Standards	Does training list contain trainings on Housing First, written standards, or comparable?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
Program Policies and Procedures Program	Written Standards	Do P&P include HUD Notice CPD-16-11?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
Participant Agreements		Do P&P include process for finding chronically homeless households and what happens when they cannot be found in the community?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		Does the program require households to participate in services?	Yes	Click or tap here to enter text.	Click or tap here to enter text.

Can enrolled households be terminated from the program for refusing services?	☐ Yes	Click or tap here to enter text.	Click or tap here to enter text.
Do P&P use HUD's renta payment standards when requiring households to pay part of rent?		Click or tap here to enter text.	Click or tap here to enter text.
Does the program limit the number of months o assistance to enrolled households?	☐ Yes f ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
Does the program meet the Key Elements of PSH	Lease or rental agreement does not have any provision that would not be found in leases held by someone who does not have a disability Participation in services is voluntary and tenants cannot be evicted for rejecting services	Click or tap here to enter text.	Click or tap here to enter text. Click or tap here to enter text.

		☐ House rules, if		
		any, are like those		
		found in housing for		
		people who do not		
		have disabilities and		
		do not restrict		
		visitors or otherwise		
		interfere with a life		
		in the community		
		☐ Housing is not		
		time limited, and		
		the lease is		
		renewable at		
		tenants' and		
		owners' request		
		\square Tenants have		
		choice in the		
		support services		
		they receive		
		☐ As needs		
		change over time,		
		tenants can receive		
		more intensive or		
		less intensive		
		support services		
		without losing their		
		homes		
1	İ			

		Do P&P describe the process for annual recertification in the program?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		Do P&P include appropriate termination policies and procedures?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		Do P&P include process for pulling HMIS APR data at least on a quarterly basis?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
Policies and Procedures	Written Standards Compliance	Do P&Ps include the VAWA Emergency Transfer Policy	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
HMIS Report 0640	Written Standards	Are all households entered in the last operating year chronically homeless?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
Participant Documents	Written Standards Compliance				

Verification of	Is chronic homelessness	Yes	Click or tap here to	Click or tap here to enter text.
chronic	documentation complete		enter text.	
homelessness for	and accurate?	No		
all households				
entered into the				
program for the				
operating year				

Disability	Is disability	Yes	Click or tap here to	Click or tap here to enter text.
documentation	documentation complete		enter text. Click or tap	
for all households	and accurate?	No	here to enter text.	
entered into the				
program for the				
operating year				

Verification of	Is verification of		Yes	Click or tap here to	Click or tap here to enter text.
homelessness and	homelessness and			enter text.	
disability	disability documentation		No		
documentation	complete and accurate?				
for all households					
entered into the					
program for the					
operating year					
(when no					
chronically					
homeless					
households could					
be found)					
,		l			l l

Documentation of process to find prioritized chronically homeless individuals without success	Did the program document the process of trying to find chronically homeless households for enrollment in the program?	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
VI-SPDATs for each household entered into the program during the operating year	Do VI-SPDATs show sufficient acuity to warrant entry into PSH?	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.

	Do all new entries into the program have a VI- SPDAT, verifying that all participants enrolled in agency programs in the last operating year were referred through CA?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
Copy of sample lease or sublease	Does the lease or sublease have any conditions or requirements not found in standard leases?	Yes	Click or tap here to enter text.	Click or tap here to enter text.
	Is the lease or sublease renewable upon expiration?	Yes	Click or tap here to enter text.	Click or tap here to enter text.
Written notice to all households terminated from projects during the operating year	Do projects have written notices for all households terminated from the project?	Yes No	Click or tap here to enter text.	Click or tap here to enter text. Click or tap here to enter text.

	Do the reasons for termination from projects meet written standards?	Yes	Click or tap here to enter text.	
Client file #1	Does the file contain: • Documentation of homelessness with signatures? Documentation is third party?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
	 Documentation of chronic homelessness with signatures? Documentation is third party? 	Yes	Click or tap here to enter text.	Click or tap here to enter text.
	 Documentation of disabling condition with approved HUD signatory? Documentation is third party? 	Yes	Click or tap here to enter text.	Click or tap here to enter text. Click or tap here to enter text.

Case plan w	ith	Click or tap here to	
written goal		enter text.	
		enter text.	
by both case			
manager an			
participant?			
			Click or tap here to enter text.
Progress note	tes? \square Yes	Click or tap here to	
		enter text.	
	□ No		
			Click or tap here to enter text.
HOS inspect	ion form	Click or tap here to	chek of tap here to effice text.
		· ·	
on each unit		enter text.	
through the	grant?		
			Click or tap here to enter text.
Lead-based	paint	Click or tap here to	
inspection o		enter text.	
acknowledg			
that it is not			
tilat it is not	. Heeded!		
			Click or tap here to enter text.
Rent reason		Click or tap here to	
documentat	tion?	enter text.	
	□ No		
			Click or tap here to enter text.
			,

Copy of lease or sublease with first period of lease for 1 year?	☐ Yes	Click or tap here to enter text.	
Lease or sublease meeting FMR for the designated	☐ Yes	Click or tap here to enter text.	Click or tap here to enter text.
geographic area? http://bit.ly/2qgjWEV		Click or tan hara to	Click or tap here to enter text.
Rent calculation/utility allowance documentation with attached pay stubs and income verification that meets HUD standards?	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
Annual recertification paperwork, showing changes in income and client rent payment expectations?	□ Yes □ No	Click or tap here to enter text.	

Client File #2	Does the file contain:	☐ Yes	Click or tap here to	Click or tap here to enter text.
	Documentation of		enter text.	
	homelessness with	□ No		
	signatures?			
	Documentation is			
	third party?			
	Documentation of	☐ Yes	Click or tap here to	Click or tap here to enter text.
	chronic		enter text.	'
	homelessness with	□ No		
	signatures?			
	Documentation is			
	third party?			
	Documentation of	□ Yes	Click or tap here to	Click or tap here to enter text.
	disabling condition		enter text.	
	with approved HUD	□ No		
	signatory?			
	Documentation is			
	third party?			
	Case plan with	☐ Yes	Click or tap here to	Click or tap here to enter text.
	written goals signed		enter text.	
	by both case	□ No		
	manager and			
	participant?			
				_
	Progress notes?	□ Yes	Click or tap here to	Click or tap here to enter text.
			enter text.	Click of tap fiere to effice text.
		□ No		
		J		

HQS inspection form on each unit paid through the grant?	☐ Yes	Click or tap here to enter text.	Click or tap here to enter text.
 Lead-based paint inspection or acknowledgement that it is not needed? 	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
 Rent reasonableness documentation? 	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
 Copy of lease or sublease with first period of lease for 1 year? 	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.
 Lease or sublease meeting FMR for the designated geographic area? http://bit.ly/2qgjWEV 	☐ Yes ☐ No	Click or tap here to enter text.	Click or tap here to enter text.

		Rent calculation/utility allowance documentation with attached pay stubs and income verification that meets HUD standards?	Yes	Click or tap here to enter text.	Click or tap here to enter text.
		 Annual recertification paperwork, showing changes in income and client rent payment expectations? 	Yes	Click or tap here to enter text.	Click or tap here to enter text.
Ineligible Households List	Written Standards	Does each household deemed ineligible for projects have a valid reason for ineligibility per the written standards?	Yes	Click or tap here to enter text.	Click or tap here to enter text.
Grant Information Form	Compliance	Has the agency answered all questions sufficiently and accurately? Do projects have equal to or more assisted units	Yes No Yes	Click or tap here to enter text. Click or tap here to	Click or tap here to enter text. Click or tap here to enter text.
		than the number proposed in the application?	No	enter text.	

		Does the agency's board have a currently or formerly homeless	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		individual as a member? Do projects fully participate in coordinated assessment?	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		Do projects offer services consistent with permanent supportive	Yes	Click or tap here to enter text.	Click or tap here to enter text.
		housing programs? Did the agency provide an independent financial	Yes No	Click or tap here to enter text.	Click or tap here to enter text.
		audit without findings?	N/A (no audit)		
eLOCCS Grant Summary Screenshot	Spending	Does each project that has been operating for a least one year spent a minimum 90% of the	Yes	List projects by number that did not spend 90% of budgeted funding:	Click or tap here to enter text.
eLOCCS Voucher List		budgeted funding? Does the agency draw from its grants at least	Yes	Click or tap here to enter text. Click or tap here to	
		quarterly?	No	enter text. Click or tap here to	
				enter text. Click or tap here to enter text.	

Matching documentation	Spending	Did each project have the required in-kind or cash match (25% of 100%)?	Yes No	List projects by number that did have 25% match: Click or tap here to enter text. Click or tap here to enter text.	Click or tap here to enter text.
		Does the match documentation show expenses eligible for HUD CoC PSH programs?	Yes No	List projects that had ineligible expenses: Click or tap here to enter text. Click or tap here to enter text.	Click or tap here to enter text.
				Click or tap here to enter text.	
		Is documentation sufficient for HUD documentation of matching funds?	Yes No	List projects that has insufficient documentation: Click or tap here to enter text.	Click or tap here to enter text.
				Click or tap here to enter text. Click or tap here to enter text.	

Written Goals and	Written Standards	Do goals and objectives	□ Yes	Click or tap here to	Click or tap here to enter text.
Objectives		make sense for a PSH	□ No	enter text.	
		program?			
HMIS Report 0640	Written Standards	Do Q2-Q5 show 10% or	□ Yes	Click or tap here to	Click or tap here to enter text.
		less errors?	□ No	enter text.	



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

2023 Scorecard for CoC Funds: New Projects

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

This scorecard has four goals:

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

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

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

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

Project Quality Requirements		
New projects must receive at least the standard and minimum score in each	Maximum	PSH: 185
section. Standards and funding priorities will be used in the ranking process. If a	Score	RRH: 166
standard or minimum is not met, further review will be triggered. After further	Possible:	TH-RRH: 166
review, the Project Review Committee will determine potential consequences,		SSO-CE: 101
including whether the project is ineligible for inclusion in the final NC BoS CoC	Project	
application or will receive reduced funding. Thresholds are a requirement for new	Score:	
projects. Projects that do not meet thresholds will not be put through the next		
steps in the application process.		

Combined Scoring

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

Section I	General Application	Section 1	Score
Possible Point	s: PSH, RRH, TH-RRH: 9 SSO-CE: 3		
Minimum Poir	its Required or Review is Triggered: PSH, RRH, TH-RRH: 5		
	SSO-CE: 2		
Consistency w	ith Mission		
1.1a	Does the project fit within the mission of the agency? Does	Stand	ard
	the agency currently serve households experiencing		_
	homelessness in their community?	met	unmet
		unmet, docur	mentation not
	[New Project Thresholds and Standards Form]	prov	rided
1.1b	Does the agency describe prior experience serving persons	Stand	ard
	experiencing homelessness that has prepared the agency for		□.unmot
	administering this grant?	met	unmet
	[Now Project Throsholds and Standards Form]	l .	nentation not
	[New Project Thresholds and Standards Form]	prov	rided
Accuracy and	Appropriateness of Responses	Possible Score	Project Score
1.2a	Does the project description address all parts of the detailed	3	
	instructions?	3	
	[Proj. App: 3B, Q1 Project Application Detailed Instructions]		
1.2b	PSH, RRH, TH-RRH only : Do the answers regarding assistance		
	to help participants obtain and remain in PH address all parts	3	
	of the detailed instructions?		
	[Proj. App: 4A, Q1 Project Application Detailed Instructions]		
1.2c	PSH, RRH, TH-RRH only: Do the answers regarding		
	coordination & integration with other mainstream services &	_	
	employment programs address all parts of the detailed	3	
	instructions?		
	[Proj. App: 4B, O2 Project Application Detailed Instructions]		I



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



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



2.2c	TH-RRH and RRH projects: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the NC ESG Office or operating a RRH program with other funding sources that adheres to the RRH program standards. (Exceptions may be made for Public Housing Authorities - PHAs are not eligible to apply for ESG funds but are eligible for CoC funding. Exceptions may also be made for projects applying for the DV-Bonus funding).	Threshold met unmet N/A unmet, documentation not provided
[New Project Thresholds and Standards Form] PSH, RRH, TH-RRH Only: Services Resource Leverage Plan		
2.3	CoC-funded programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance. Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a dedicated funding stream to provide some services specifically for program participants that are funded by another source besides CoC program funds. [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] • Services provided by other funding sources exceed the required 25% match by at least 15%.	
	[Submit MOU/match letter]	
	Program documents leverage at 15% or above match.	10 points
	Program documents leverage between 5-10% above match.	5 points
	Program does not meet either criteria above.	0 points
	Project Score	
Housing First		
2.4a	Does this project use a Housing First approach? Must meet all statements in 2.4b and 2.4c below to meet threshold. Program should not have any policies and procedures that would result in screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures, sample lease, P&Ps Page Reference Form]	Threshold (must meet all statements in 2.4b and 2.4c below) met (2 of 2 met) unmet (1 or more missed)



2.4b	The project does not screen out for:	
	☐ Having too little or no income ☐ Active or history of substance use	☐ met ☐ unmet
	☐ Having a criminal record (with exceptions for state-	unmet, documentation not
	mandated restrictions)	provided
	History of domestic violence (e.g., lack of protective order,	·
	or separation from abuser, or law enforcement involvement)	
2.4c	Does the project ensure that participants are not terminated	
	from the program for the following reasons:	
	☐ Failure to participate in supportive services	☐ met ☐ unmet
	☐ Failure to make progress on a service plan	
	☐ Loss of income or failure to improve income	unmet, documentation not
	☐ Domestic violence	provided
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
	☐ Failure to maintain recovery	
PSH Projects O	Only: Key Elements of Permanent Supportive Housing	
_	nould meet these 9 standards set forth by <u>SAMHSA</u> , however, the	ey do not need to be explicitly
	Program Policies & Procedures in order to meet the standard. ¹	· · ·
2.5a	Leases or rental agreements do not have any provisions that	Standard
	would not be found in leases held by someone who does not	Standard
	have a disability.	☐ met ☐ unmet ☐ N/A
	[Sample lease]	unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note	why):
	neviewer votes (if diffree or documentation not provided, note	. w.,y).
2.5b	Participation in services is voluntary and tenants cannot be	
	terminated from the program for rejecting services.	Standard
	[Program policies and procedures, P&Ps Page Reference	☐ met ☐ unmet ☐ N/A
	Form]	<u></u>
		unmet, documentation not provided
	Deviawer Nates (if upmet or desumentation not provided not	'
	Reviewer Notes (if unmet or documentation not provided, note	e wily).
2.5c	House rules, if any, are similar to those found in housing for	Standard
	people who do not have disabilities and do not restrict	Standard
	visitors or otherwise interfere with a life in the community.	☐ met ☐ unmet ☐ N/A
	[Program policies and procedures, P&Ps Page Reference	unmet, documentation not
	Form]	provided
	Reviewer Notes (if unmet or documentation not provided, note	a why):
	heriewer wotes in annet or abcumentation not provided, note	e vviiy).

 $^{^{1}\,\}underline{\text{https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pdf}}$



2.5d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option.	Standard				
	[Program policies and procedures, P&Ps Page Reference	□ mat □unmat □N/A				
	Form, sample lease]	☐ met ☐ unmet ☐ N/A				
	, ,	unmet, documentation not				
		provided				
	Reviewer Notes (if unmet or documentation not provided, note	e why):				
2.5e	Tenants have choices in the support services that they					
	receive. They are asked about their choices and can choose	Standard				
	from a range of services, and different tenants receive					
	different types of services based on their needs and	☐ met ☐ unmet ☐ N/A				
	preferences. [Program policies and procedures, P&Ps Page Reference	unmet, documentation not				
	[Program policies and procedures, P&Ps Page Rejerence Form]	provided				
	Reviewer Notes (if unmet or documentation not provided, note	e why):				
2.5f	As needs change over time, tenants can receive more	Standard				
	intensive or less intensive support services without losing	Standard				
	their homes.	☐ met ☐ unmet ☐ N/A				
	[Program policies and procedures, P&Ps Page Reference	unmet, documentation not				
	Form]	provided				
	De in a Nation (if an also de marche)					
	Reviewer Notes (if unmet or documentation not provided, note	e wny):				
2.5g	Before moving into permanent housing, tenants are asked					
2.38	about their housing preference and are offered the same	Standard				
	range of choices as are available to others at their income					
	level in the same housing market.	☐ met ☐ unmet ☐ N/A				
	[Program policies and procedures, P&Ps Page Reference	unmet, documentation not				
	Form]	provided				
	Reviewer Notes (if unmet or documentation not provided, note	e why):				
	,					
2.5h	Support services promoting recovery are designed to help	Ctandard				
	tenants choose, get, and keep housing. In all forms of	Standard				
	permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such	☐ met ☐ unmet ☐ N/A				
	as paying rent on time), and get along with neighbors.	unmet, documentation not				
	[Program policies and procedures, P&Ps Page Reference	provided				
	Form]					
	Reviewer Notes (if unmet or documentation not provided, note why):					
2.5i	The provision of housing and the provision of support					
	services are distinct. (Note: This means that if a person is	Standard				



	evicted from a unit, they can continue receiving services and	
	be rehoused. Or, if the tenant refuses services or the service	☐ met ☐ unmet ☐ N/A
	provider terminates services, the tenant can remain in	unmet, documentation not
	housing).	provided
	[Program policies and procedures, P&Ps Page Reference	·
	Form]	
	Reviewer Notes (if unmet or documentation not provided, note	why):
For TH-RRH and	d RRH Programs Only: Rapid Rehousing Performance Benchma	rks and Program Standards
Rapid Rehousin	g projects should encompass the following program standards a	s defined by the National Alliance to
End Homelessn	ess, the U.S. Department of Veteran Affairs (VA), the U.S. Depar	tment of Housing and Urban
Development (I	HUD), U.S. Interagency Council on Homelessness (USICH), and Al	ot Associates ^{2.}
2.6a	Core Program Standard: Housing Identification	
2.6a1	Program designates staff whose responsibility is to identify	
	and recruit landlords and encourage them to rent to	
	homeless households served by the program. Staff have the	
	knowledge, skills, and agency resources to: understand	
	landlords' perspectives, understand landlord and tenant	
	rights and responsibilities, and negotiate landlord supports. A	
	program may have dedicated staff for whom this is the	Standard
	primary responsibility. If a program does not have a	□ mast □mast □ N/A
	dedicated staff person(s) who performs this function, case	☐ met ☐ unmet ☐ N/A
	manager job descriptions must include responsibilities	unmet, documentation not
	including landlord recruitment and negotiation and at least	provided
	some of the program's case managers must be trained in this	
	specialized skill set to perform the recruitment function	
	effectively.	
	[Program policies and procedures, P&Ps Page Reference	
	Form]	
	Tomy	
	Reviewer Notes (if unmet or documentation not provided, note	e why):
	,	,
2.6a2	Program has written policies and procedures for landlord	Standard
	recruitment activities, including screening out potential	Stantagra
	landlord partners who have a history of poor compliance	☐ met ☐ unmet ☐ N/A
	with their legal responsibilities and fair housing practices.	unmet, documentation not
	[Program policies and procedures, P&Ps Page Reference	provided
	Form]	provided
	Reviewer Notes (if unmet or documentation not provided, note	e why):
2.6a3	Program offers a standard, basic level of support to all	
2.003	landlords who lease to program participants. This support is	Standard
	detailed in a written policy distributed to landlords. Program	
	detailed in a written policy distributed to idilulorus. Program	☐ met ☐ unmet ☐ N/A

² http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards 2016.pdf



	can negotiate additional supports, as needed, on a case-by- case basis. [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note	unmet, documentation not provided
2.6a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note)	Standard met unmet N/A unmet, documentation not provided
2.6b	Core Program Standard: Rent and Move-In Assistance	
2.6b1	Program staff are trained on regulatory requirements of all Rapid Rehousing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. [Program policies and procedures, P&Ps Page Reference Form]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note	e why):
2.6b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a participant, as well as defined and objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. (Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should continue and end for that household.) [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note	Standard met unmet N/A unmet, documentation not provided
2.6b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to	Standard



	households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid rehousing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement. [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note	met unmet N/A unmet, documentation not provided e why):
2.6c	Core Program Standard: Rapid Rehousing Case Management and Services	
2.6c1	Except where dictated by the funder, program participants direct when, where, and how often case management meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever possible. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager). [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note	Standard met unmet N/A unmet, documentation not provided
2.6c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. (Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan). [Program policies and procedures, P&Ps Page Reference Form]	Standard met unmet N/A unmet, documentation not provided
2.6-2	Reviewer Notes (if unmet or documentation not provided, note	e why):
2.6c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [Program policies and procedures, P&Ps Page Reference Form] Reviewer Notes (if unmet or documentation not provided, note)	Standard met unmet N/A unmet, documentation not provided why):
2.6c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where	Standard met unmet N/A



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

Section III: Scope of Services		Section III Score
Possible Points: PSH, RRH, TH-RRH: 16	SSO-CE: 6	



Minimun SSO-CE: 4	n Points Required or Review is Triggered: PSH, RRH, TH-RRH: 10		
		Possible Score	Project Score
3.1	Does the applicant demonstrate they will meet the anticipated individual service needs of participant households? Will services ensure households will be able to find and maintain permanent housing? [PSH, RRH, TH-RRH Proj. App: 4A Question 2; SSO-CE Proj. App: 3B, Q4E]	6	
Employment Services (PSH, RRH, TH-RRH only)		Possible Score	Project Score
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? [Program policies and procedures, P&Ps Page Reference Form]	5	
Access to	Mainstream Benefits (PSH, RRH, TH-RRH only)	Possible Score	Project Score
3.3	Does the project demonstrate an adequate plan to help participants access mainstream benefits such as unemployment benefits, TANF, food stamps/SNAP, and Medicaid? [Proj. App: 4A Question 2]	5	

Section	Section IV: Equity Section IV Score					
	Points: 31 m Points Required or Review is Triggered: 16					
4.1	Does the applicant provide guidelines/program rules in other languages besides English? [Guidelines/Program Rules in another language]	5				
4.2	Does the applicant have client-facing bilingual staff? [New Project Thresholds and Standards Form]	5				
4.3	Does your organization have an arrangement for professional/trained interpretation services? In-person or remote interpretation from trained providers are both applicable. Staff can be considered interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [New Project Thresholds and Standards Form]	Standard met unmet				
4.4	Does the applicant have an Anti-discrimination Policy in full compliance with the NC BoS CoC? [Program policies and procedures, P&Ps Page Reference Form]	Standard met unmet				



4.5	Does the applicant hold annual trainings on its Anti- Discrimination Policy, as required by the CoC Anti- Discrimination Policy? [New Project Thresholds and Standards Form]	Standar	unmet
4.6	Has your staff engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within your agency? Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training. [New Project Thresholds and Standards Form]	5	
4.7	Does the applicant have an equal access hiring clause in job postings? [Example Job Posting]	2	
4.8	(For nonprofit agencies only) Do individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of your Board of Directors? [New Project Thresholds and Standards Form]	Standar	d unmet
4.9	(Non-profits only) How many members of your Board of Directors have experienced homelessness? [New Project Thresholds and Standards Form]		
	20% or Above	2	
	Less than 20%	0	
4.10	What percentage of managers or director-level positions are Black, Indigenous, or People of Color? Position descriptions must include supervising other staff, payroll, or HR duties. [New Project Thresholds and Standards Form]		
	20% or above	5	
	Between 10 - 20%	2	
	Less than 20%	0	
4.11	Has the agency incorporated the NC BoS CoC Client Bill of Rights into internal policies and procedures? [New Project Thresholds and Standards Form]	Standard met	d unmet
4.12	Has the agency changed an internal policy within the last 12 months as a result of feedback from current/former clients? [New Project Thresholds and Standards Form]	Standard met unmet	
4.13	Has your program staff attended community events, conferences, or panel conversations in the past 12 months on the topic of racial equity, anti-racism, or indigenous rights? Please include the number of staff that attended.		



	Benchmark at 80% of total project staff.		
	[New Project Thresholds and Standards Form]		
	200/ or shows	3	
	80% or above Below 80%	0	
4.14	Do agency hiring announcements cite lived experience of homelessness as a relevant skill for open positions at all levels in the agency? [Sample hiring announcements showing range of different levels within the agency]	U	
	Yes	2	
	No	0	
4.15	What percentage of agency staff involved in operating or administering the CoC eligible activities have experienced homelessness?		
	Benchmark at 10%		
	[New Project Thresholds and Standards Form]		
	10% or above	2	
	Below 10%	0	





North Carolina Balance of State Continuum of Care

bos@ncceh.org

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www.ncceh.org/BoS

2023 Scorecard for CoC Funds: Renewal Projects

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

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

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

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

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

PROJECT QUALITY REQUIREMENTS		
Renewal projects must receive at least the standard and minimum score in each	Maximum	
section. Standards and funding priorities will be used in the ranking process. If a	Score	PSH: 189
standard or minimum is not met, further review will be triggered. After further	Possible:	RRH: 168
review, the Project Review Committee will determine potential consequences,		
including whether the project is ineligible for inclusion in the final NC BoS CoC	Project	
application or will receive reduced funding. Thresholds must be met for the	Score:	
project to be eligible for funding.		

Combined Scoring

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

Section I: Ger	neral Application	Secti	on I Score
Possible Points: 9 Minimum Points Req	uired or Review is Triggered: 5		
Accuracy and Approp	riateness of Responses	Possible Score	Project Score
1.1	Does the project description address all parts of the detailed instructions? [Proj. App: 3B, Project Application Detailed Instructions]	3	
1.2	Has the applicant answered all questions regarding services? [Proj. App: 4A]	2	
1.3	Did the applicant complete all sections of the overall application adequately (answer all relevant questions; provide detailed answers per the Project Applicant Detailed Instructions; fill out all charts) [Project Application, Project Application Detailed Instructions]	4	



Section II	: Equity	Section II Score
Possible Points:	31 s Required or Review is Triggered: 16	
2.1	Does the applicant provide guidelines/program rules in other languages besides English? [Guidelines/Program Rules in another language]	5
2.2	Does the applicant have client-facing bilingual staff? [Renewal Applicant Form]	5
2.3	Does your organization have an arrangement for professional/trained interpretation services? In-person or remote interpretation from trained providers are both applicable. Staff can be considered-interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [Renewal Applicant Form]	Standard met unmet
2.4	Does the applicant have an Anti- Discrimination Policy in full compliance with the NC BoS CoC? STAFF: [Program policies and procedures]	Standard met unmet
2.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? [Renewal Applicant Form]	Standard met unmet



2.6	Has the applicant engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within your agency? Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training.	5	
	[Renewal Applicant Form]		
2.7	Does the applicant have an equal access hiring clause in job postings?	2	
	[Example Job Posting]		
2.8	(For nonprofit agencies only) individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of	Stan	dard
	your Board of Directors.	met [unmet
	[Renewal Applicant Form]		
2.9	(For nonprofit agencies only) How many members of your Board of Directors have experienced homelessness?		
	[Renewal Applicant Form]		
	20% or above	2	
	Less than 20%	0	
2.10	What percent of managers or director-level positions are BIPOC?		
	[Renewal Applicant Form]		
	Above 20%	5	
	Between 10 – 20%	2	
	Less than 10%	0	
2.11	Has the agency incorporated the NC BoS CoC Client Bill of Rights into internal policies and procedures? [Renewal Applicant Form]	Star met	ndard unmet



2.12	Has the agency changed an internal policy within the last 12 months as a result of feedback from current/former clients? [Renewal Applicant Form]	Stan	dard unmet
2.13	Has your program staff attended community events, conferences, or panel conversations in the past 12 months on the topic of racial equity, anti-racism, or indigenous rights? Please include the number of staff that attended. Benchmark at 80% of total staff.		
	[Renewal Applicant Form]		
	80% or above	3	
	Below 80%	0	
2.14	Do agency hiring announcements cite lived		
	experience of homelessness as a relevant		
	skill for open positions at all levels in the agency?		
	[Renewal Applicant Form]		
	Yes	2	
	No	0	
2.15	What percentage of agency staff involved in operating or administering the CoC-eligible activities have experienced homelessness?		
	Benchmark at 10%		
	[Renewal Applicant Form]		
	10% or above	2	
	Below 10%	0	



Section III: Pro	ogram Design	Section III Score
Possible Points: PSH: 3 Minimum Points Requ PSH: 10 RRH: 8	35 RRH: 20 uired to Review is Triggered:	
PSH and RRH: Services	s Resource Leverage Plan	
3.1	CoC-funded programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance.	
	Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a dedicated funding stream to provide some services specifically for program participants that are funded by another source besides CoC program funds. [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] • Services provided by other funding sources exceed the required 25% match by at	
	least 15%. [Submit MOU/contract] Program documents leverage at 15% or above match	10 points
	Program documents leverage between 5- 10% above match	5 points
	Program does not meet either criteria above.	0 points
	Project Score	





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2023 Scorecard for CoC Funds: Renewal Projects

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

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

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

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

Reviewer:	Combined sco	ore			
Applicant:	Vaya Health				
Project Name:	Vaya Health C	entral Com	bo PSH		
Project Type (select one)	☐ PH: PSH	☐ PH: RRH	PH: PSH		
Reviewer Signature:				Date:	

PROJECT QUALITY REQUIREMENTS		
Renewal projects must receive at least the standard and minimum score in each	Maximum	
section. Standards and funding priorities will be used in the ranking process. If a	Score	PSH: 189
standard or minimum is not met, further review will be triggered. After further	Possible:	RRH: 168
review, the Project Review Committee will determine potential consequences,		
including whether the project is ineligible for inclusion in the final NC BoS CoC	Project	
application or will receive reduced funding. Thresholds must be met for the	Score:	165.5
project to be eligible for funding.		

Combined Scoring

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

Section I: Gen	eral Application	Se	ction I Score
Possible Points: 9 Minimum Points Req	uired or Review is Triggered: 5	9	
Accuracy and Approp	riateness of Responses	Possible Score	Project Score
1.1	Does the project description address all parts of the detailed instructions? [Proj. App: 3B, Project Application Detailed Instructions]	3	3
1.2	Has the applicant answered all questions regarding services? [Proj. App: 4A]	2	2
1.3	Did the applicant complete all sections of the overall application adequately (answer all relevant questions; provide detailed answers per the Project Applicant Detailed Instructions; fill out all charts) [Project Application, Project Application Detailed Instructions]	4	4



		Section	n II Score
Possible Points: Minimum Points	31 s Required or Review is Triggered: 16	18.5	
2.1	Does the applicant provide guidelines/program rules in other languages besides English? [Guidelines/Program Rules in another language]	5	2.5
2.2	Does the applicant have client-facing bilingual staff? [Renewal Applicant Form]	5	5
2.3	Does your organization have an arrangement for professional/trained interpretation services? In-person or remote interpretation from trained providers are both applicable. Staff can be considered-interpreters if they have been trained or certified as interpreters. Bi-lingual staff or volunteers without documented training (internal or external) or certification do not qualify as trained interpreters. [Renewal Applicant Form]		tandard et
2.4	Does the applicant have an Anti- Discrimination Policy in full compliance with the NC BoS CoC? [Program policies and procedures]		tandard et unmet
2.5	Does the applicant hold annual trainings on its Anti-Discrimination Policy, as required by the CoC Anti-Discrimination Policy? [Renewal Applicant Form]		tandard et



2.6	Has the applicant engaged in professional racial equity training in the past 12 months for the purpose of impacting equity within your agency? Examples include the Racial Equity Institute (REI) Phase 1 or Groundwater trainings, Organizing Against Racism (OAR) training, or Race Forward training. [Renewal Applicant Form]	5	5
2.7	Does the applicant have an equal access hiring clause in job postings? [Example Job Posting]	2	2
2.8	(For nonprofit agencies only) individuals that are Black, Indigenous, or People of Color (BIPOC) comprise at least 20% of your Board of Directors. [Renewal Applicant Form]	Stan met [N/A	dard unmet
2.9	(For nonprofit agencies only) How many members of your Board of Directors have experienced homelessness? [Renewal Applicant Form]	N/A	
	20% or above	2	
	Less than 20%	0	
2.10	What percent of managers or director-level positions are BIPOC? [Renewal Applicant Form]	2	
	Above 20%	5	
	Between 10 – 20%	2	
	Less than 10%	0	
2.11	Has the agency incorporated the NC BoS CoC Client Bill of Rights into internal policies and procedures? [Renewal Applicant Form]	Star met met	ndard unmet



2.12	Has the agency changed an internal policy within the last 12 months as a result of feedback from current/former clients? [Renewal Applicant Form]	Standard met unmet met	
2.13	Has your program staff attended community events, conferences, or panel conversations in the past 12 months on the topic of racial equity, anti-racism, or indigenous rights? Please include the number of staff that attended. Benchmark at 80% of total staff.	0	
	[Renewal Applicant Form]		
	80% or above	3	
	Below 80%	0	
2.14	Do agency hiring announcements cite lived experience of homelessness as a relevant skill for open positions at all levels in the agency?	0	
	[Renewal Applicant Form]		
	Yes	2	
	No	0	
2.15	What percentage of agency staff involved in operating or administering the CoC-eligible activities have experienced homelessness? Benchmark at 10%	2	
	[Renewal Applicant Form]		
	10% or above	2	
	Below 10%	0	



		Section III Score
PSH: 10 RRH: 8	uired to Review is Triggered:	34
PSH and RRH: Services	s Resource Leverage Plan	
3.1	CoC-funded programs should maximize the number of people they can serve by leveraging other sources of funding for services and dedicating most of their HUD funding towards housing assistance.	
	Does this program leverage services funding for its clients and does it have a plan in place to increase the amount of its budget dedicated to housing assistance? To receive full points, the program should demonstrate: • It currently has formal relationships with another agency (documented through an MOU, MOA, or contract) or a	
	dedicated funding stream to provide some services specifically for program participants that are funded by another source besides CoC program funds. [Submit MOU/MOA/contract or information on dedicated funding stream such as a contract] Services provided by other funding sources exceed the required 25% match by at least 15%.	
	[Submit MOU/contract] Program documents leverage at 15% or above match	10 points
	Program documents leverage between 5- 10% above match	5 points
	Program does not meet either criteria above.	0 points
	Project Score	10



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

Section I	II: Program Design	Section III Score	
Housing First		34	
3.2a	Does this project use a Housing First approach? Must meet all statements in 3.2b and 3.2c below to meet standard. Program should not have any policies that would result in screening out or terminating anyone for any of the reasons below, but policies do not have to explicitly include the statements below to meet the standard. [Program policies and procedures, Pre-Competition Renewal Applicant Form, sample lease]	Standard (must meet all statements in 3.2b and 3.2c below) met (2 of 2 met) unmet (1 or more missed) Met	
	Reviewer Notes (if unmet or documentation r	not provided, note why):	
3.2b	The project does not screen out for: Having too little or no income Active or history of substance use Having a criminal record (with exceptions for state-mandated restrictions) History of domestic violence (e.g., lack of protective order, or separation from abuser, or law enforcement involvement)	met unmet unmet, documentation not provided met	
	Reviewer Notes (if unmet or documentation r	no provided, note why):	
3.2c	The project does not terminate people from the program for: Failure to participate in supportive services Failure to make progress on a service plan Loss of income or failure to improve income Domestic violence Any other activity not covered in a lease agreement typically found in the project's geographic area Failure to maintain recovery	met unmet unmet, documentation not provided met	



	Reviewer Notes (if unmet or documentation not provided, note why):			
Key Elements of Permanent Supportive Housing PSH projects should meet these 9 standards set forth by <u>SAMHSA</u> . However, they do not need to be explicitly outlined in the Program Policies & Procedures in order to meet the standard. ¹				
3.3a	Leases or rental agreements do not have any provisions that would not be found in leases held by someone who does not have a disability. [Sample lease] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided met not provided, note why):		
3.3b	Participation in services is voluntary and tenants cannot be terminated from the program for rejecting services. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided met not provided, note why):		
3.3c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Met Unmet N/A Unmet, documentation not provided met		
3.3d	Reviewer Notes (if unmet or documentation Housing is not time-limited, and the lease is renewable at tenants' and owners' option. [Program policies and procedures, Pre-Competition Renewal Applicant Form, sample lease] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided met		
	neviewer notes (if animet of documentation	Those provided, note why).		



 $^{1\,\}underline{\text{https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-psh.pd}}$

3.3e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Unmet N/A Unmet, documentation not provided met
	Reviewer Notes (if unmet or documentation	not provided, note why):
3.3f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Met Unmet N/A Unmet, documentation not provided met
	Reviewer Notes (if unmet or documentation	not provided, note why):
3.3g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Met Unmet N/A Unmet, documentation not provided met
	Reviewer Notes (if unmet or documentation	not provided, note why):
3.3h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors.	Standard Met Unmet N/A Unmet, documentation not provided met
	[Program policies and procedures, Pre- Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation	not provided, note why):
		,
3.3i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses	Standard Met Unmet N/A Unmet, documentation not provided met
	services or the service provider terminates	



	services, the tenant can remain in housing).	
	Reviewer Notes (if unmet or documentation	not provided, note why):
Rapid Re-Housing Per	formance Benchmarks and Program Standard	S
	jects should encompass the following program	•
	lessness, the U.S. Department of Veteran Affair	
Urban Development (HUD), U.S. Interagency Council on Homelessne	ess (USICH), and Abt Associates ^{2.}
3.4a	Core Program Standard: Housing Identification	
3.4a1	Program designates staff whose	Standard
	responsibility is to identify and recruit landlords and encourage them to rent to	
	homeless households served by the	Met Unmet N/A
	program. Staff have the knowledge, skills,	Unmet, documentation not provided
	and agency resources to: understand	
	landlords' perspectives, understand landlord	
	and tenant rights and responsibilities, and	N/A
	negotiate landlord supports. A program may have dedicated staff for whom this is the	IN/A
	primary responsibility. If a program does not	
	have a dedicated staff person(s) who	
	performs this function, case manager job	
	descriptions must include responsibilities	
	including landlord recruitment and	
	negotiation and at least some of the	
	program's case managers must be trained in this specialized skill set to perform the	
	recruitment function effectively.	
	rediction encourery.	
	[Program policies and procedures, Pre-	
	Competition Renewal Applicant Form]	
	Reviewer Notes (if unmet or documentation r	not provided, note why):
3.4a2	Program has written policies and procedures	5
	for landlord recruitment activities, including	Standard
	screening out potential landlord partners	☐ Met ☐ Unmet ☐ N/A
	who have a history of poor compliance with their legal responsibilities and fair housing	Unmet, documentation not provided
	practices.	N/A
	[Program policies and procedures, Pre- Competition Renewal Applicant Form]	14/74
	Reviewer Notes (if unmet or documentation r	not provided, note why):
	·	



http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards 2016.pdf

3.4a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Programs can negotiate additional supports, as needed, on a case-by-case basis. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A		
3.4a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A		
3.4b	Core Program Standard: Rent and Move- In Assistance			
3.4b1	Program staff are trained on regulatory requirements of all rapid re-housing funding streams and on the ethical use and application of a program's financial assistance policies, including, but not limited to, initial and ongoing eligibility criteria, program requirements, and assistance maximums. Program has a routine way to onboard new staff and to keep staff regularly updated on changing regulations and/or program policies. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A n not provided, note why):		



3.4b2	Program has clearly defined policies and procedures for determining the amount of financial assistance provided to a objective standards for when case management and financial assistance should continue and end. Guidelines are flexible enough to respond to the varied and changing needs of program participants, including participants with zero income. (Note: guidelines should not offer the same amount and duration of assistance to everyone in the program. Financial assistance and case management should not have a strictly applied end point. Policies and procedures and objective standards should individually determine the needs of each household and when assistance should	Standard N/A Unmet, documentation not provided N/A
	continue and end for that household). [Program policies and procedures, Pre- Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation	not provided, note why):
3.4b3	A progressive approach is used to determine the duration and amount of rent assistance. Financial assistance is not a standard "package" and is flexible enough to adjust to households' unique needs and resources, especially as participants' financial circumstances or housing costs change. Policies detailing this progressive approach include clear and fair decision guidelines and processes for reassessment for the continuation and amount of financial assistance. Policies and procedures also detail when and how rapid re-housing assistance is used as a bridge to a permanent subsidy or permanent supportive housing placement. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Met Unmet N/A Unmet, documentation not provided N/A
	Reviewer Notes (if unmet or documentation	not provided, note why):



3.4c	Core Program Standard: Rapid Re-	
5.40	Housing Case Management and Services	
3.4c1	Except where dictated by the funder,	
	program participants direct when, where,	Standard
	meetings occur. Meetings occur in a participant's home and/or in a location of the participant's choosing whenever	☐ Met☐ Unmet☐ N/A☐ Unmet, documentation not provided
	possible. (Note: The intent of this standard is that program participants are involved in creating a mutually agreed upon time, place, and frequency of meetings with the case manager). [Program policies and procedures, Pre-	N/A
	Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation	n not provided, note why):
2.4.2	NA/	
3.4c2	When case management and service compliance is not mandated by federal or state regulation, services offered by a program have voluntary participation. (Note: HUD requires CoC programs to meet with participants once a month but does not require programs to dictate the location, duration, or topic of the meeting and does not require programs to terminate participants if they fail to attend scheduled meetings or follow a service plan). [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Met Unmet N/A Unmet, documentation not provided N/A
	Reviewer Notes (if unmet or documentation	n not provided, note why):
3.4c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate.	Standard Met Unmet N/A Unmet, documentation not provided
	[Program policies and procedures, Pre- Competition Renewal Applicant Form]	N/A
	Reviewer Notes (if unmet or documentation	n not provided, note why):



3.4c4	Program has clearly defined policies and objective standards for when case management should continue and end. respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [Program policies and procedures, Pre-Competition Renewal Applicant Form]	Standard Unmet N/A Unmet, documentation not provided N/A
	Reviewer Notes (if unmet or documentation	n not provided, note why):
3.4d	Core Program Standard: Program Philosophy and Design	
3.4d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid rehousing. Program has routine way of onboarding new staff that includes training on Housing First and rapid rehousing principles. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A
3.4d2	Program has well-defined and written screening processes that use consistent and transparent decision criteria. Criteria do not include screening possible participants out for income or lack thereof. [Program policies and procedures, Pre-	Standard Met Unmet N/A Unmet, documentation not provided
	Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation	



3.4d3	Eligibility criteria for the program do not include a period of sobriety, a commitment to participation in treatment, or any other criteria designed other than willingness to engage the program and work on a self-directed housing plan. [Program policies and procedures, Pre-Competition Renewal Applicant Form] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A n not provided, note why):
3.4d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [Program policies and procedures, Pre-Competition Renewal Applicant Form, sample lease] Reviewer Notes (if unmet or documentation)	Standard Met Unmet N/A Unmet, documentation not provided N/A n not provided, note why):



Permanent Supportive Housing: Moving-on Strategy

Permanent supportive housing should be available indefinitely, as long as households need it. However, participants in these programs can stabilize to the point that they no longer need the intensive services associated with the program. Moving-on strategies for permanent supportive housing projects create opportunities for participants who no longer need the supportive part of permanent supportive housing to live independently and sustain their homes after graduation for the program. They usually involve transferring the tenant to another long-term housing subsidy, such as a Housing Choice Voucher (Section 8), public housing, or other affordable housing option.³

and the same of th	voucher (occition o), public flouding, or other o		
3.5	Does the permanent supportive housing project incorporate moving-on strategies in its program policies and procedures (Note: this should not be a separate section, but all sections of the document should indicate how the program uses a Moving-on approach)? To receive full points program policies and procedures should include: • Regular evaluation using standardized criteria to identify households who may be interested and able to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority/HCV organization); • A method to prepare tenants to move-on and exit planning procedures; • A method to link moving-on tenants to mainstream services and supports; • Procedures to provide step-down services after exit; and • A strategy to evaluate the effectiveness of moving-on strategies. [Program policies and procedures, Pre-Competition Renewal Applicant Form]		
	Program meets all bulleted points above	15	
	Program meets 4-5 of the above bulleted points	10	
	Program meets 1-3 of the above bulleted points	5	
	Project score:	5	
3.6	The Department of Housing and Urban Development (HUD) and the NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, such as people experiencing homelessness, survivors of domestic violence, and youth		



experiencing homelessness.		
Is this project targeting one of the subpopulations below? If so, does it describe additional outreach activities, partnerships with organizations that serve that population, and a service plan that meets that subpopulation's specific needs?		
This project targets: People experiencing chronic homelessness People who identify as LGBTQ People with histories of institutionalization, incarceration, or foster care Veterans Survivors of domestic violence Unaccompanied or parenting youth 18-24		
[Program policies and procedures, Pre- Competition Renewal Applicant Form]	Possible Score	Project Score
Full points for detailed plan to engage and serve specific needs of identified population(s). Partial points available for less detailed plans.	10	10

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



Section IV: Project Performance Possible Points Added: PSH: 104 RRH: 98 Minimum Points Required or Review is Triggered: PSH: 52 RRH: 49 94

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2022 to December 31, 2022, unless otherwise noted.

Populations Served		Possible score	Project Score
4.1a	RRH Projects: What percentage of the people served by the project had a disability? [Q13a2 divided by total enrolled]		
	Less than 25%	0	
	25%-34%	5	0
	35% or Above	15	
4.1b	PSH Projects: What percentage of new household admissions during the 2022 calendar year were chronically homeless? [Custom HMIS Report]		
	100%	11	11
	Less than 100%	0	
4.1c	PSH Projects: What percentage of households served by the project were chronically homeless? [A003 – Chronic Homelessness – check if participants found non-Chronically Homeless, staff will follow up with grantee to determine CH status.]		
	Less than 50%	0	10
	50-74%	5	
	75-100%	10	
4.1d	RRH Projects: What percentage of exits were to a permanent housing destination? [CoC-APR 23a/b]	0	
	No Exits or Less than 70%	0	
	70-80%	7	
	Above 80%	15	



4.1e	What percentage of exits were to a known destination? [CoC-APR Q23a/b]	5	
	95% or higher	5	
	0-94%	0	
4.1f	PSH Projects: What percentage of exits were to a permanent housing destination? [CoC-APR 23a/b]	15	
	Below 80%	0	
	80% or higher	15	
4.1g	What percentage of adults gained or increased total earned cash income? [CoC-APR 19a1, 19a2]	15	
	<10%	0	
	10-15%	5	
	15-20%	10	
	Above 20%	15	
4.1h	PSH Projects: What percentage of adults gained or increased total unearned cash income? [CoC-APR 19a1, 19a2].	15	
	<10%	0	
	10 – 29%	10	
	30% and Above	15	
4.1i	PSH Projects: What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2020-12/31/2021]	0	
	0-20%	10	
	Above 20%	0	
4.1j	RRH Projects: What percentage of people who exited to PH returned to homelessness within 2 years. [0701 SPM report exits between 01/01/2020-12/31/2021]	0	
	>20%	0	
	10-20%	15	-
	0-10%	5	
4.1k	RRH Projects: Median Length of project participation for leavers. [CoC-APR Q22B]	0	
	180 – 270 days	10	
			T. Control of the Con



HMIS Participation (Per federal law, victim service providers are prohibited from using HMIS. Possible Score However, CoC-funded projects must use an HMIS			Project Score
Comparable Database to col	lect and report data.)		
4.2a	HMIS Data Completeness [CoC-APR Q6a-6d]		
	0-10%	5	5
	Above 10%	0	J
4.2b	Are all the agency's projects that are listed in the 2022 HIC participating in HMIS (or a Comparable Database if VSP)? [HIC]		
	Yes	5	5
	No	0	5
4.2c	Did the program submit their APR on or before the designated deadline? [Sage]		5
	Yes	5	
	No	0	
4.2d	Was the Agency responsive to the Data Center in Annual Corrections (for LSA or SPM reports)?		5
	[Was the CoC Lead copied on communication to escalate responsiveness]		
	Yes	0	
	No	5	
4.2e	Were any HMIS users deactivated due to lack of login compliance (every 60 days) during CY2022? [Data Center records]		3
	Yes	0	
	No	3	
HUD Monitoring			
4.3a	Is the recipient free of HUD monitoring findings for any agency projects? If not, findings must be resolved or explained to the satisfaction of the Project Review Committee for the application to meet standards. [Renewal Applicant Form]	Stan	dard Unmet



4.3b	Previous Project Spending Rates: These questions are for projects that have been operating for at least one year at the time of the NOFO release. (Percentage rounded to the nearest whole number) Percentage 90% or higher (Projects that fall below the standard will trigger review by CoC staff and Project Review Committee. The review will determine potential consequences, including whether some funding should be reallocated to new projects.) [Scored from APR. If APR is not available, agencies will submit an eLOCCS screenshot of final draw for last completed year. If agencies are spending less than 90% of funding, they must submit a narrative explaining why the agency is underspending their grant.]	Stan Met Unmet Unmet, document unmet	dard N/A cation not provided
Section V: Coordinated Entry and Prioritization Possible Points: 10 Minimum score or review triggered: 5		Section 10	n V Score
5.1	Did the agency participate in at least 85% of the Region's case conferencing in calendar year 2022? [CE Lead Interview]	Stan Met Unmet met	dard
5.2	Does the program have a CE Assessment score for at least 97% of new admissions during the 2022 calendar year? [Renewal Applicant Form]	Stan	dard
5.3			
	What percentage of new admissions during the 2022 have a CE Assessment in HMIS or Comparable Database? [Renewal Applicant Form]		
	during the 2022 have a CE Assessment in HMIS or Comparable Database?	Possible score	Project score
	during the 2022 have a CE Assessment in HMIS or Comparable Database?	Possible score 10	Project score
	during the 2022 have a CE Assessment in HMIS or Comparable Database? [Renewal Applicant Form]		Project score
	during the 2022 have a CE Assessment in HMIS or Comparable Database? [Renewal Applicant Form]	10	-
	during the 2022 have a CE Assessment in HMIS or Comparable Database? [Renewal Applicant Form] 100% 90%-99%	10 5	-



Section VI: Applic	cation Deadlines and		
Documentation		Section	VI Score
Possible Deductions: -25 Minimum Points Required of -15	d or Review is Triggered: Not more than loss	0	
Budget & Match		Possible score	Project score
6.1a	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	0
6.1b	Does the project demonstrate they have 25% match, and all match funds are eligible? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections].	Star □ met met	ndard unmet
		Possible score	Project score
6.1c	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFO timeline is discerned or published).	-10	0
6.1d	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	0
Deadlines			
6.2a	The online application and accompanying documents must be submitted by the deadline. If not, the Project Review Committee will determine potential consequences, including whether the project is ineligible for inclusion in final NC BoS CoC application or will receive reduced funding.	Star met met	ndard □ unmet
6.2b	Was the signed NC BoS CoC Grantee Agreement submitted?	Thre □ met met	eshold unmet





NC Balance of State CoC to Amy.Modlin@TrilliumNC.org, Talaika, bos .

Dear Trillium Health Resources,

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

Trillium Health Resources - Trillium PSH #1 - \$1.125,984 - Rank 12 in Tier 1 Trillium Health Resources - Trillium RRH - \$212,039 - Rank 24 in Tier 1

Unfortunately, the following project(s) were not included in the final ranked list of projects:

Trillium Health Resources - Trillium RRH #2

This year's CoC funding process was very competitive. The CoC received \$1,549,144 in requests for new projects with only \$1,106,132 in CoC Bonus available. Trillium Health Resources' new project was not one of the selected new projects because other new projects provided more extensive geographic coverage within the CoC including Region 11, which was the designated coverage area of the new Trillium project.

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

If you would like to appeal the decision on the new project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the document.

Thank you for your hard work on your applications over the last few weeks. We know it is disappointing for the new project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion. Staff will be in touch soon about the next steps with your approved application(s). We look forward to continuing to work with you.

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

NCCEH staffs the NC Balance of State Continuum of Care













Aug 22, 2023, 12:13 PM

NC Balance of State CoC

to Tameka, bos -

Dear Community Link,

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

Community Link - Piedmont 1 PSH - \$1,099,209 - Rank 25 in Tier 1 Community Link - Northern Combo PSH - \$1,338,019 - Rank 26 straddling Tiers 1 and 2

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

Community Link - PRC RRH renewal

This year's CoC funding process was very competitive. The CoC received \$1,549,144 in requests for new projects with only \$1,106,132 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as the quality of applications and performance to make final decisions. The CoC decided to reallocate all funding in the Community Link PRC RRH project due to missing several key standards and the quality of the overall application to make room for new projects in the final ranking list.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

If you would like to appeal the decision to not include the PRC RRH project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process,

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing for the PRC RRH project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period.

Staff will be in touch soon about the next steps on your other renewal project applications. We look forward to continuing to work with you.

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

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Tue, Aug 22, 12:20 PM





to Lori, Sarah, bos 🕶

Dear Vava Health Resources,

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

Vaya Health - Vaya Health PSH Central Combo - \$495,134 - Rank 3 in Tier 1 Vaya Health - Vaya Health PSH Western Combo - \$435,590 - Rank 4 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/,

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

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

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Tue, Aug 22, 12:19 PM



to LaTasha, bos .

Dear Eastpointe,

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

Eastpointe - Eastpointe SPC3 - \$228,568 - Rank 5 in Tier 1 Eastpointe - Eastpointe SPC Combined - \$199,127 - Rank 6 in Tier 1 Eastpointe - Eastpointe SPC Southeast - \$80,287 - Rank 8 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

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Tue, Aug 22, 12:18 PM

NC Balance of State CoC

to Amy, bos -

Dear Rockingham County Help for Homeless,

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of project Review Committee without making any changes. The ranked list includes the following Rockingham County Help for Homeless projects:

RCHH - RCHH Permanent Supportive Housing - \$269,200 - Rank 7 Tier 1

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

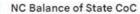
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Tue, Aug 22, 12:17 PM



to Dan, Michele, bos .

Dear Diakonos.

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

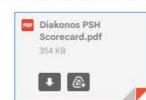
Diakonos - Fifth Street Ministries PSH - \$140,000 - Rank 9 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

NCCEH staffs the NC Balance of State Continuum of Care





Tue, Aug 22, 12:16 PM

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to Kerry, bos -

Dear Brick Capital Community Development,

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

Brick Capital - Region 7 PSH - \$298,658 - Rank 10 in Tier 1

changes. The ranked list includes the following Brick Capital Community Development projects:

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

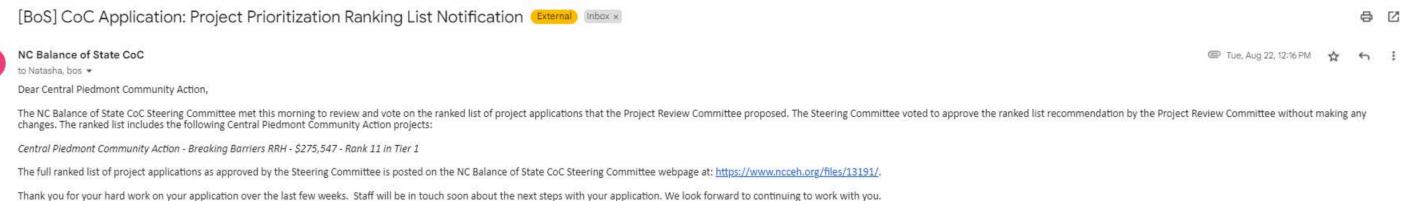
NC Balance of State CoC Team North Carolina Coalition to End Homelessness (919) 755-4393

www.ncceh.org/bos

bos@ncceh.org



NCCEH staffs the NC Balance of State Continuum of Care One attachment . Scanned by Gmail (1)



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NC Balance of State CoC to Amy.Modlin@TrilliumNC.org, Talaika, bos .

Dear Trillium Health Resources,

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

Trillium Health Resources - Trillium PSH #1 - \$1.125,984 - Rank 12 in Tier 1 Trillium Health Resources - Trillium RRH - \$212,039 - Rank 24 in Tier 1

Unfortunately, the following project(s) were not included in the final ranked list of projects:

Trillium Health Resources - Trillium RRH #2

This year's CoC funding process was very competitive. The CoC received \$1,549,144 in requests for new projects with only \$1,106,132 in CoC Bonus available. Trillium Health Resources' new project was not one of the selected new projects because other new projects provided more extensive geographic coverage within the CoC including Region 11, which was the designated coverage area of the new Trillium project.

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

If you would like to appeal the decision on the new project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the document.

Thank you for your hard work on your applications over the last few weeks. We know it is disappointing for the new project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period to have more discussion. Staff will be in touch soon about the next steps with your approved application(s). We look forward to continuing to work with you.

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Tue, Aug 22, 12:15 PM



to Bre, Teena, bos 🕶

Dear Partners Health Management,

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

Partners Health Management - Partners Consolidated PSH - \$273,381 - Rank 16 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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bos@ncceh.org







Dear NCCADV,

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

NCCADV - Safe at Home - \$3,123,385 - Rank 21 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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Dear Officer County Community Sherier,

The NC Balance of State CoC Steering Committee met this morning to review and vote on the ranked list of project applications that the Project Review Committee without making any changes. The ranked list includes the following Union County Community Shelter projects:

UCCS - CoC Rapid Rehousing UCCS - \$200,148 - Rank 22 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

NC Balance of State CoC Team

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

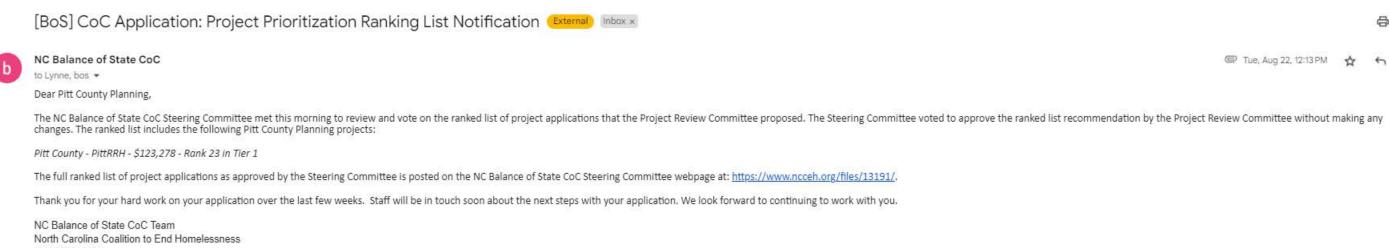
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Aug 22, 2023, 12:13 PM

NC Balance of State CoC

to Tameka, bos -

Dear Community Link,

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

Community Link - Piedmont 1 PSH - \$1,099,209 - Rank 25 in Tier 1 Community Link - Northern Combo PSH - \$1,338,019 - Rank 26 straddling Tiers 1 and 2

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

Community Link - PRC RRH renewal

This year's CoC funding process was very competitive. The CoC received \$1,549,144 in requests for new projects with only \$1,106,132 in CoC Bonus available. The Steering Committee considered both Funding Priorities for new projects as well as the quality of applications and performance to make final decisions. The CoC decided to reallocate all funding in the Community Link PRC RRH project due to missing several key standards and the quality of the overall application to make room for new projects in the final ranking list.

Please find attached the scorecard for your corresponding project(s). The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

If you would like to appeal the decision to not include the PRC RRH project, the CoC process for appeals is attached to this email. Please follow the instructions and timelines as noted in the process,

Thank you for your hard work on your application(s) over the last few weeks. We know it is disappointing for the PRC RRH project to not be included in the final CoC application, but staff and Project Review Committee members are happy to schedule a call at the end of the competition period.

Staff will be in touch soon about the next steps on your other renewal project applications. We look forward to continuing to work with you.

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

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to catherine.kastleman, cesar.castro, bos -

Dear NC Office of Recovery and Resiliency,

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

NCORR - Back@Home-BoS Annual RRH - \$1,204,169 - Rank 28 in Tier 2

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

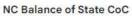
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to Tujuanda, movesd, bos -

Dear Greenville Housing Authority,

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

Greenville Housing Authority - Seeds of Change - \$355,560 - Rank 13 in Tier 1 Greenville Housing Authority - Stable Solutions - \$70,491 - Rank 15 in Tier 1 Greenville Housing Authority - Project HOPE - \$508,016 - Rank 17 in Tier 1 Greenville Housing Authority - Solid Ground - \$74,028 - Rank 18 in Tier 1 Greenville Housing Authority - Project LIFE - \$369,720 - Rank 19 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

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5 Attachments . Scanned by Gmail (1)























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Tue. Aug 22, 12:15 PM



Brian Alexander

to Chris, nkilgore, bos .

Dear Thrive,

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

Thrive - Pathways to Permanent Housing Combo - \$386,629 - Rank 14 in Tier 1 Thrive - Thrive RRH - \$217.952 - Rank 20 in Tier 1

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

NCCEH staffs the NC Balance of State Continuum of Care

Brian Alexander | he/him/his | Project Director | brian@noceh.org

North Carolina Coalition to End Homelessness | www.ncceh.org | 828-771-8968









Tue, Aug 22, 12:20 PM

Brian Alexander

to Andrea, Ashley, Latonya, bos -

Dear North Carolina Coalition to End Homelessness.

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

NCCEH - BoS HMIS - \$519,299 - Rank 1 in Tier 1

NCCEH - BoS Coordinated Entry - \$423,767 - Rank 2 in Tier 1

NCCEH - BoS HMIS Expansion - \$250,000 - Rank 27 in Tier 2

NCCEH - NC BoS CoC DV Bonus SSO-CE - \$963,600 - Rank 29 in Tier 2

The full ranked list of project applications as approved by the Steering Committee is posted on the NC Balance of State CoC Steering Committee webpage at: https://www.ncceh.org/files/13191/.

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

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

NCCEH staffs the NC Balance of State Continuum of Care

Brian Alexander | he/him/his | Project Director | brian@ncceh.org

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PIT Count Data for NC-503 - North Carolina Balance of State CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	3185	2516	2491	3311
Emergency Shelter Total	1,719	1,233	1,445	1712
Safe Haven Total	0	0	0	0
Transitional Housing Total	470	287	270	285
Total Sheltered Count	2189	1520	1715	1997
Total Unsheltered Count	996	996	776	1314

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	324	257	271	253
Sheltered Count of Chronically Homeless Persons	205	138	164	142
Unsheltered Count of Chronically Homeless Persons	119	119	107	111

PIT Count Data for NC-503 - North Carolina Balance of State CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	282	195	245	303
Sheltered Count of Homeless Households with Children	265	178	204	246
Unsheltered Count of Homeless Households with Children	17	17	41	57

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	242	151	138	122	175
Sheltered Count of Homeless Veterans	150	117	104	102	120
Unsheltered Count of Homeless Veterans	92	34	34	20	55

^{*}For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

HIC Data for NC-503 - North Carolina Balance of State CoC

HMIS Bed Coverage Rates

Rates									
Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	2,473	1,230	1,813	67.84%	542	660	82.12%	1,772	71.65%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	384	174	375	46.40%	9	9	100.00%	183	47.66%
RRH Beds	515	479	483	99.17%	32	32	100.00%	511	99.22%
PSH Beds	1,617	1,378	1,617	85.22%	0	0	NA	1,378	85.22%
OPH Beds	1,237	0	1,237	0.00%	0	0	NA	0	0.00%
Total Beds	6,226	3,261	5,525	59.02%	583	701	83.17%	3,844	61.74%

HIC Data for NC-503 - North Carolina Balance of State CoC

HIC Data for NC-503 - North Carolina Balance of State CoC

Notes

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	1498	1404	1330	1268

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	86	146	217	96

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	428	730	1192	515

^{*}For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

^{**}For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

HIC Data for NC-503 - North Carolina Balance of State CoC

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for NC-503 - North Carolina Balance of State CoC

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects. Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)			ge LOT Hor bed nights		Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	4708	5377	59	58	-1	35	34	-1
1.2 Persons in ES, SH, and TH	4917	5647	76	74	-2	39	38	-1

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)			ge LOT Hor bed nights		Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	6944	7590	317	338	21	137	150	13
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	8441	9535	318	339	21	152	159	7

FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing		lomelessness n 6 Months		lomelessness 12 Months		lomelessness 24 Months		of Returns Years
	Destination (2 Years Prior)	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	29	1	3%	0	0%	0	0%	1	3%
Exit was from ES	1589	115	7%	72	5%	96	6%	283	18%
Exit was from TH	116	2	2%	1	1%	8	7%	11	9%
Exit was from SH	0	0		0		0		0	
Exit was from PH	662	13	2%	19	3%	30	5%	62	9%
TOTAL Returns to Homelessness	2396	131	5%	92	4%	134	6%	357	15%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2022 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		2491	
Emergency Shelter Total	1233	1445	212
Safe Haven Total	0	0	0
Transitional Housing Total	287	270	-17
Total Sheltered Count	1520	1715	195
Unsheltered Count		776	

Metric 3.2 - Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	4991	5741	750
Emergency Shelter Total	4771	5471	700
Safe Haven Total	0	0	0
Transitional Housing Total	276	333	57

FY2022 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	790	837	47
Number of adults with increased earned income	35	38	3
Percentage of adults who increased earned income	4%	5%	1%

 $\label{eq:metric} \mbox{Metric 4.2-Change in non-employment cash income for adult system stayers during the reporting period}$

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	790	837	47
Number of adults with increased non-employment cash income	192	142	-50
Percentage of adults who increased non-employment cash income	24%	17%	-7%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	790	837	47
Number of adults with increased total income	201	171	-30
Percentage of adults who increased total income	25%	20%	-5%

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	199	219	20
Number of adults who exited with increased earned income	19	33	14
Percentage of adults who increased earned income	10%	15%	5%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	199	219	20
Number of adults who exited with increased non-employment cash income	50	33	-17
Percentage of adults who increased non-employment cash income	25%	15%	-10%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	199	219	20
Number of adults who exited with increased total income	66	55	-11
Percentage of adults who increased total income	33%	25%	-8%

FY2022 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	4387	5223	836
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	857	986	129
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	3530	4237	707

Metric 5.2 - Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	6783	6517	-266
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1285	1151	-134
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	5498	5366	-132

FY2022 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	236	743	507
Of persons above, those who exited to temporary & some institutional destinations	117	228	111
Of the persons above, those who exited to permanent housing destinations	53	140	87
% Successful exits	72%	50%	-22%

Metric 7b.1 – Change in exits to permanent housing destinations

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	4740	6884	2144
Of the persons above, those who exited to permanent housing destinations	1879	2948	1069
% Successful exits	40%	43%	3%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	1270	1527	257
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1257	1521	264
% Successful exits/retention	99%	100%	1%

FY2022 - SysPM Data Quality

NC-503 - North Carolina Balance of State CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022												
1. Number of non- DV Beds on HIC	1810	1505	1579	662	447	409	2002	1814	2605	428	730	1192			
2. Number of HMIS Beds	1218	1083	1037	251	154	162	1565	1543	1438	401	682	1107			
3. HMIS Participation Rate from HIC (%)	67.29	71.96	65.67	37.92	34.45	39.61	78.17	85.06	55.20	93.69	93.42	92.87			
4. Unduplicated Persons Served (HMIS)	4773	4746	5468	403	260	332	1774	1709	1596	2540	4241	4424	342	391	1035
5. Total Leavers (HMIS)	4084	4129	4654	266	166	222	171	192	177	1318	1574	3129	236	220	564
6. Destination of Don't Know, Refused, or Missing (HMIS)	578	712	421	21	25	0	1	5	3	91	82	165	15	8	65
7. Destination Error Rate (%)	14.15	17.24	9.05	7.89	15.06	0.00	0.58	2.60	1.69	6.90	5.21	5.27	6.36	3.64	11.52

FY2022 - SysPM Data Quality

Submission and Count Dates for NC-503 - North Carolina Balance of State CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/28/2023	Yes



North Carolina Department of Public Safety

Office of Recovery and Resiliency

Roy Cooper, Governor Eddie M. Buffaloe, Jr., Secretary Laura H. Hogshead, Director

September 15, 2023

North Carolina Office of Recovery and Resiliency Post Office Box 110465 Durham, NC 27709

Re: Resource Leveraging for the NCORR FY23 Rapid Rehousing Application

To Whom It May Concern:

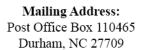
The North Carolina Office of Recovery and Resiliency (NCORR), which operates statewide in North Carolina, partners closely with the NC Balance of State Continuum of Care to ensure the most vulnerable North Carolinians receive housing, including after natural disasters. This letter certifies that NCORR agrees to provide housing leverage for the FY23 Rapid Rehousing Project Application. All resources provided are not funded by the CoC or ESG programs.

The value of the housing leverage being provided is \$192,000 through 20 units to serve 31 program participants in 20 households during the term of the grant. Housing will be paired with CoC-funded supportive services and will be available for the period beginning on October 1, 2024, to the end of the operating period on September 30, 2025.

Sincerely,

Laura Hogshead

Laura H. Hogshead







ROY COOPER • Governor

KODY H. KINSLEY • Secretary

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

Re: Resource Leveraging for the FY23 CoC NCORR CoC Rapid Rehousing Application

To Whom It May Concern:

The North Carolina Department of Health and Human Services (NC DHHS) will partner closely with the North Carolina Office of Recovery and Resiliency (NCORR) through the Back@Home – Balance of State Program to ensure the most vulnerable North Carolinians the mental health, health, and substance use services for which they are eligible.

This letter certifies that NC DHHS agrees to use NC Medicaid-funded services for eligible health, mental health, and substance use services as leverage for eligible households who are participants in NCORR's FY23 CoC Rapid Rehousing grant. The resources provided by NC DHHS are not funded by the Department of Housing and Urban Development's (HUD) Continuum of Care or Emergency Solutions Grants programs.

The value of the Medicaid services is \$658,820 over the course of one year based on the expected number of individuals served. These services will be paired with the Back@Home-BoS program for participants in the FY23 Rapid Rehousing grant and will be available for the period beginning on October 1, 2024 to the end of the operating period on September 30, 2025.

Sincerely,

Karen Wade, MSPH

Policy Director

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North Carolina Department of Health and Human Services

Karen.wade@dhhs.nc.gov

919-608-1752

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES