Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

- 1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
- 2. The FY 2018 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.
- 6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

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

Inc.

1A-3. CoC Designation: CA

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

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories		P	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials		Yes		Yes
CDBG/HOME/ESG Entitlement Jurisdiction		Yes		Yes
Law Enforcement		Yes		Yes
Local Jail(s)		Yes		Yes
Hospital(s)		Yes		Yes
EMS/Crisis Response Team(s)		Yes		Yes
Mental Health Service Organizations		Yes		Yes
Substance Abuse Service Organizations		Yes		Yes
Affordable Housing Developer(s)		Yes		Yes
Disability Service Organizations		Yes		Yes
Disability Advocates		Yes		Yes
Public Housing Authorities		Yes		Yes
CoC Funded Youth Homeless Organizations		Not Ap	plicable	No
Non-CoC Funded Youth Homeless Organizations		Yes		Yes
Youth Advocates		Yes		Yes
School Administrators/Homeless Liaisons		Yes		Yes
CoC Funded Victim Service Providers		Not Ap	plicable	No
Non-CoC Funded Victim Service Providers		Yes		Yes
Domestic Violence Advocates		Yes		Yes
Street Outreach Team(s)		Yes		Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates		Yes		Yes
LGBT Service Organizations		Yes		Yes
Agencies that serve survivors of human trafficking		Yes		Yes
Other homeless subpopulation advocates		Yes		Yes
Homeless or Formerly Homeless Persons		Yes		Yes
Mental Illness Advocates		Yes		Yes
Substance Abuse Advocates		Yes		Yes
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Other:(limit 50 characters)		
N/A	Not Applicable	No

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)

 The CoC has an inclusive governance structure & conducts open meetings in order to solicit & use opinions & feedback from stakeholders. Because the CoC covers 79 counties, the CoC must have multiple levels of coordination & options to participate, including regional & CoC-wide groups. The CoC has 3 significant ways to gather feedback & incorporate diverse thinking into planning: workgroups/committees, surveys, & direct agency/stakeholder engagement. This year, the CoC restructured its Board to expand beyond representation from each of the 13 regions to include at-large members representing state government departments & sector experts on domestic violence, healthcare, legal aid, housing, & behavioral health services. The CoC also included 2 positions for people with lived experience. These changes ensure more diverse perspectives across the 79 counties are considered & incorporated in all planning & policies. Representatives from diverse perspectives work together on other committees/workgroups to share local efforts & engage directly in planning & provide insight to set priorities & strategies. Workgroups gather feedback from stakeholders to develop new or change existing policies. The CoC has several standing subcommittees on subpopulations, coordinated entry, & funding & performance. Every policy & planning document is vetted by the groups through surveys & individual conversations with stakeholders to incorporate ideas & changes prior to approval by the CoC Board. 2) The CoC uses its website & mailing list to advertise all CoC meetings. The CoC publishes all recommended policies & plans for feedback, & when possible, allows at least one month before a proposed change is voted upon to allow adequate time for review and feedback. 3)The inclusive design of the CoC allows individuals to have input throughout the process to improve the CoC's approach to prevent & end homelessness. CoC staff work to incorporate all ideas in solutions and plans.

1B-2.Open Invitation for New Members. Applicants must describe:

(1) the invitation process;

- (2) how the CoC communicates the invitation process to solicit new members:
- (3) how often the CoC solicits new members; and
- (4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC. (limit 2,000 characters)
- 1) The CoC holds monthly conference calls of its CoC Board, which oversees and makes decisions for the CoC. The 13 regions also hold regular in-person

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meetings. New members are invited to attend these public meetings at any time. Any entity/person in the CoC's 79 counties may attend, ask questions, and provide input on discussion topics. 2) Meeting dates and locations are posted to the CoC website. Monthly meeting invitations and reminders for these meetings are sent via email. CoC staff maintain a CoC-wide email list & Regional Leads maintain regional email lists. The CoC-wide email distribution list is used to deliver news, ask for feedback, connect stakeholders to resources, and announce policy changes and funding competitions. CoC staff engage daily with existing and new agencies wanting to get involved at a deeper level in the CoC, encouraging them to attend CoC Board meetings, review CoC-level information on the CoC website, and connect locally though one or more of the 13 RCs. CoC staff work closely with RC leadership to outreach and engage stakeholders in their local communities to build new and/or stronger partnerships. 3) The CoC welcomes new members throughout the year and works to recruit additional participants on an ongoing basis. 4) The CoC encourages people with lived experience to get more involved in local decision-making and leadership roles. We advertise at local meetings and engage homeless/formerly homeless people at events such as Project Connect, using peers to invite and encourage others to get involved. The CoC uses NCCEH's Champions for Change, a program working with people with lived experience across NC to learn how to use their voice to advocate on their own behalf. The CoC worked this year to identify candidates to join committees and take leadership roles locally; one Champion has joined the CoC Board.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)

 The CoC advertises funding on its website year-round, & staff are always available for one-on-one consults. The CoC announced an intent to apply process at public, monthly CoC Board meetings (Mar-Jun 2018), on the CoC's website, through the CoC's mailing list (330 stakeholders), & at the CoC's 13 regional meetings & via their mailing lists. Staff directly notified agencies that applied previously, including agencies that had not been funded. Staff contacted high-performing agencies without CoC grants, encouraging them to apply. After receiving an intent to apply form, staff held calls with potential applicants to discuss the application process, timelines, & potential projects. The CoC held an orientation webinar for agencies interested in applying for new CoC funding on 3/8/18. The link for the intent to apply form was posted immediately following the orientation webinar. The CoC received 18 intent to apply forms including 15 agencies that had never received CoC funding. After the NOFA was released, 7 agencies submitted new project applications, including 5 agencies that had never received CoC funding. The CoC posted its approved CoC funding priorities & new & renewal project scorecards prior to the competition to show agencies how projects would be scored, evaluated, & ranked. No agencies were discouraged to apply. Staff assisted agencies to understand project eligibility, the CoC's priorities, & regional needs. 2) The CoC uses funding priorities & scorecards to rank & review projects. When determining which new projects to include in the final project listing, the CoC considered the same

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criteria for all agencies: CoC funding priorities, agency financial & staff capacity, adherence to Housing First & best practice program design, target populations, timeliness of submitting application materials, project score, & history of running the proposed activity. 3) The CoC announced it was open to agencies interested in applying for new projects on 3/8/18.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Not Applicable
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

- 1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:
- (1) consulted with ESG Program recipients in planning and allocating ESG funds; and
- (2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients. (limit 2,000 characters)
- 1) The State of NC is the ESG Program Recipient for the CoC. Collaborative Applicant staff work with the ESG office to set the funding formula & design an application to subgrant the funds. The application is designed to allow the CoC's 13 regions (& 11 other CoCs) to prioritize funding and select applicants

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> through a regional process and application. This process is similar to the CoC competition & allows the CoC a large amount of autonomy in selecting ESG subrecipients. The CoC sets funding priorities to inform how ESG funds are allocated in the CoC & creates unbiased review panels in its 13 regions. The CoC runs 13 funding processes to put forward high quality applicants & collaborates with the ESG recipient to collect and provide data to help communities choose high-performing agencies to receive ESG funding. 2) Together, the CoC & ESG staff developed a Quarterly Performance Report (QPR). The report includes information from CAPER, System Performance Measures, and utilization. ESG subrecipients turn the QPR in to the CoC & ESG office one month after the end of the quarter. The new report allows the CoC, ESG Office, and agencies to regularly monitor performance and make adjustments as necessary. The QPR is an excel tool that helps visualize key performance metrics & combine data from multiple HMIS reports. It also allows DV agencies to use their comparable databases for QPR completion. The reports are then combined into one tool for the CoC & ESG office to compare performance across agencies and activity types. This is the first year using the tool and the data collected will be used to set performance benchmarks. The ESG office & CoC staff talk weekly about ESG policies, coordinate communication, and improvement plans for subrecipients. CoC staff partner with the ESG office to provide training and technical assistance to lowerperforming grantees. The CoC's HMIS staff work closely with subrecipients to improve data quality & ensure accurate CAPER reporting.

1C-2a. Providing PIT and HIC Data to Yes to both Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?

- 1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:
- (1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
- (2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)
- (1) The NC BoS CoC has multiple protocols to prioritize safety and provide trauma-informed, victim-centered services. The CoC's emergency transfer plan outlines the process the CoC follows when it receives an emergency transfer request. The CE system helps the client find another safe unit and emergency

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transfers have first priority for open units under the CoC's written standards. The service provider must coordinate with DV service providers, most of which receive funding through DOJ Office on Violence Against Women and the HHS Family Violence Prevention Program. The CoC held a training webinar on its emergency transfer policy in May 2018. Each CoC and ESG-funded housing program must include an emergency transfer policy in its policies and procedures. At least two service providers in the CoC have received emergency transfer requests this year. (2) The CoC also has CE protocols to prioritize safety and maximize client choice. Everyone who presents at an access point is asked a series of questions including questions about their safety. If they answer that they may be at-risk for harm or afraid for their safety, the access point connects the client to the local DV service provider which conducts safety planning. If the client would rather be served in the mainstream homeless system, the DV service provider connects them to emergency shelter. DV survivors are tracked on active CE lists without identifying information, but they are offered the option to be tracked with identifying information. All DV survivors are offered the same housing options as other people experiencing homelessness. CE case conferencing includes DV providers to ensure the needs of any survivor on the list receives the trauma-informed DV services they

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

need. The CoC collaborates with the North Carolina Coalition Against Domestic Violence to educate DV providers about CE and encourage participation so

survivors in DV shelters have full access to housing opportunities.

The NC BoS CoC, in partnership with the North Carolina Coalition Against Domestic Violence (NCCADV), offers multiple training opportunities for CoC project staff and Coordinated Entry (CE) staff on best practices for serving survivors. The CoC's mandatory coordinated entry trainings for access points and assessors, which are available online, address CE protocols for serving survivors. The CoC offers annual training webinars on emergency transfers and other needs of survivors of DV. These trainings are posted online and available anytime and updated on an annual basis. The Collaborative Applicant and ESG Recipient recruited NCCADV to provide a trauma-informed care session at the annual statewide conference on ending homelessness, which is open to all CoC project staff and CE staff. The CoC includes DV service providers in regional planning and decision making and NCCADV sits on the CoC's Board and CE Subcommittee. CoC staff sits on NCCADV's state steering committee which guides NCCADV's CDC DV Prevention Grant. This grant provides traumainformed training and technical assistance, which are available to CoC project staff. NCCADV will be providing technical assistance on trauma-informed organizational policies through this grant for at least the next 5 years. Through this partnership, the CoC plans to offer intensive trauma-informed training to grantees, to increase the training opportunities for CE staff, and to better prepare DV providers to participate in and support the CE system.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence,

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sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

CE access points ask people whether they are fleeing from DV or feel they are at-risk of harm. If someone presents at a CE access point that may be fleeing DV, they are immediately connected to a DV service provider for safety planning services. The CoC tracks the number of people referred to DV providers from CE access points. In 2017, CE access points reported that 790 people were fleeing from violence and were referred to a DV service provider. The NC BoS CoC collaborates with the NC ESG office and the NC Council for Women to ensure all ESG-funded DV service providers have comparable databases that can produce de-identified aggregate data for use by the CoC and the ESG recipient. The CoC and state ESG office have implemented a quarterly performance report (QPR) that uses CAPER data and reports on data quality and unit utilization rates to help the CoC assess how DV programs are meeting the needs of survivors by assessing outcomes on a quarterly basis. This same reporting tool also allows the CoC to assess how well non-DV programs serve survivors of DV. The QPR uses data from the CAPER and other database reports to assess outcomes for DV shelters and the few DV-run RRH projects in the CoC. The CoC can use this report to assess length-of-stay and exit destination to make sure survivors of DV connect quickly to positive permanent housing destinations. This report also helps the CoC assess that people with additional risk factors for DV, like people with disabilities and homeless youth, are well served by the DV shelter system.

1C-4. DV Bonus Projects. Is your CoC Yes applying for DV Bonus Projects?

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	
RRH	X
Joint TH/RRH	

1C-4b. Applicants must describe:

- (1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;
- (2) the data source the CoC used for the calculations; and
- (3) how the CoC collected the data.

(limit 2,000 characters)

1) According to the 2018 Point-in-Time (PIT) Count, a total of 510 people who were experiencing homelessness had also experienced domestic violence. Of these, 407 were in DV shelters or transitional housing, and 103 people were in non-DV shelters or transitional housing. There were 98 people in PSH or RRH who had experienced homelessness and domestic violence. Of these, there were 25 people in RRH run by DV service providers and 73 people in non-DV focused PSH or RRH. In total, the CoC serves at least 600 survivors of DV on a

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given night, and the true number is likely higher because people often underreport their experiences of domestic violence. This represents 23% of the CoC's homeless population and 4% of the CoC's PH population. 2) The CoC used the PIT and Housing Inventory Count (HIC) data for its calculation because they are the only data points that cover all providers for the CoC, making this data source the most comprehensive. This is the one time of year that the CoC gathers information from all providers, including those that do not participate in HMIS. The PIT Count includes shelters and transitional houses that do not participate in HMIS because DV agencies are prohibited from participating in HMIS. Some of the DV shelters receive ESG funding and maintain a comparable database and provide data through the CAPER. However, other DV shelters and transitional housing projects do not. 3) The CoC collected data from every homeless service agency in its geographic area on January 31, 2018 for the PIT Count and HIC. All shelters, transitional housing, rapid rehousing, and permanent supportive housing programs are surveyed. The CoC also conducts unsheltered counts. CoC staff work with all providers, with additional support for DV agencies that don't have a comparable database, to ensure they collect data appropriately and accurately.

1C-4c. Applicants must describe:

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;
- (2) data source the CoC used for the calculations; and
- (3) how the CoC collected the data. (limit 2,000 characters)
- 1) Most DV survivors exited shelters quickly to permanent housing. However, a significant number stayed in shelter more than 90 days or exited to other homeless or temporary situations. Of the 2996 people in DV shelters in 2017, 24% (714) stayed for over ninety days while 11% (317) stayed for more than six months. Among people with CAPER exit destination data, 42% (618) exited DV shelter to another shelter or unsheltered situation, temporarily-housed situation, or an institution. The 2018 PIT count showed that 407 people resided in DV shelters. Of these, 15% (61) were identified as having a Serious Mental Illness or Substance Use Disorder, indicating a need for additional support and treatment. ESG-funded DV shelters served 2996 people in 2017. Of these, 40% (1220) were children under 17, indicating a need for educational services for survivors. 8% (252) were youth ages 18-24 who may need higher educational services, job training, or LGBTQ-focused services. 27% (801) had a disability at entry to shelter, 30% (911) lacked health insurance, & 86% (2576) weren't receiving SNAP. An additional 679 people with histories of DV stayed in mainstream ES or TH. 2) The CoC used PIT count data to capture total numbers. However, this data does not demonstrate the specific housing & service needs of this population. To capture this information, the CoC used 2017 CAPER data from ESG-funded DV shelters to better identify the needs of DV survivors. 3) The CoC conducted the 2018 PIT count on 1/31/18, collecting data from all service providers and conducting unsheltered counts. The CoC collected CAPER data in collaboration with the state ESG office, helping ESGfunded DV service providers use comparable databases & pull CAPER reports from those databases.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

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(1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;

(2) quantify the unmet need for housing and services for DV survivors;

- (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and
- (4) describe how the CoC determined the unmet need for housing and services for DV survivors. (limit 3,000 characters)
- 1) A significant share of DV survivors in the CoC do not have their basic needs of healthcare, housing, and food met. According to 2017 CAPER data collected from DV shelters, 30% of people in DV shelters lacked health insurance, 86% were not receiving SNAP benefits and 27% had disabilities. DV survivors represented 23% of all people experiencing homelessness on the night of the PIT but only 4% in the CoC's PH projects, showing a need to increase use of PH for DV survivors. There are currently no CoC-funded DV projects. This group needs additional PH resources to safely exit homelessness and decrease their length of time homeless. 24% stayed in shelter for over ninety days while 11% stayed for more than six months. DV shelters consider an exit to a non-DV shelter a positive exit as the person's safety concerns have been addressed. However, we know additional RRH resources could reduce the length of time a person is homeless and allow other ES to free up their beds. 2) Housing is a critical need. A survey conducted by the National Network to End Domestic Violence found that 69% of calls to DV hotlines in NC included requests for housing assistance that were not met. According to 2017 CAPER data, 714 survivors could not exit DV shelter after 90 days or more, and 369 stayed in shelter for at least 6 months. Approximately 600 survivors in 2017 exited DV shelter to another homeless destination, showing that current CoC resources for permanent housing do not meet all DV survivor's needs. In total, according to 2017 CAPER data, roughly 500-700 people annually likely need additional assistance like RRH from the CoC to safely & quickly exit homelessness. Mainstream and DV shelters attempt to assist survivors with available resources in the CoC, but more are needed. According to HMIS data, PSH programs served 1782 people in 2017. Only 3.5% (62) of those people were identified as currently fleeing DV. According to 2017 CAPER data, only 6% (135) of people in RRH programs were fleeing DV out of 2083 total people served. While the CoC prioritizes DV survivors in its RRH programs, they are less likely to receive RRH in the CoC because they are served through mainstream providers that do not have the expertise needed to serve this special population. Additional DV RRH targeting DV survivors could address this issue. 3) The CoC and ESG office collected CAPER data from ESG-funded DV service providers that use comparable databases for quarterly reports and the annual CAPER. The CoC collected other PSH/RRH data from its HMIS as part of each program's entry assessments. The NNEDV survey is available on their website. 4) The CoC used DV-specific data and information from CoC-wide use of resources to determine the unmet need.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

The CoC has applied for one RRH DV bonus project. The North Carolina Coalition Against Domestic Violence (NCCADV) is the applicant. This project

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will increase the resources available to rapidly rehouse survivors and allow DV agencies to gain more experience with RRH projects. This grant will help house about 80 households at a given time. The CoC estimates that around 240 households could be served annually, if households receive an average of 3-4 months of assistance. This project alone could serve as much as half of the CoC's unmet need for housing assistance among survivors and assist the CoC to better target PSH resources to survivors with higher level needs. DV-targeted RRH could act as a bridge for survivors into PSH by moving them guickly into housing through RRH and transitioning them to PSH when necessary. Having the resources to move people quickly out of shelter would help the CoC focus more intensive resources on people with the highest barriers to exiting homelessness. Since the CoC could only apply for one DV RRH bonus project, the CoC decided to fund a state-wide agency to ensure RRH coverage across the 79 counties of the CoC for DV survivors. NCCADV will subgrant funds to providers across the 79-county region to ensure RRH access for the entire geographic region. NCCADV is the statewide expert in improving safety and services for DV survivors and addressing survivors' multiple barriers to safety and security. They provide extensive training to DV providers and communities across the state. Adding housing to their portfolio allows them to align DV best practices with RRH best practices. Through this project, NCCADV will develop a housing model that more comprehensively meets survivors' needs and train its RRH projects on how to better serve survivors. Finally, by adding a CoC-wide DV-dedicated RRH project, CE systems will focus on improving identification of and access to CE for survivors, which will help all survivors access all RRH.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;
- (2) rate of housing retention of DV survivors;
- (3) improvements in safety of DV survivors; and
- (4) how the project applicant addresses multiple barriers faced by DV survivors.

(limit 4,000 characters)

The North Carolina Coalition Against Domestic Violence (NCCADV) has applied for DV bonus funding and will subgrant funds to agencies across the CoC's 79 counties. 1, 2) NCCADV does not currently provide housing services so no data exists from the agency for housing placements or retention. However, because the CoC does not currently have any agencies that operate RRH programs covering the CoC's 79 counties or any DV agencies that operate multi-county RRH and the CoC wants to ensure full RRH access to all DV survivors across the full geographic region, it has chosen a state-wide entity to apply. The CoC chose a project applicant with extensive experience in DV services, has actively participated in the CoC by serving on multiple committees, and is able to provide full RRH coverage across the CoC through subrecipients. NCCADV will subgrant to at least four organizations. Two potential subrecipients, Safe Space and Coastal Women's Shelter, currently operate ESG-funded shelter and have a close working relationship with NCCADV on regional domestic violence projects. Safe Space and CWS are located in areas of NC that do not currently have RRH resources, so permanent housing placements from shelter are limited. Coastal Women's Shelter has served 56 people in CY2018 to-date, 41 of whom have exited the shelter. 22 (54%) of the exits were to permanent

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housing destinations, 9 (22%) exited temporarily to family or friends, and only 2 (5%) exited to another emergency shelter. Access to funds through this project would fill those gaps at CWS and Safe Space, so survivors have a better chance at finding affordable and safe housing in the community. NCCADV will likely subgrant to other organizations that currently run RRH. NCCADV will evaluate potential subgrantee's rate of housing placement and retention when choosing the final list of subrecipients. CoC staff will assist NCCADV to train all subrecipients on RRH best practices, evaluate the performance of potential subrecipients, and implement robust oversight to track each grantee's performance. 3) NCCADV leads the state on improving safety and services for DV survivors and addressing survivors' multiple barriers to safety and security. Through its Advocate's Institute and other trainings, NCCADV trains advocates in the following: trauma-informed principles for serving survivors; risk assessment; safety planning; mental health, substance use and suicide; partnering with allied professionals to improve health, housing, and finances of survivors. These trainings ensure that all survivors in the CoC receive the best services to maintain their safety. NCCADV also implements statewide programs to increase the safety of survivors by ensuring equal access to DV and social services specifically for Latinx and LGBTQ survivors. These survivors may have difficulty accessing DV services, so NCCADV's efforts ensure all survivors can access safety planning and DV shelter. NCCADV's Legal and Policy Program works to increase survivors' safety by providing direct legal services and advocating for legislation, including equal protections for survivors in same-sex relationships and DVPO removal of firearms orders. NCCADV will use this expertise to ensure survivors served by the DV bonus funding are able to find and maintain stable, safe housing. 4) NCCADV and its partners will address DV survivors' multiple barriers that may prevent them from living healthy lives free of violence. They will provide economic services, including job training, financial wellness counseling, credit repair, increased coordination between health systems and DV agencies to address violence-related health problems, partner with culturally specific organizations to serve Latinx survivors, address the specific needs of children experiencing the trauma of domestic violence, and provide legal advocacy.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:

(1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;

(2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and

(3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Western Piedmont Council of Governments	12.00%	Yes-HCV	No
Brevard Housing Authority	53.00%	Yes-Public Housing	No

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Hendersonville Housing Authority	5.00%	Yes-Public Housing	No
Mid-East Regional Housing Authority	45.00%	Yes-Public Housing	No
Wilson Housing Authority	95.00%	Yes-Both	No

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

Approximately 100 PHAs exist in the NC BoS CoC. The CoC regularly reaches out to PHAs, including the 5 largest, to encourage them to adopt preferences. The CoC invites PHAs to regular regional meetings, provide information about homelessness in their region, and work with PHA staff to encourage them to adopt preferences. CoC staff help CoC members provide education and assist them to remove perceived barriers to adopting preferences. CoC staff also present at PHA directors' conferences and at state-wide conferences to educate PHAs and homeless leaders about homeless preferences. CoC staff participate in a monthly working group with the Greensboro HUD Field Office that focuses on helping PIH and CPD HUD staff better support the collaboration between CoCs and PHAs. CoC staff presented alongside HUD Field Office staff in a webinar, encouraging all PHAs to adopt preferences. CoC staff conducted webinars, outreach, and application assistance to help PHAs put in applications for the Mainstream Voucher and FUP Voucher NOFAs, including assistance to the Greenville Housing Authority, the largest in the CoC. These applications have helped PHAs think about how to serve more vulnerable populations, foster collaboration, and incentivize additional preferences.

1C-5b. Move On Strategy with Affordable Yes Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)?

Move On strategy description. (limit 2,000 characters)

1) The CoC has a Move On strategy, working closely with affordable housing providers & other partners. 2) The CoC understands that to make strategies work, the CoC needs to educate grantees, affordable housing providers, local Public Housing Authorities & Housing Choice Voucher organizations, multifamily (MF) property owners, LIHTC developers, & local/state governments to provide the resources needed for the initiative. CoC staff trained all current CoC-funded PSH programs on how to implement Move On strategies, using the CSH toolkit as a guide. This training provided a step-by-step process of how to operationalize strategies, engage affordable housing providers to initiate Move On preferences, evaluate current program participants to potentially move on, & implement aftercare procedures to assist former participants. These programs

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have begun updating policies & procedures to implement strategies & outreaching local PHAs, HCV organizations, MF property owners, and LIHTC developers to discuss expanding current preferences to include Move On. In Fall 2018, the CoC will pilot a Move On initiative with Trillium Health Resources (THR) & Greenville Housing Authority (GHA) (both CoC PSH grantees) along with Mid-East Regional Housing Authority to expand current preferences and begin moving willing participants from CoC programs into public housing, Housing Choice Vouchered units, and MF units administered by the PHAs. THA and GHA have already evaluated current participants to determine the feasibility of moving on & are working with willing participants to plan for graduation from the program. CoC staff have joined with the Greensboro Field Office to provide PHAs across the state information about how they can add a Move On preference & the benefits of having a closer relationship to the CoC. CoC & HUD Field Office staff have identified several large PHAs in the CoC to outreach & assist in the creation of preferences for Move On households.

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)

The NC BoS CoC has implemented a CoC-wide non-discrimination and equal access policy. Every program, including emergency shelter, transitional housing, rapid re-housing, permanent supportive housing, street outreach, and others, must comply with this policy, regardless of funding. The CoC's policy ensures that people are served equally, regardless of sexual orientation or gender identity. To help implement this policy, the CoC provides regular training on how programs should best serve LGBTQ people. The CoC held a webinar on the policy this spring and offered fair housing trainings for shelter at the statewide annual conference on homelessness. Multiple other Fair Housing trainings have been offered through Managed Care Organizations and NC Legal Aid across the CoC throughout the year. The CoC will continue to offer trainings like these regularly and require CoC- and ESG-funded programs to attend an Equal Access Policy training annually. Additionally, the CoC has grievance processes that allow people to lodge complaints if they feel they have been discriminated against by a specific agency. The CoC's anti-discrimination policy offers the option to file a complaint with CoC staff if they have been involuntarily separated from their family. The CoC also has a formal coordinated entry (CE) grievance process that allows people to file a discrimination complaint if they feel they have been discriminated against in the CE process. These complaints go first to the local CE Lead, then to the CoC's CE subcommittee. All programs must make participants aware of these options to file grievances and the process to do so. The CoC's written standards prohibit programs from denying entry to households in any way that would violate Fair Housing or equal access rules or policy.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access

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Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	Х
Engaged/educated local business leaders:	Х
Implemented communitywide plans:	X
No strategies have been implemented:	
Other:(limit 50 characters)	

- 1C-8. Centralized or Coordinated Assessment System. Applicants must:
- (1) demonstrate the coordinated entry system covers the entire CoC geographic area;
- (2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
- (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and (4) attach CoC's standard assessment tool. (limit 2,000 characters)
- 1) The CoC covers 79 counties. The CE system covers the entire geographic area by dividing into 13 local referral zones, which the CoC's Regional Committees (RCs) operate with oversight by the CoC. These zones set access points, hold regular case conferencing meetings, track by-name lists, & facilitate referrals to permanent housing. Every CE zone has a local CE plan, defining the process in that region, all of which comply with the CoC's CE Policies and Procedures. Each local CE plan defines physical access points in each county.

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In areas where no current service providers exist, providers in other counties conduct regular outreach, advertisement, & some have set up hotline telephone lines to provide access to CE. 2) The CoC continuously works to improve access to housing & services to people least likely to access them, especially in the most rural areas of the CoC. RCs work with law enforcement, health care systems, church groups, DSS, & other agencies to identify people who aren't accessing CE. The CoC partners with health care agencies & DV providers to provide language lines & communication options for people with disabilities. The CoC started an SSO-CE grant on 09/01/18, which focuses on improving access to CE. Recipients of this grant will provide street outreach, advertisement, & other assistance accessing CE, focusing on counties & populations that have barriers to access. 3) The CoC uses a diversion screen to ensure that shelter beds are prioritized for those with no other housing options and the VI-SPDAT tool to prioritize people most in need of assistance for available housing & services. Local case conferencing meetings make plans to help find & engage people on the by-name list who may have difficulty accessing housing, even if they are prioritized for it. These meetings also leverage other resources besides CoC & ESG funding that can be used to house people on the by-name list, so everyone receives assistance in a timely manner.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

,	
Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

Foster Care:	Х
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:

(1) objective criteria;

(2) at least one factor related to achieving positive housing outcomes; (3) a specific method for evaluating projects submitted by victim services providers; and

(4) attach evidence that supports the process selected.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

- 1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process. (limit 2,000 characters)
- 1) The CoC prioritizes projects that serve disabled people, including substance use, mental illness, or other impairments requiring significant support to maintain housing, CH people who have been homeless for long periods of time & more susceptible to victimization, illness, & death, and domestic violence survivors. The CoC also prioritizes projects who utilize a housing first approach and serve low or no income households and those that have difficulty engaging in services. 2) Projects that serve vulnerable populations receive additional points on the scorecard. Projects with more points are ranked higher on the final ranked list. The CoC reviews and ranks projects following Housing First tenets higher on the final ranked list. To meet Housing First standards, projects cannot screen out for income, substance use, domestic violence, or criminal record. They cannot terminate due to failure to participate in supportive services or make progress on a service plan, loss of income or failure to improve income, domestic violence, or any other activity not covered in a lease agreement. 2) The CoC also evaluates project design adherence to SAMHSA's PSH Key Elements & the USICH's RRH Program Standards and Benchmarks that allow programs to serve more highly vulnerable persons and meet their severity of

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service needs. The CoC ranks PSH and RRH projects with program design standards higher on the ranked list. All PSH projects are required to follow HUD Notice 16-011 to be included in the ranked list. The CoC reallocated one renewal project this year because it did not meet enough standards to guarantee that it would target highly vulnerable populations. The CoC ranked two new RRH projects that will serve vulnerable populations over renewal projects that have a history of not serving prioritized populations.

- 1E-3. Public Postings. Applicants must indicate how the CoC made public:
- (1) objective ranking and selection process the CoC used for all projects (new and renewal);
- (2) CoC Consolidated Application-including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and
- (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	X	CoC or other Website	x
Email	X	Email	X
Mail		Mail	
Advertising in Local Newspaper(s)		Advertising in Local Newspaper(s)	
Advertising on Radio or Television		Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)		Social Media (Twitter, Facebook, etc.)	

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: No.

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1E-4a. If the answer is "No" to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Programfunded projects to determine the viability of reallocating to create new high performing projects. (limit 2,000 characters)

- 1) The CoC has a robust process to reallocate low performing projects to new projects that demonstrate they will be high performing. The CoC uses this criterion to assess existing project performance: spending- projects should spend at least 90% of funds; population served-projects should serve people with the highest needs; Outcomes- projects should produce strong outcomes that contribute to overall system performance, Project Type- project must be a type that meets CoC needs. This criterion was used in the CoC new/renewal scorecards to identify low performing projects that should be reallocated. When projects have low spending patterns, the Project Review Committee (PRC) considers reallocating some/all of its funding, allowing for new, more effective projects. Because the CoC covers 79 counties, it considers coverage when reallocating a project that will leave coverage gaps. The CoC encouraged providers to apply for new projects created through reallocation, especially in high-priority areas with poor coverage. In the past 2 years, the CoC partially & fully reallocated renewal projects due to low spending &/or poor performance. In 2018, the CoC fully reallocated 2 projects & partially reallocated 4 projects to create 3 new projects. 2) While the CoC has not reallocated 20%, the CoC does not fund TH. Its portfolio only includes PH, HMIS, & SSO-CE grants. The CoC considers geographic coverage when considering reallocation. The CoC encourages expansion of its highest performing projects. However, this is often not possible. This creates the need to fund lower performing agencies to ensure coverage in every county. Because of this limitation, the CoC cannot use reallocation like single county CoCs do. Instead, the CoC reallocates when possible and focuses on performance improvement.
- 1E-5. Local CoC Competition. Applicants must indicate whether the CoC: (1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;
- (2) rejected or reduced project application(s)—attachment required; and (3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 C Competition Application deadline? Attachment required.	oC Program	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application and Application Application (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition (2) If the CoC rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition (2) If the CoC rejected or reduced (3) If the CoC rejected or reduced (4) If the CoC rejected or reduced (4) If the CoC rejected (4) If the C		Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writi snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	ng outside of e-	Yes

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2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC Yes and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.

2A-1a. Applicants must: (1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and (2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

2A-2. HMIS Policy and Procedures Manual. Yes Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.

2A-3. HMIS Vender. What is the name of the Mediware - Bowman **HMIS** software vendor?

2A-4. HMIS Implementation Coverage Area. Regional (multiple CoC) Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.

HMIS Governance Charter, pages 13-19

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type: (1) total number of beds in 2018 HIC; (2) total beds dedicated for DV in the 2018 HIC; and

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(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	2,526	832	1,145	67.59%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	584	36	316	57.66%
Rapid Re-Housing (RRH) beds	787	193	564	94.95%
Permanent Supportive Housing (PSH) beds	1,820	0	1,618	88.90%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)

1) The CoC plans to increase bed coverage for both ES and TH programs by targeting agencies with the largest number of non-HMIS beds, offering them free HMIS licenses and training to access the system. The CoC is currently leaving the statewide HMIS. The CoC has had numerous issues with the previous HMIS Lead Agency including poor training and visibility issues. It has been difficult to recruit agencies without having these issues addressed. The strategy to create a new HMIS that better meets the needs of the CoC's agencies was partly diven by our desire to increase bed coverage. By January 2019, CoC and HMIS staff will use the HIC to identify non-HMIS agencies and develop specific materials to demonstrate the benefits of HMIS usage to them and their community. CoC staff will set quarterly goals for outreach to these agencies and begin scheduling appointments for CoC and local leadership to meet with each agency, discussing their specific needs and how the CoC can work with them begin use of the system. CoC and HMIS staff will review accomplishments and challenges at the end of each quarter and adjust its plan, with insight from the CoC Board, to meet the 85% coverage within 12 months. 2) CoC and HMIS staff will work alongside local Regional Committee leadership and CoC representatives of the HMIS Advisory Board to outreach each agency, with the goal of meeting with them in person to discuss HMIS to better understand their barriers to agencies joining the system and find ways to overcome obstacles, when possible. Of the agencies not using HMIS, the vast majority are faith-based ES and TH programs, which do not have any funding requiring the use of HMIS The CoC is mostly rural and any agencies are very small without staff or capacity to meet the demands of HMIS. The CoC hopes to meet the 85% threshold in these categories by July 2019.

2A-6. AHAR Shells Submission: How many 10 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept?

2A-7. CoC Data Submission in HDX. 04/30/2018 Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count

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(HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter 01/31/2018 the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).

2B-2. HDX Submission Date. Applicants 04/30/2018 must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results. (limit 2,000 characters)

1) The CoC did not make changes to its sheltered count implementation or methodology for the 2018 PIT Count. 2) However, the CoC did have improvements in overall data quality through more intentional training for HMIS users and staff who collect data on paper forms to be entered by another person in the system. Much of the improvement in data quality centered on the universal data elements for determining chronic homelessness. The NCCEH Data Center, which trains all CoC end users provided specific trainings and one-on-one user technical assistance to improve user understanding of these elements. The CoC believes that much of the increase in chronic homelessness seen on the sheltered side of the 2018 PIT Count can be attributed to the emphasis on this type of training and technical assistance.

2C-2. Did your CoC change its provider Yes coverage in the 2018 sheltered count?

2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	310
Beds Removed:	379
Total:	-69

2C-3. Presidentially Declared Disaster No Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC's 2018 sheltered PIT count?

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2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Yes Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.

2C-4a. If "Yes" was selected for question 2C-4, applicants must:

- (1) describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018; and
- (2) specify how those changes impacted the CoC's unsheltered PIT count results.

(limit 2,000 characters)

1) The CoC expanded and improved its unsheltered count, leading the CoC to identify more people experiencing unsheltered homelessness in 2018. In 2016, the CoC restructured its Regional Committee system, creating 13 local planning areas in the CoC's 79 counties. During the 2017 PIT count, this new structure was in its infancy with a small amount of time to plan and coordinate unsheltered counts across all segments of individual regions. However, one year later, the restructured Regional Committees had ample time to ensure better coverage through increased planning of service and street-based counts and recruiting an increased number of enumerators to comb the streets and provide wider coverage. 2) The restructuring led to greater accuracy of counts and far better coverage than in prior years. Regional Committee restructuring has increased local leadership capacity and coordination, especially in the most rural, low- resource counties that previously undercounted unsheltered people. Higher capacity regions continued to build on and improve local methods. For example, one county with a history of doing only a service count at one agency throughout daylight hours developed multiple teams of volunteers to cover and search for individuals experiencing unsheltered homelessness across the county, starting at midnight and ending at 5:30 the next morning. The county expanded its service count, increasing the number of sites at various entry points in the community. This county found more than double the number of unsheltered individuals because of increased planning and coordination. While not to the same extent, other regions in the CoC experienced similar unsheltered count increases.

2C-5. Identifying Youth Experiencing Yes Homelessness in 2018 PIT Count. Did your

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CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?

(limit 2,000 characters)

- 2C-5a. If "Yes" was selected for question 2C-5., applicants must describe:
- (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;
- (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.

1) In order to hold the PIT count at times and in locations where youth were most likely to be located, the CoC partnered with local youth programs, including after-school programs, faith-based programs, and youth housing and services providers, to plan and conduct the 2018 PIT count. The CoC also partnered with homeless education liaisons to identify school-age youth who may not visit youth service programs. 2) Stakeholders involved in planning the count, brainstormed and implemented specific initiatives to engage youth in locations specific to the population. The CoC advertised on social media to increase and build awareness of youth counts and to elicit help in planning. Service and street-based counts were held outside of school hours and when youth programs were in operation to increase the opportunities to find youth experiencing homelessness. During the count, the CoC used HUD's addendum survey in addition to the standard survey to collect more complete and detailed information about identified homeless youth. Local leaders engaged youth providers that had not counted in prior years and conducted counts in these facilities.3) Homeless youth participated on PIT planning committees and the CoC plans to expand the scope of youth counts in 2019. The CoC will work closely with Point Source Youth and SchoolHouse Connection, two nationallybased nonprofits with employees embedded in NC. Both nonprofits have vast experience providing technical assistance to providers and communities and will assist the CoC to plan more extensive youth-based counts, including recruitment of homeless youth who can share their expertise to find and connect with other youth experiencing homelessness during the count.

- 2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:
- (1) individuals and families experiencing chronic homelessness;
- (2) families with children experiencing homelessness; and
- (3) Veterans experiencing homelessness.

(limit 2,000 characters)

1) CHRONICALLY HOMELESS: The CoC's 79 counties increased the scope of both service and street-based counts, leading to more unsheltered chronically homeless people being found. Outreach workers provided training on how to engage unsheltered individuals, including people experiencing chronic homelessness, who are reluctant to participate in the PIT, resulting in better data collection and more accurate identification of chronically homeless people. The CoC also worked closely with shelter staff to increase their knowledge of the definition of chronic homelessness, so they could better identify individuals

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and families. The CoC provided specific training and technical assistance to this staff on the universal data elements related to chronic homelessness, helping shelters enter more accurate data in HMIS for people experiencing chronic homelessness. With these efforts, shelters identified approximately 80% more chronically homeless individuals living in shelter in 2018 versus 2017. 2) FAMILIES: Many regions that struggled to conduct PIT counts in the past created new partnerships with school systems and DSS offices to improve engagement and identification of homeless families. Others broadened their services count, including more locations where they would find homeless families. 3) VETERANS. In 2018, regions fully implemented their regional plans to end Veteran homelessness developed in 2017. These plans helped Veteran service and housing providers, including SSVF and HUD-VASH programs fully integrate their work in the larger scope of the homeless service system. Veteran service and housing providers worked closely with PIT count leadership to use their street outreach expertise and their knowledge of where to find homeless Veterans to expand the scope of their regular work on the day of the PIT count to find all homeless Veterans. They used newly developed by-name lists to connect with other unsheltered Veterans not physically found on the night of the count.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.

5,456

3A-1a. Applicants must:

- (1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
- (2) describe the CoC's strategy 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 the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)
- 1) The CoC determines the risk factors to identify persons becoming homeless for the first time by screening each person presenting for services with a tool called the Prevention and Diversion Screen and using the collected data from the tool to evaluate common factors seen in the population. This allows programs to divert households, assisting to identify other permanent housing options, and providing access to mediation and financial assistance to remain in a permanent housing setting. 2) The CoC is actively working to increase resources for diversion activities, including financial assistance and plans to roll out an intensive training module on prevention and diversion specifically created for emergency shelter staff. This intensive training module will increase understanding of the critical role of diversion to decrease the flow of individuals at-risk of homelessness into shelter and how to operationalize these activities within the construct of their daily work. The CoC is actively working with NC 211 to pilot a regional prevention and diversion project, wherein 211 will serve as the entry point to the homeless service system, conducting the Prevention and Diversion Screen and providing mediation services and connection to local financial resources. The CoC is also working with NC DHHS to develop a referral platform and prevention strategy for Medicaid families who are unstably housed. This plan will be implemented once the new managed care system in the state comes online over the next year. 3) A Project Specialist from NCCEH uses the data to work closely with Regional Committee Coordinated Entry Leads to plan and strategize how to reduce the number of first-time homeless households, educate local providers on the tool and mediation skills, and seek local financial resources for diversion efforts.

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3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:

(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);

(2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;

(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and

- (4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless. (limit 2,000 characters)
- 1) The average length-of-time homeless in ES, SH, and TH in 2017 was 77 days. The average length-of-time homeless in ES, SH, TH, and PH prior to move-in was 164 days. 2) The CoC coordinated entry system prioritizes households for RRH and PSH based on length of time homeless, and the CoC works closely with providers to increase accessibility to permanent housing. The CoC's written standards focus on program design to ensure projects follow Housing First and other best practices (SAMHSA's Key Elements of PSH, HUD's RRH Program Standards, and CPD Notice 16-011). CoC staff provide ongoing training on these standards and pull program data from HMIS to evaluate progress on turnover rate, targeting, and positive exits. To create more PSH availability, CoC staff have worked with PSH providers to implement Moving On strategies including assisting them to evaluate their current households, identifying households in the program ready for Moving On opportunities, and the services and resources needed to help them move on to other permanent housing. This creates more PSH units for households with long histories of homelessness. PSH grantees are working with local PHAs to change their administrative plans to include Moving On clients from PSH programs as a local preference. 3) All coordinated entry systems hold regular case conferencing meetings, use local by-name lists to identify households with high vulnerability and long periods of homelessness, and connect them to permanent housing resources. CoC staff regularly evaluate HMIS data to identify long-term stayers in homeless programs and work with local program staff to ensure they are adequately connected to the CE system. 4) A Project Specialist from NCCEH works with Coordinated Entry Leads to strategize how to target people with the longest histories of homelessness and reduce the overall length-of-time homeless.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:

(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and

(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.

	Percentage	
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	43%	6
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	99%	6

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3A-3a. Applicants must:

(1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and (2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

 The CoC uses several strategies to increase the rate at which persons exit ES, TH, & RRH programs to PH destinations. The CoC Board approved written standards, including best practice program design such as the USICH's RRH Program Standards. The CoC set termination/evaluation procedures, limiting reasons for ending assistance to clients. CoC staff provides ongoing training to providers on standards & works with program staff on difficult cases, providing guidance on ways to engage landlords & hard-to-house individuals to improve PH exits. NCCEH has assigned CoC staff to provide ongoing support to emergency shelter & rapid rehousing programs. CoC staff targets support to the lowest performing shelters & RRH projects. 2) The CoC currently has a 99% rate of persons retaining PH or exiting to PH destinations in its PSH programs. This high rate is due to the CoC implementing a performance improvement planning process with its PSH programs, wherein staff review program/client documents to evaluate a program's compliance, adherence to best practices such as Housing First & SAMHSA's Key Elements to PSH, & performance. After review, CoC staff work with program staff to implement a plan, setting goals & timelines for improvement. To further strengthen performance, the CoC also scheduled tenancy support trainings for direct service & housing staff in November 2018. This training will focus on best practices, implementation of Housing First, integrating peers in recovery to provide tenancy support, traumainformed care, & motivational interviewing. CoC staff will work with the trainers to build an ongoing coaching mechanism to support provider staff to enhance their skills & to implement the practical strategies learned. CoC staff will implement the coaching strategies in early 2019. 3,4) The Project Director from NCCEH will oversee efforts in the CoC, working with all programs to improve retention & placement into permanent housing.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	5%

3A-4a. Applicants must:

- (1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;
- (2) describe the 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

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responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness. (limit 2,000 characters)

1) The CoC uses HMIS data and regular case conferencing meetings to identify households returning to homelessness and evaluate household and program data over time to determine the common factors of those returning to homelessness to develop strategies and decrease returns. 2) The CoC employs several strategies to reduce the rate of returns to homelessness. and is increasing the number of permanent housing units available in the CoC through increased use of state ESG and CoC funds for rapid rehousing. The CoC works with PSH programs to increase utilization of current resources. CoC staff work closely with the HMIS Lead to identify households returning to homelessness and are currently working to integrate coordinated entry efforts across Regional Committees into HMIS. The CoC has scheduled tenancy support trainings for direct service and housing staff in November 2018. This training will focus on best practices in tenancy supports, implementation of Housing First, integrating peers in recovery to provide tenancy support, trauma-informed care, and motivational interviewing. CoC staff will work with the trainers to build an ongoing coaching mechanism to support provider staff after the training to enhance their skills and to implement the practical strategies learned. CoC staff will implement the coaching strategies in early 2019. In approved 2018 ESG funding priorities, the CoC limited the use of ESG prevention dollars to households at-risk of returning to homelessness that have been in CoC- and/or ESG-funded housing programs in the past. These return prevention funds are to ensure that households exited from PH programs remain housed if they experience another housing crisis. 3) The Project Director works with permanent housing programs to improve performance and a Project Specialist from NCCEH works with RC Coordinated Entry Leads on local implementation and will oversee the CoC's HMIS by-name list, which identifies households that have returned to homelessness.

3A-5. Job and Income Growth. Applicants must:

- (1) describe the CoC's strategy to increase access to employment and non-employment cash sources;
- (2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
- (3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.
 (limit 2,000 characters)
- 1) The CoC uses several strategies to increase access to employment and non-employment cash sources. 100% of CoC-funded projects connect participants to mainstream employment programs and to caseworkers using SOAR methods to access disability benefits. The CoC emphasizes using SOAR to apply for Social Security Administration benefits to increase non-employment income for people with disabling conditions. Over 2 years, 34 caseworkers have been SOAR-trained, and the CoC has 2 full-time and 1 part-time SOAR workers in the CoC. CoC staff have trained grantees on ways to help clients sustain themselves after exit from permanent housing programs, including cash/non-cash income supports. CoC staff also review data with PH program staff from their most recent Annual Performance Report, comparing their programs' ability

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> to help households obtain cash/non-cash resources year over year and creating action plans to increase these benefits in the current operating year. 2) CoCfunded programs collaborate with mainstream employment services such as NC Works, a program of the NC Employment Security Commission, Vocational Rehabilitation, and local DSS work programs (TANF, Work First) to increase job placement, improve skills, mentor clients, and decrease barriers to work (i.e. childcare, transportation). The CoC encourages all grantees to enter into formal agreements with these entities by signing MOUs that define the specific services each party will provide. 3) A Project Specialist from NCCEH works closely with CoC grantees to evaluate their data and develop local strategies to meet CoC thresholds for employment (28% at exit) and benefits (75% at exit).

3A-6. System Performance Measures Data 05/31/2018 Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and
- (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

Total number of beds dedicated as DedicatedPLUS	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	1,312
Total	1,312

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	X
Number of previous homeless episodes	X
Unsheltered homelessness	Х
Criminal History	
Bad credit or rental history	
Head of Household with Mental/Physical Disability	X

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3B-2.2. Applicants must:

- (1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
- (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends: and
- (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless. (limit 2,000 characters)
- 1) The CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless focuses on diversion and RRH. Diversion and RRH are effective strategies because they quickly connect families to permanent housing and community resources. All coordinated entry access points administer the Prevention and Diversion Screening tool to every household seeking services to provide households mediation and financial assistance when necessary to divert them from the system. Diverting households before they access mainstream homeless services helps the CoC focus resources on the households that need significant assistance to exit homelessness. The CoC also holds regular case conferencing meetings, referring households to local RRH programs based on length of time homeless and service needs. After referral, RRH programs in the CoC focus on landlord engagement, housing identification, and using community-based resources, attempting placement of families as soon as possible. 2) To address both the housing and service needs of families and to ensure they successfully maintain housing once assistance ends, the CoC uses case conferencing meetings to discuss ongoing challenges and to leverage additional resources, such as employment services and job training, mainstream benefits, and behavioral health supports, to try to address families' service needs comprehensively. In 2018 ESG funding priorities, the CoC limited the use of ESG homelessness prevention funds to assist households who have exited RRH or PSH but face another housing crisis and need help to avert a return to homelessness. These return prevention funds are to ensure that households exited from PH programs remain housed if they experience another housing crisis. 3) Project Specialists at NCCEH work with local Regional Committees to rapidly rehouse families with children.
- 3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	X
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	x
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	X

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CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	Х
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth includes the following:

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes
Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	Х
Number of Previous Homeless Episodes	X
Unsheltered Homelessness	X
Criminal History	
Bad Credit or Rental History	

3B-2.6. Applicants must describe the CoC's strategy to increase:

(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and

(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources. (limit 3,000 characters)

1) The CoC employs many strategies to increase housing & services to homeless youth. The CoC is collaborating with Point Source Youth (PSY), a national organization helping communities address youth homelessness, to assist projects to gain a baseline understanding of the resources available for homeless youth. In 2018, PSY held a webinar for providers interested in starting youth-dedicated RRH programs, offering technical assistance and support to agencies ready to apply in upcoming funding competitions. PSY also provides information on other models that work well for homeless youth, such as host

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homes & family reunification, to house homeless youth outside of CoC & ESG funding. The CoC encourages agencies to apply for youth-dedicated RRH through ESG. The CoC actively engages PHAs & child welfare agencies to apply for new FUP vouchers. The CoC held a webinar on voucher funding for all PHAs & committed to helping identify eligible homeless youth. The state-wide McKinney-Vento Homeless Liaison Coordinator is on the CoC's Board in 2018. This partnership helps the CoC to connect with local school liaisons, allowing projects to provide more comprehensive services & increase access to housing for school-aged youth. The CoC will jointly host webinars with the State Education Agency to educate CoC providers about homeless education services and to educate school homeless liaisons on how to refer homeless families to housing and services in the CoC. CoC staff also increased the CoC's ability to identify homeless youth by assisting the state Department of Health and Human Services (DHHS) to create a survey to identify housing needs for all Medicaid-eligible youth and their families. Once identified, precariously housed and homeless youth will be referred to housing assistance. 2) The CoC has specific strategies to increase housing & services for unsheltered youth. This population is prioritized for PH placement in the CE system. The CoC started a new SSO-CE grant on 09/01/18, which aims to provide greater CE access to groups who otherwise have difficulty accessing the homeless service system. The grant funds street outreach activities targeting unsheltered individuals, including youth, & special advertisement initiatives in communities to reach underrepresented populations in the system such as unsheltered youth. CoC staff's work with DHHS will also identify Medicaid eligible unsheltered youth and connect them to housing resources.

3B-2.6a. Applicants must:

- (1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;
- (2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and
- (3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies. (limit 3,000 characters)
- 1) Initial evidence that the strategies in Q3B2.6 are working to provide increased availability of housing and services to homeless youth include the interest and engagement of providers. 44 people attended the PSY webinar in July 2018. From this webinar, 3 agencies contacted CoC staff to connect with PSY for technical assistance to assist them in putting together applications in the 2018 ESG competition. These agencies are the first youth-dedicated RRH programs in the CoC. The state ESG office will announce awards in December 2018. Other evidence that indicates increased interest in serving homeless youth includes 13 people attending the CoC's FUP orientation webinar and an application from Greenville Housing Authority, the CoC's largest PHA. In the future, evidence will show an increase in the number of homeless youth on the CoC's by-name list as the CoC is better able to identify this population, referrals to PH programs, and placements in RRH and PSH programs. 2) The CoC uses two ways to measure success in providing resources to homeless and unsheltered youth: youth decreases in the annual PIT Count & increased numbers of youth connected to and referred from the CoC's CE system. The CoC will use the 2019 PIT as a baseline year for identifying homeless youth,

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working closely with PSY to develop a comprehensive plan and training module to help local communities identify an accurate count of all youth experiencing homelessness across the CoC. Hereafter, the CoC will compare the number of youth identified year-over-year and will evaluate and track how many youth are assessed and placed in housing through the CE system. The CoC will be using comprehensive by-name lists, tracked in HMIS, to assess the number of youth experiencing homelessness and how long it takes for them to be housed. The CoC's goal is to see the number of youth connected to the CE system increase as communities are better able to identify homeless youth and youth-dedicated projects come online over the next few years. 3) Since it does not have an adequate system to identify youth experiencing homelessness in the system, the CoC will focus on identification and access. PIT counts coupled with byname lists should give the CoC the most comprehensive picture of whether and how youth are accessing resources and what the unmet needs are. In the future, once an accurate picture of youth homelessness exists, the CoC plans to use other tools to evaluate the effectiveness of different housing models and services for serving youth. The CoC will compare different housing providers and models, including RRH, PSH, FUP vouchers, host homes, and others, to evaluate which interventions most effectively serve youth.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:

(1) youth education providers;

(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);

(3) school districts; and

- (4) the formal partnerships with (1) through (3) above. (limit 2,000 characters)
- The CoC collaborates with 2 national homeless youth providers, Point Source Youth & SchoolHouse Connection. Both groups have partnered with the CoC to identify potential regions/projects that need TA/funding to build a robust support network for homeless youth. 2 CoC staff participate on committees in a state-wide initiative to provide homeless children with access to developmental resources, childcare, & access to PH. State-level professionals from NC Division of Child Development & Early Education, NC Child Care Development Fund, NC Infant Mental Health Association, NC State University, NC Department of Public Instruction, & NC DHHS join this initiative. CoC providers partner at the local level with early childhood service providers and work closely with Head Start. 2) LEAs & other school system social workers serve on CoC Regional Committees (RCs), connecting homeless youth to the CE system & providing educational assistance to families in shelters & PH programs. RCs rely heavily on LEAs to plan local PIT counts and assist on the day of the count. The SEA Coordinator serves as an at-large member on the CoC Board. This partnership creates opportunities for NCCEH staff to provide in-person trainings to the LEAs. In September 2018, the CoC co-hosted a set of webinars with the SEA to promote relationships between RCs & LEAs. 3) LEAs provide an essential connection for the CoC to school districts. They provide education to local school leaders on the CoC & bring essential personnel to the table on local youth homeless initiatives. 4) The CoC has informal partnerships with PSY & SHC currently, but formal MOUs will be signed with local RCs that accept TA. The CoC has a formal partnership with LEAs and the SEA Coordinator who serve and vote on official CoC boards & committees. School district staff serve

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on local committees, providing insight & connection to youth resources outside the homeless service system.

3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services. (limit 2,000 characters)

The CoC's policy to inform individuals and families of their eligibility for education services are the written standards that require all CoC- and ESG-funded rapid rehousing and permanent supportive housing programs to identify a person on their staff responsible for connecting any family with school-age children to education services. The CoC does not have formal guidance to inform individuals and families who become homeless of their eligibility for education services. Regional Committees have formal and informal relationships with McKinney-Vento LEAs, local shelters, rapid rehousing and permanent supportive housing programs, and the coordinated entry system that include procedures to link families and youth to education services. Through its partnership with the SEA, the CoC plans to set CoC-wide policies and procedures to inform families of their eligibility for education services this year.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	Yes
Head Start	No	Yes
Early Head Start	No	Yes
Child Care and Development Fund	No	Yes
Federal Home Visiting Program	No	Yes
Healthy Start	No	Yes
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	Yes
Other: (limit 50 characters)		·
McKinney-Vento State Education agency	No	Yes

3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD). (limit 2,000 characters)

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1) The CoC is implementing its plan to end Veteran homeless. Each Regional Committee (RC) has policies and procedures to identify, assess, & refer homeless Veterans to appropriate housing & services, including VA services. SSVF & VAMC staff conduct street & site-based outreach & partner with other organizations, including VSOs, to identify homeless Veterans. When shelters & other non-VA-funded access points encounter Veterans, they contact a regionally-identified SSVF provider for immediate engagement. All RCs are using by-name lists that identify and track housing plans for all Veterans & hold regular meetings to coordinate & refer Veterans from these lists. 2) The regionally-identified SSVF provider ensures that assessment of all Veterans using the CoC-approved assessment tool, the VI-SPDAT, happens as soon as possible. When Veterans stay at local shelters that conduct assessments, shelter staff will complete the assessment and immediately provide the information to the SSVF program so the Veteran can be placed on the by-name list. 3) SSVF programs work closely with VAMCs, GPD programs, emergency shelters, & CoC/ESG-funded programs to facilitate referrals to HUD-VASH, SSVF, and GPD as appropriate. SSVF & VAMC staff also attend regular CE case conferencing to make sure Veterans have access to mainstream homeless resources when they are ineligible for or do not want to participate in VA-funded resources. The CoC also has a Veterans Subcommittee that includes VA staff and state government staff to make sure all Veteran resources are aligned & Veterans have easy access to state & federal resources. The Veterans Subcommittee regularly reviews data from HMIS to ensure all Veterans experiencing homelessness have quick access to housing & changes policies, builds partnerships, or makes other changes as needed to better identify, assess, & refer Veterans to housing & services.

3B-3.2. Does the CoC use an active list or by Yes name list to identify all Veterans experiencing homelessness in the CoC?

3B-3.3. Is the CoC actively working with the Yes VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness?

3B-3.4. Does the CoC have sufficient No resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?

3B-5. Racial Disparity. Applicants must: Yes
(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary.

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3B-5a. Applicants must select from the options below the results of the CoC's assessment.

People of different races or ethnicities are more or less likely to receive homeless assistance.	Х
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	
There are no racial disparities in the provision or outcome of homeless assistance.	
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	

3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.

3 3	
The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	
The CoC is training staff working in the homeless services sector to better understand racism and the intersection 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.	X
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit 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.	X
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	X
Other:	

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4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:
- (1) assists persons experiencing homelessness with enrolling in health insurance; and
- (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits. Applicants must:

- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits:
- (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)
- 1) CoC staff acts as the state lead for the SOAR program and addresses issues people experiencing homelessness accessing Social Security Administration programs have. The CoC emphasizes using SOAR to apply for SSA benefits to increase non-employment income for disabled persons. SOAR caseworkers create relationships with local SSA staff as well as Disability Determination Services staff to provide information & answer questions. This direct link with dedicated staff increases the chances of positive outcomes. The CoC also maintains partnerships with health care navigators, Managed Care Organizations (MCOs), free clinics, legal aid, & Departments of Social Services (DSSs). CoC providers assist clients with applying for benefits, such as Medicaid, Medicare, Veteran benefits, TANF, & SNAP & have formal & informal

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Applicant: North Carolina Balance of State CoC **Project:** NC-503 CoC Registration FY2018

relationships to increase access. Providers in the CoC have outreach workers from local DSSs who come to local shelters/outreach centers to enroll/certify people for benefits. MCOs actively participate in the CoC, helping providers connect clients to behavioral health services, ensuring contracted providers assist enrolled clients to access mainstream benefits that will in turn help them access PH. 2) CoC staff relay mainstream benefit updates and information using a CoC-wide email distribution list. Staff also make announcements at committee meetings and hold webinars, when appropriate, to share best practices. Regional Committee (RC) leadership share mainstream benefit information with local stakeholders at meetings, invite others to share updates and opportunities. Mainstream partners attend RC meetings, educate providers on how to connect clients to benefits & share updates that will affect ongoing benefits.3) A Project Specialist at NCCEH works closely with state/federal partners to keep abreast of mainstream benefit changes & connects regularly with CoC stakeholders to update them about resources. The Program Director at NCCEH is SOAR state lead.

4A-2. Housing First: Applicants must report:

(1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	36
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	36
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

4A-3. Street Outreach. Applicants must:

- (1) describe the CoC's outreach:
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;
- (3) describe how often the CoC conducts street outreach; and (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)
- 1) The CoC provides varying levels of SO to various communities within the 79-county geographic area. The largest outreach effort is the annual PIT count, where providers and volunteers search rural, suburban, & urban areas to find unsheltered individuals and connect them to services. SSVF providers provide outreach in 70 of the 79 counties in the CoC. SSVF provides weekly outreach to unsheltered Vets. In agreement with the CoC's plan to end Veteran homelessness, when these programs encounter non-Vets in their outreach

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efforts, they connect these individuals to the coordinated entry process. The CoC has one PATH program providing outreach to persons with behavioral health issues & two ESG-funded outreach programs, working with any unsheltered person encountered through engagement efforts. The CoC started an SSO-CE grant on 09/01/18 & applied for an expansion grant in the FY18 competition to cover the rest of the CoC's geographic area to expand street outreach activities to connect unsheltered individuals to local CE access points. 2) Currently, the CoC has regular street outreach efforts in 70 of 79 counties. The CoC provides street outreach to all 79 counties during the annual PIT Count. 3) SSVF programs provide weekly outreach in 70 of 79 counties to homeless Vets & connect other non-Vets encountered to local providers. Other non-Vet dedicated outreach programs provide outreach weekly, monthly, or as needed. 4) CoC partners work with providers as well as other community organizations, such as DSS, soup kitchens, libraries, & law enforcement, to ensure that everyone has access to homeless services regardless of their ability to access shelter. To improve outreach coverage, the CoC established ESG funding priorities to fund street outreach in areas without emergency shelters. The CoC will also use its new SSO-CE grant to conduct street outreach & provide access to households who otherwise have difficulty accessing the local CE system.

4A-4. Affirmative Outreach. Applicants must describe:

- (1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and
- (2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)
- 1) The CoC approved an Anti-Discrimination Policy in 2018 to ensure fair housing in all marketing of housing and support services to eligible persons, regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability. The CoC presented a training, via webinar, on the policy and discussed in detail the various issues of equal access and discriminatory practices. The CoC offered the webinar to all agencies and recorded the training and posted it on the NCCEH website for continued use by agencies for new staff. All CoC- and ESG-funded agencies are required to put the policy in their program policies and procedures. The CoC advertises its CE system widely, through community meetings, regular trainings, partnerships with social services agencies, street outreach, site-based outreach, and distribution of written materials to public agencies such as libraries, health departments, and DSS. The CoC has grievance processes that allow people to lodge complaints if they have been discriminated against. The CoC's Anti-Discrimination policy offers clients the option to file a complaint with CoC staff, if they have been involuntarily separated from their family. The CoC also has a formal CE grievance process, allowing participants to file a discrimination complaint, if they feel they have been discriminated against in the CE process. 2) Local CE access points use paid interpreters and translation services as well as partnerships with interpretation staff at DSS, health care agencies, DV service providers, and other community agencies to ensure effective communication with those with Limited English Proficiency (LEP). The

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CoC works with state government and local health care and disability service agencies to provide communication assistance to people with disabilities, including large print forms, sign language interpretation, listening devices, and TTY.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	467	772	305

4A-6. Rehabilitation or New Construction No Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?

4A-7. Homeless under Other Federal Statutes. No Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes?

4B. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site: https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource

Document Type	Required?	Document Description	Date Attached
1C-5. PHA Administration Plan–Homeless Preference	No	NC 503 PHA Homele	09/07/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	NC 503 CE Assessm	09/05/2018
1E-1. Objective Critiera–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	NC-503 Objective	09/05/2018
1E-3. Public Posting CoC- Approved Consolidated Application	Yes	NC 503-Public Pos	10/01/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	NC 503-Public Pos	09/11/2018
1E-4. CoC's Reallocation Process	Yes	NC 503-Reallocati	09/12/2018
1E-5. Notifications Outside e- snaps–Projects Accepted	Yes	NC 503- Projects	09/05/2018
1E-5. Notifications Outside e- snaps–Projects Rejected or Reduced	Yes	NC 503- Projects	09/05/2018
1E-5. Public Posting–Local Competition Deadline	Yes	NC 503- Competiti	09/06/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	HIMS Governance C	09/05/2018
2A-2. HMIS-Policies and Procedures Manual	Yes	HMIS Policies and	09/05/2018
3A-6. HDX–2018 Competition Report	Yes	2018 HDX Competit	09/04/2018
3B-2. Order of Priority–Written Standards	No	NC-503 PSH Writte	09/05/2018

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3B-5. Racial Disparities Summary	No	Racial Disparitie	09/08/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description: NC 503 PHA Homeless Preference

Documentation

Attachment Details

Document Description:

Attachment Details

Document Description: NC 503 CE Assessment Tools

Attachment Details

Document Description: NC-503 Objective Criteria

Attachment Details

Document Description: NC 503-Public Posting CoC Approved

Consolidated Application

Attachment Details

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Document Description: NC 503-Public Posting-Local Competition

Attachment Details

Document Description: NC 503-Reallocation Process

Attachment Details

Document Description: NC 503- Projects Accepted

Attachment Details

Document Description: NC 503- Projects Rejected or Reduced

Attachment Details

Document Description: NC 503- Competition Deadline Posted

Attachment Details

Document Description: HIMS Governance Charter

Attachment Details

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Document Description: HMIS Policies and Procedures

Attachment Details

Document Description: 2018 HDX Competition Report

Attachment Details

Document Description: NC-503 PSH Written Standards w. Order of

Priority

Attachment Details

Document Description: Racial Disparities Assessment NC 503

Attachment Details

Document Description:

Attachment Details

Document Description:

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Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/21/2018
1B. Engagement	09/21/2018
1C. Coordination	10/01/2018
1D. Discharge Planning	09/21/2018
1E. Project Review	10/01/2018
2A. HMIS Implementation	10/01/2018
2B. PIT Count	10/01/2018
2C. Sheltered Data - Methods	10/01/2018
3A. System Performance	10/01/2018
3B. Performance and Strategic Planning	10/01/2018
4A. Mainstream Benefits and Additional Policies	10/01/2018
4B. Attachments	10/01/2018

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FY2018 CoC Application

Submission Summary

No Input Required

Western Piedmont Council of Governments Admin Plan Preferences Section

Hendersonville Housing Authority

10.0 TENANT SELECTION AND ASSIGNMENT PLAN

10.1 PREFERENCES

The Hendersonville Housing Authority will select families based on the following preferences within each bedroom size category based on our local housing needs and priorities:

- A. Elderly/disabled families who either live or work or have been hired to work in Henderson County. The residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.
- B. Applicants with an adult member who is working.
- C. Elderly/Disabled Families who do not live or work in Henderson County.
- D. All other applicants.

"Work or Working: Where the head, spouse or sole member is employed by a third party for at least the minimum wage."

Based on the above preferences, all families in preference A will be offered housing before any families in preference B, preference B families will be offered housing before any families in preference C, and preference C families will be offered housing before any families in preference D.

The residency preference will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family.

The date and time of application will be noted and utilized to determine the sequence within the above prescribed preferences.

Not withstanding the above, families who are elderly or disabled will be offered housing before other single persons.

Homeless Priority: Within each of the three preference categories listed above, preference is given to Applicant families, otherwise eligible, who meet the definition of homeless. "Homeless" is defined as any individual or family who:

- Lacks a fixed, regular and adequate nighttime residence, AND
- Is living in a homeless shelter (or temporary housing provided by an agency serving the homeless) at the time of application as well as at the time of selection.

The applicant must be living at a homeless shelter (or other temporary housing shelter provided by an agency serving the homeless) that is controlled in whole by an agency that has a current Memorandum of Understanding on file with the Hendersonville Housing Authority. An applicant family must also be referred by such agency. Referrals in this regard must be accompanied by an official certification by the referring agency as the homeless status of the applicant.

The Homeless Priority cannot be claimed by:

- An individual or family who is residing with relatives or other individuals; or
- An individual or family who has created a homeless situation for the sole purpose of obtaining the priority. Creating a homeless situation includes, but is not limited to:
 - o Purposely setting fire to existing shelter
 - o Being evicted from a rental unit for violation of the lease
 - o Voluntarily moving from an otherwise suitable unit.

An applicant family, who qualifies for the Homeless Priority will receive only one offer for a public housing unit. If this offer is refused, the homeless priority is void, and the applicant will be ranked in the preference category for which they qualify.

Buildings Designed for the Elderly and Disabled (Mixed Population Developments): Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families. If there are no near-elderly families on the waiting list, units will be offered to families who qualify for the appropriate bedroom size using these priorities. All such families will be selected from the waiting list using the preferences as outlined above.

Accessible Units: Accessible units will be first offered to families who may benefit from the accessible features who reside in the development that has the vacancy. If there are no families residing in that development needing the accessible unit, it shall then be offered to families residing in other developments that may benefit from the accessible unit. If there are no families residing in the other developments needing the accessible unit, it shall then be offered to applicants on the waiting list who may benefit from the accessible features. Applicants for these units will be selected utilizing the same preference system as outlined above.

If there are no applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their names come to the top of the waiting list. Such applicants, however, will be requested to sign a lease rider stating they will accept a transfer (at the Housing Authority's expense) if, at a future time, a family requiring an accessible feature applies or a family requires a transfer from a non-accessible unit. Any family required to transfer will be given a 30-day notice.

10.2 ASSIGNMENT OF BEDROOM SIZES

The following guidelines will determine each family's unit size without overcrowding or over-housing:

Number of Bedrooms	Number of Persons	
	Minimum	Maximum
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8
5	5	10

These standards are based on the assumption that each bedroom will accommodate no more than two (2) persons. Zero bedroom units will only be assigned to one-person families. Two adults will share a bedroom unless related by blood.

In determining bedroom size, the Hendersonville Housing Authority will include the presence of children to be born to a pregnant woman, children who are in the process of being adopted, children whose custody is being obtained, children currently under a 50% or more joint custody decree, children who are temporarily away at school, or children who are temporarily in foster care. Parents/Guardians must show proof of physical custody order of a child in order to request a bedroom for the child.

In such cases where the addition of a new member who has not been born, married, or legally adopted into the family, and the addition will affect the bedroom size required by the family, according to the Hendersonville Housing Authority occupancy standards, the Housing Authority will not approve the addition.

The Hendersonville Housing Authority will not approve adding a family consisting of more than one member to the lease. Such applicants will be encouraged to apply to the waiting list.

In addition, the following considerations may be taken in determining bedroom size:

- A. Children of the same sex **will** share a bedroom.
- B. Children of the opposite sex, both under the age of **six** (6), will share a bedroom. Children over the age of six (6) may share a bedroom with the written consent of the parent(s).
- C. Adults and children will not be required to share a bedroom.
- D. Foster adults and/or foster children will not be required to share a bedroom with family members.

E. Live-in aides will get a separate bedroom.

Exceptions to normal bedroom size standards include the following:

- A. Units smaller than assigned through the above guidelines. A family may request a smaller unit size than the guidelines allow. The Hendersonville Housing Authority will allow the smaller size unit so long as generally no more than two (2) people per bedroom are assigned. In such situations, the family will sign a certification stating they understand they will be ineligible for a larger size unit for 3 years or until the family size changes, whichever may occur first.
- B. Units larger than assigned through the above guidelines. A family may request a larger unit size than the guidelines allow. The Hendersonville Housing Authority will allow the larger size unit if the family provides a verified medical or disability related need that the family be housed in a larger unit.
- C. If there are no families on the waiting list for a larger size, smaller families may be housed if they sign a release form stating they will transfer (at the family's own expense) to the appropriate size unit when an eligible family needing the larger unit applies. The family transferring will be given a 30 calendar day notice before being required to move.
- D. Larger units may be offered in order to improve the marketing of a development suffering a high vacancy rate.
- **E.** In no event will a single person who is not an elderly person or a person with disabilities be provided with a unit that is larger than one-bedroom.

10.3 SELECTION FROM THE WAITING LIST

The Hendersonville Housing Authority shall follow the statutory requirement that at least 40% of newly-admitted families in any fiscal year are families whose annual income is the higher of either 30% of the area median income or the Federal poverty level (defined at http://www.huduser.org/portal/datasets/il/ill4/index.html as extremely low-income). To ensure this requirement is met, the Housing Authority shall monitor the incomes of both newly-admitted families and families on the waiting list on a quarterly basis. If it appears that the requirement to house extremely low-income families will not be met, the Housing Authority will skip higher-income families on the waiting list to reach extremely low-income families.

10.4 DECONCENTRATION POLICY

It is the Hendersonville Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, we will skip families on the waiting list to reach other families with a

lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

The Hendersonville Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement.

10.5 DECONCENTRATION INCENTIVES

The Hendersonville Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.

Various incentives may be used at different times, or under different conditions, but will always be provided in a consistent and nondiscriminatory manner.

10.6 OFFER OF A UNIT

When the Hendersonville Housing Authority discovers that a unit will become available, we will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or the income targeting goal via phone, electronic and/or first class mail.

The family will be given three (3) calendar days to accept an offer. If an applicant does not respond within the three calendar days to the request, it shall be deemed a refusal.

The family will be offered the opportunity to view the unit. The family will have one (1) business day to accept or reject the unit. This verbal offer and the family's decision must be documented in the tenant file. If the family rejects the offer of the unit, the Hendersonville Housing Authority will send the family a letter documenting the offer and the rejection.

10.7 REJECTION OF UNIT

If in making the offer to the family the Hendersonville Housing Authority skipped over other families on the waiting list in order to meet their deconcentration goal or offered the family any other deconcentration incentive and the family rejects the unit, the family will not lose their place on the waiting list and will not be otherwise penalized.

If the Hendersonville Housing Authority did not skip over other families on the waiting list to reach this family, did not offer any other deconcentration incentive, and the family rejects the unit **without good cause**, the family will forfeit their application's date and time. The family will keep their preferences, but the date and time of application will be changed to the date and time the unit was rejected.

If the family rejects **with good cause** any unit offered, they will not lose their place on the waiting list. Good cause includes, among other things, reasons related to health, proximity to work, school, and childcare (for those working or going to school). The family will be offered the right to an informal review of the decision to alter their application status.

If the family rejects two (2) offers, regardless of cause, and not including offers to meet a Deconcentration goal, the family will be removed from the waiting list.

10.8 ACCEPTANCE OF UNIT

The family will be required to sign a lease that will become effective no later than three (3) business days after the date of acceptance or the business day after the day the unit becomes available, whichever is later.

Prior to signing the lease, all families (head of household) and other adult family members will be required to attend the Move-In Orientation. The family will not be housed if they have not attended the orientation. Applicants who provide prior notice of an inability to attend the orientation will be rescheduled. Failure of an applicant to attend the orientation, without good cause, may result in the cancellation of the occupancy process. The orientation shall include the resident's rights and responsibilities under the Violence Against Women Act.

The applicant will be provided a copy of the lease, utility allowances, Move-in inspection report. These documents will be explained in detail. The applicant will sign a certification that they have received these documents and that they have reviewed them with Housing Authority personnel. The certification will be filed in the tenant's file. The Grievance Procedure, Schedule of Routine Maintenance Charges, and Reasonable Accommodation forms shall be explained. Copies are available upon request.

The signing of the lease and the review of financial information are to be privately handled. The head of household will be required to execute the lease prior to admission. One executed copy of the lease will be furnished to the head of household and the Hendersonville Housing Authority will retain the original executed lease in the tenant's file. A copy of the grievance procedure will be attached to the resident's copy of the lease.

The family will pay a security deposit at the time of lease signing. The security deposit will be \$240.00 for 0 and 1 Bedroom Apartments; and, \$400 for 2, 3, 4, and 5 Bedroom Apartments.

In exceptional situations, the Hendersonville Housing Authority reserves the right to allow a new resident to pay their security deposit in up to six (6) payments. This shall be at the sole discretion of the Housing Authority

In the case of a move within public housing, the security deposit for the first unit will be transferred to the second unit. In the case of a resident moving from a 0 or 1 bedroom unit to a 2, 3, 4, or 5-bedroom unit, the Resident must pay the additional security deposit in order to comply with the deposit requirements for the larger size unit.

In the event there are costs attributable to the family for bringing the first unit into condition for re-renting, the family shall be billed for these charges.

Eligible Immigrants

Documents Required

All family members claiming eligible immigration status must declare their status in the same manner as U.S. citizens and nationals.

The documentation required for eligible noncitizens varies depending upon factors such as the date the person entered the U.S., the conditions under which eligible immigration status has been granted, age, and the date on which the family began receiving HUD-funded assistance. Exhibit 7-1 at the end of this chapter summarizes documents family members must provide.

PHA Verification [HCV GB, pp. 5-3 and 5-7]

For family members age 62 or older who claim to be eligible immigrants, proof of age is required in the manner described in 7-II.C. of this plan. No further verification of eligible immigration status is required.

For family members under the age of 62 who claim to be eligible immigrants, the PHA must verify immigration status with the United States Citizenship and Immigration Services (USCIS).

The PHA will follow all USCIS protocols for verification of eligible immigration status.

7-II.H. VERIFICATION OF PREFERENCE STATUS

The PHA must verify any preferences claimed by an applicant that determined placement on the waiting list.

WPCOG Policy

The PHA will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding. The PHA will verify this preference using the PHA's termination records.

The PHA will offer a residency preference (applicants who reside, work, or who have been hired to work within WPCOG's jurisdiction). The PHA will verify residency preference by requiring the applicant to provide an original document that reflects the applicant's

- 1. Home address. Acceptable documents include: Driver's License or state issued identification card, lease, utility bill, benefits award letter, or bank statement.
- 2. Work address. Acceptable documents include: pay stubs, letter of hire or employer letter stating the work address, or most recent W-2 form.
- 3. Offer of employment letter showing the work address as inside the PHA's jurisdiction.

The PHA will offer a preference to a family that includes a family member who is a person with disabilities. The PHA will verify disability as stated in *Section 7-II.F. Documentation of Disability*.

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. The PHA will verify veteran status with military documentation. An example of acceptable documentation would be a DD214.

The PHA will offer a preference to families or individuals who are literally homeless as defined by HUD, consistent with the North Carolina Coalition to End Homelessness and on consultation with local partner agencies.

To qualify for the preference, the applicant must be receiving regular case management support from a local homeless service agency. 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 applicant must agree to, and sign a contract with the RHA to continue case management services for at least six months after moving into a voucher assisted unit or risk termination of assistance.

The status of homelessness is verified by the agency providing the case management. Eligibility for the Housing Choice Voucher program is determined by the RHA in accordance with HUD regulations and PHA policy. The RHA will limit the number of participants that qualify for this preference to 20 annually.

Wilson Housing Authority HCV Admin Plan and Public Housing ACOP Preference Section

PART III: TENANT SELECTION 4-III.A. OVERVIEW

The WHA must establish tenant selection policies for families being admitted to public housing [24 CFR 960.201(a)]. The WHA must not require any specific income or racial quotas for any developments [24 CFR 903.2(d)]. The WHA must not assign persons to a particular section of a community or to a development or building based on race, color, religion, sex, disability, familial status or national origin for purposes of segregating populations [24 CFR 1.4(b)(1)(iii) and 24 CFR 903.2(d)(1)].

The order in which families will be selected from the waiting list depends on the selection method chosen by the WHA and is impacted in part by any selection preferences that the family qualifies for. The availability of units also may affect the order in which families are selected from the waiting list. The WHA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the WHA's selection policies [24 CFR 960.206(e)(2)]. The PHA's policies must be posted any place where the WHA receives applications. The WHA must provide a copy of its tenant selection policies upon request to any applicant or tenant. The WHA may charge the family for providing a copy of its tenant selection policies [24 CFR 960.202(c)(2)]. When an applicant or resident family requests a copy of the WHA's tenant selection policies, the WHA will provide copies to them free of charge.

4-III.B. SELECTION METHOD

The WHA must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the WHA will use.

Local Preferences [24 CFR 960.206]

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

The WHA will use the following local preferences: First Priority:

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

Second Priority:

- Veterans An applicant who has actively served in the US military and has been discharged or released under conditions other than dishonorable will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons.
- Homeless Families with Case Management Support An applicant who meets one of the following criteria and who will be receiving regular on-site case management support from a local homeless services, social services or mental health agency for at least one year after moving into a voucher-assisted unit will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons. The agency providing the case management services will be required to verify the homeless status of the individual or family and its commitment to continue providing those case management

services for at least one year following move in prior to the WHA accepting the application under this preference.

- o Individuals and families who for the last 90 days or more have been living in a place no meant for human habitation, in an emergency shelter, in transitional housing, or is exiting an institution where they temporarily resided (up to 90 days) if they were in a shelter or place not meant for human habitation before entering the institution.
- Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under the definition above.
- Homeless Victims of Domestic Violence: Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member will be placed at the top of the WHA's waiting list behind only Involuntarily Displaced Persons if that individual or family is residing in a domestic violence shelter or transitional housing program as a result of that domestic violence. The domestic violence shelter or transitional housing program will be asked to verify the status of the individual or family prior to the WHA accepting the application under this preference.

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

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

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

Third Priority:

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

Posted for Public Comment: 4/18/2016

Brevard Housing Authority Admissions and Continued Occupancy Policy

Amendment to Local Preferences

4-III.B. 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.

Local Preferences [24 CFR 960.206]

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 [24 CFR 960.206(a)].

PHA Policy

The PHA will use the following local preferences:

- 1. Working, Elderly or Disabled: To assist with the de-concentration of poverty in public housing generally, the PHA provides a preference for working families (families where the head, spouse, co-head, or sole member is employed at least 20 hours per week). As required by HUD, families will be given the benefit of this preference if the head, spouse, co-head or sole member is a person age 62 or older, or is a person with disabilities [24 CFR 960.206(b)(2)]. This preference will be verified by documentation from the current employer, a birth certificate, or the Social Security Administration.
- 2. Homeless with Supportive Services: Based on needs identified in the consolidated plan and on consultation with partner agencies, the PHA provides a preference for families and individuals that are homeless as defined by HUD and will be receiving regular onsite case management from a local homeless services, domestic violence, social services, or mental health agency for at least six months after moving in. This preference will be verified by the agency providing case management.
- 3. *Veterans:* Based on their service to the nation, the PHA provides a preference to low income families and individuals that include a veteran, and to disabled veterans and the surviving families of a deceased veteran if the veteran's disability or death has been determined by the U.S. Department of Veterans Affairs (VA) to be service connected. This preference will be verified by documentation from the VA.

This amendment supersedes all prior preference policies and lists effective June 1, 2016. All other provisions of Section 4-III.B of the ACOP, including the income targeting requirement for extremely low income families, remain in full force and effect.

Chapter 3

APPLYING FOR ADMISSION

INTRODUCTION

The policy of MERHA is to ensure that all families who express an interest in housing assistance are given an equal opportunity to apply, and are treated in a fair and consistent manner. This Chapter describes the policies and procedures for completing an initial application for assistance, placement and denial of placement on the waiting list, and limitations on who may apply. The primary purpose of the intake function is to gather information about the family, but MERHA will also utilize this process to provide information to the family so that an accurate and timely decision of eligibility can be made. Applicants will be placed on the waiting list in accordance with this Policy.

A. HOW TO APPLY

Families who wish to apply for any of MERHA's programs must complete a written application form when application-taking is open. Applications will be made available in an accessible format upon request from a person with a disability. Persons with disabilities who require a reasonable accommodation in completing an application may call the MERHA to make special arrangements. A Telecommunication Device for the Deaf (TDD) is available for the hearing impaired. The TDD telephone number is 711.

Applications are taken at the central Office for all Waiting Lists. Applications for site-based Waiting Lists may be made at the Site or at the central Office, located at 809 Pennsylvania Ave, Washington, NC 27889.

The application process will involve two phases.

- 1. The first is the initial application for admission, referred to as the preliminary application. The preliminary application is dated and time stamped and is keyed to the computerized Waiting List management system to secure a place on the Waiting List in accordance with the date and time order, and preference if claimed.
- 2. The second phase is the final determination of eligibility referred to as the "full application." The full application takes place when the family approaches the top of the Waiting List and is notified for an interview. At this time, MERHA ensures that verification of all HUD, State, local, and MERHA eligibility factors as pursuant to the program are current in order to determine the family's eligibility for an offer of a suitable unit.

B. APPLICATION PROCEDURES

MERHA will utilize a preliminary application form for the initial application. The application may be taken over the phone during time of "Phone-In Application Intake" or in person by completion of the form itself, whenever the Waiting List is open.

Applications may be mailed to Out of State applicants or for purposes of reasonable accommodations.

Translation of the pre-application is available for non-English speaking applicants.

At a minimum, the preliminary application will contain questions designed to obtain the following information:

- Names of head of household, spouse/co-head
- Names of all members and age of all members
- Number of family members (used to estimate bedroom size needed)
- Street address and phone numbers
- Mailing address (If PO Box or other permanent address)
- Annual income
- Source(s) of income received by household members
- Information regarding request for reasonable accommodation or for accessible unit
- Social Security Numbers
- Birth Certificates or Other Supporting Materials
- Picture ID- if applicable
- Race/ethnicity
- Arrests/Convictions for Drug Related or Violent Criminal Activity
- Lifetime Sex Offender Status
- If any family member has received an Earned Income Disallowance
- Questions regarding previous participation in HUD programs

Duplicate applications, including applications from a segment of an applicant household, will not be accepted.

Preliminary applications will not require interviews. Information on the application will not be verified until the applicant has been selected for final eligibility determination. Final eligibility will be determined when the full application process is completed and all information is verified.

Applicants are required to inform MERHA in writing of changes in family composition, income, and address. Applicants are also required to respond to requests from MERHA to update information on their application, or to determine their continued interest in assistance.

Corrections, updates, or changes on applications will be documented. Obsolete information on paper forms of applications shall be lined through and documented as to its obsolescence, initialized and dated by the employee making such changes, or by the applicant, if such change is made by the applicant him/herself.

Failure to provide information or to respond to mailings will result in the applicant being removed from the waiting list.

When the applicant nears the top of the waiting list, MERHA will then utilize a full application form.

Applications will require an interview and information on the application will be verified prior to admission. Final eligibility will be determined when the full application process is completed and all information is verified.

Applicants are required to inform MERHA in writing of changes in family composition, income, and address. Applicants are also required to respond to requests from MERHA to update information on their application, or to determine their continued interest in assistance.

Corrections, updates, or changes on applications will be documented. Obsolete information on paper forms of applications shall be lined through and documented as to its obsolescence, initialized and dated by the employee making such changes, or by the applicant, if such change is made by the applicant him/herself.

Failure to provide information or to respond to mailings will result in the applicant being removed from the waiting list.

C. PREFERENCE DEFINED

Emergency Preference

The MERHA shall grant preferences to families of federally declared disasters who are public housing residents from another jurisdiction and other eligible disaster-affected families who are income eligible. These persons will receive preferences over other waiting list placeholders. This preference will remain in place until the emergency no longer exists.

Victims of Domestic Violence

For the purpose of priority for admission, a person or persons that due to no fault of their own is the recipient of a felony or misdemeanor crimes of violence by a current or former spouse, or an individual that is engaged in acts that violate VAWA or the domestic or violence laws of the jurisdiction, whichever is the higher standard.

Accessible Units

Qualified families will be offered an accessible unit, upon request by the family, when an accessible unit is available. Due to the limited number of accessible units, MERHA will offer vacant accessible units with features for person with disabilities as follows:

• First, to a current occupant of another unit of the same development who requires the accessible features of the vacant, accessible unit and is occupying a unit not having

the features;

- If there is no current resident in the same development that requires the accessible features of the vacant unit, then it will be offered to a resident with disabilities residing in another development under MERHA's control, who has a disability that requires the special features of the vacant accessible unit;
- If there is no current resident who requires the accessible features of the vacant, accessible unit, then the vacant accessible unit will be offered to an eligible qualified applicant with disabilities on the waiting list who can benefit from the accessible features of the available, vacant, accessible unit;
- If there is not an eligible qualified resident or applicant with disabilities, needing the features of the vacant available unit on the waiting list who wishes to reside in the available accessible unit, then it will be offered to an applicant on the waiting list who does not need the accessible features of the unit. See 24 CFR 8.27. However, the MERHA will require the applicant to execute the MERHA public housing lease that requires to the resident to relocate to a vacant non-accessible unit within thirty (30) days of notice by the MERHA that there is an eligible applicant or existing resident with disabilities who requires the accessible features of the unit.

Elderly/Disabled Preference

An elderly/disabled single family will have a preference over a non-elderly/non-disabled single family for 0 or 1-BR units

Homeless Preference

Clarified Homeless and Substandard Definition

<u>Homeless:</u> An applicant will be considered homeless if the household meets the criteria listed below:

An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:

- a. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodations for human beings, including a car, park, abandoned building, bus or train station, bridge, airport, or camping ground; or
- b. An individual or family living in a supervised publicly or privately operated shelter designed to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
- c. An individual who is exiting an institution where he or she resided for 90 days

or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering the institution;

An individual or family who:

- a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous of life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and
- b. Has no other residence; and
- c. Lacks the resources or support networks, e.g. family, friends, and faith-based or other social networks, to obtain other permanent housing.

Substandard: An applicant will be considered living in substandard housing if the household meets the criteria listed below:

Resides with friends or relatives on a temporary basis, or

Will lose their primary nighttime residence within 60 days of verification of preference, or

Contains a Head or Co-Head, ages 18 to 25 years, who is aging out of the Foster Care system.

D. COMPLETION OF A FULL APPLICATION

All preferences claimed on the preliminary application or while the family is on the waiting list will be verified after the family is selected from the waiting list.

The qualification for preference must exist at the time the preference is verified and at the time of admission regardless of the length of time an applicant has been on the waiting list because the preference is based on current status.

Applicants on the Waiting List who will be selected in the next 120 days will be sent a letter to complete a full application. The letter will notify the applicant of an application interview and request the applicant to bring all documents which verify all factors to be verified. Factors to be verified will be listed in the letter. Documents presented at the time of full application are not in lieu of third party verification.

Applicants are required at the full application interview to:

- Complete a Full Application Form prior to the full application interview.
- Sign Release of Information Forms including authorization form for criminal background checks of all adult household members, and consent for verification of Immigration status.

Participate in a full application interview with a MERHA representative during which the
applicant will be required to furnish complete and accurate information as requested by
the interviewer. The applicant will sign and certify that all information is complete and
accurate.

Accessible Units (PIH 2010-26)

Qualified families will be offered an accessible unit, upon request by the family, when an accessible unit is available. Due to the limited number of accessible units, MERHA will offer vacant accessible units with features for person with disabilities as follows:

- First, to a current occupant of another unit of the same development who requires the accessible features of the vacant, accessible unit and is occupying a unit not having the features;
- If there is no current resident in the same development that requires the accessible features of the vacant unit, then it will be offered to a resident with disabilities residing in another development under MERHA's control, who has a disability that requires the special features of the vacant accessible unit;
- If there is no current resident who requires the accessible features of the vacant, accessible unit, then the vacant accessible unit will be offered to an eligible qualified applicant with disabilities on the waiting list who can benefit from the accessible features of the available, vacant, accessible unit;
- If there is not an eligible qualified resident or applicant with disabilities, needing the features of the vacant available unit on the waiting list who wishes to reside in the available accessible unit, then it will be offered to an applicant on the waiting list who does not need the accessible features of the unit. See 24 CFR 8.27. However, the MERHA will require the applicant to execute the MERHA public housing lease that requires to the resident to relocate to a vacant non-accessible unit within thirty (30) days of notice by the MERHA that there is an eligible applicant or existing resident with disabilities who requires the accessible features of the unit. MERHA will pay for the cost of transfer in this case.

Requirement to Attend Interview

MERHA utilizes the full application interview to discuss the family's circumstances in greater detail, to clarify information that has been provided by the family, and to ensure that the information is complete. The interview is also used as a vehicle to meet the informational needs of the family by providing information about the application and verification process, as well as to advise the family of other MERHA services or programs that may be available.

The head, spouse, co-head and all adult family members are required to attend the interview and sign the housing application. Exceptions may be made for adult students attending school out of state or for members for whom attendance would be a hardship.

It is the applicant's responsibility to reschedule the interview if s/he misses the appointment. If the applicant does not reschedule or misses two scheduled meeting(s), MERHA will reject the applicant unless the missed appointment is due to extreme emergency, such as hospitalization, death in immediate family, etc.

Reasonable accommodation will be made for persons with a disability who requires an advocate or accessible offices. A designee will be allowed to provide some information, but only with permission of the person with a disability.

If an application is denied due to failure to attend the full application interview, the applicant will be notified in writing and offered an opportunity to request an informal review. (See Chapter on Complaints, Grievances and Appeals.)

All adult members must sign form HUD-9886, "Release of Information"; the declarations and consents related to citizenship/immigration status; and any other documents required by MERHA. Applicants will be required to sign specific verification forms for information that are not covered by the HUD-9886. Failure to do so will be cause for denial of the application for failure to provide necessary certifications and release as required by MERHA.

Information provided by the applicant will be verified, including information related to family composition, income, allowances and deductions, assets, eligible immigration status, full time student status and other factors related to preferences, eligibility and rent calculation.

If MERHA determines at or after the interview that additional information or document(s) are needed, MERHA will request the document(s) or information in writing. The family will be given **five (5)** working days to supply the information; however extensions may be given for extenuating circumstances such as information that must be obtained from out of state.

If the information is not supplied in this time period, MERHA will provide the family a notification of denial for assistance. (See Chapter on Complaints, Grievances and Appeals.)

E. PROCESSING APPLICATIONS

As families approach the top of the Waiting List, the following items will be verified to determine qualification for admission:

- Preference verification
- Family composition and type (elderly/non elderly), inclusive of family status, familial/marital status when needed for Head or spouse definition, or for inclusion in the household of a minor who is not yet born to or adopted by the assisted family, or legal guardianship, or right to custody, including temporary right to custody.
- Annual Income* inclusive of tips and meals, including income that is expressly excluded by regulation where the MERHA is required verify.
- Assets and Asset Income*
- Deductions from Annual Income including but not limited to full-time student

status, including students who are 18 or over, childcare expenses for children under 13 where such expenses allow an adult family member to be employed or to further his/her education or seek employment, total medical expenses of all family members in households whose Head or spouse is elderly or disabled, disability assistance expenses to include only those costs associated with attendant care or auxiliary apparatus which allow an adult family member to be employed, disability for determination of allowance or deductions.

- Social Security Numbers (SSN) of all eligible family members when they have a SSN Certification. Members that do not declare eligibility will be required to execute a document that member does not have Social Security Number.
- Non-economic selection criteria used in applicant screening, inclusive of criminal history report, past landlord reports, credit reports, rent payment history.
- Citizenship or eligible immigration status, including date and place of birth.
- Criminal background on all members over 18 years of age.

*If needed, in the event that the family appears to be eligible for income that is not reported to be received (i.e. TANF, unemployment compensation, child support, etc.), the absence of such income will be verified. Family members will not be required to contact the local SSA office for verification that they do not receive SS benefits. EIV will be further reviewed.

Timeliness of Verifications

All verifications will be obtained prior to determination of eligibility to ensure that current and accurate data is being used in calculating rents and eligibility.

Certification by the appropriate staff member will be made when verification of all necessary items for each application is completed.

Verifications for the public housing program must be dated within 60 days from the date of the interview and not exceed 120 days in age, prior to admission to the unit. The family will be questioned prior to admission in regard to any change in status. If changes are reported, they will be verified to determine their effect on eligibility, preference rating (if any), rent, and unit size required.

The applicant file shall contain documentation of all verifications.

Systems of Verification

Upfront Income Verification (UIV): The verification of income at admission or before or during a family reexamination, through an independent source that systematically and uniformly maintains income information in computerized form for a large number of individuals. HUD's **Enterprise Income Verification System (EIV)** is considered to be this method.

To assure that the data upon which determinations of eligibility, preference status (if any), rent to be paid, and size of dwelling unit required are based on full, true, and complete information to

the best of staff's ability, the data on each applicant shall be verified and consist of the following types and systems of verification:

MERHA will consult the EIV system on all applicants. The EIV will be used to determine if the applicant is in the HUD system, determine if they are being assisted by other programs in the HUD data-base, and determine if they were previously being assisted by another PHA.

MERHA shall use the streamlined verification system allowed by HUD whenever possible. The simplifying the income verification process is as follows:

- Tenant reports income and provides current documents
- MERHA consults EIV system, and prints income details report (include in tenant file- except PHAs in Florida, who should print and maintain EIV ICN printout in the tenant file
- If additional information is not needed, the MERHA uses the current tenant-provided documents to calculate anticipated annual income
- 3rd party verification is only required if:
 - o The tenant disputes the EIV data
 - o Additional information is required as determined by the MERHA, such as
 - Effective dates of employment
 - Pay rate, number of hours worked, pay frequency for new jobs
 - Confirmation of changes in circumstances (reduced hours, reduces rates of pay, etc.)
 - The MERHA will use current tenant-provided documents or most current information to calculate anticipated annual income

If third party verification is not received directly from the source, MERHA staff will document the file as to why third party verification was impossible to obtain and another method was used (such as reviewing documents families provide.)

The MERHA will not delay the processing of an application beyond 10 working days because a third party information provider does not return the verification in a timely manner.

For applicants, verifications used to determine adjusted income may not be more than 60 **days** old at the time of the original lease. For residents, they are valid for **120 days** from date of receipt. All tenant supplied documents supplied should be dated within the last 60 days of the interview or reexamination. Any pay stubs should be the 2 most current and consecutive.

Regardless of these timeframes, Criminal History Reports will be useable as a valid verification for no longer than twelve (12) months.

F. FINAL DETERMINATION AND NOTIFICATION OF ELIGIBILITY

After the verification process is completed, MERHA will make a final determination of

eligibility. This decision is based upon information provided by the family, the verification completed by MERHA, and the tenant suitability determination (see Chapter on Eligibility for Admission).

Because HUD can make changes in rules or regulations and family circumstances may have changed during the review process that affect an applicant's eligibility, it is necessary to make final eligibility determination.

The household is not actually eligible for a unit offer until this final determination has been made, even though they may have been listed on the waiting list.

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer		
Survey Date	Survey Time	Survey Location		
DD/MM/YYYY//				

Opening Script

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

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

Basic Information

First Name	Nickna	me	Last Name					
In what language do you feel best able to express yourself?								
Date of Birth	Age	Social Security Number	Consent to	participate				
DD/MM/YYYY/			☐ Yes	□No				
IF THE DEDGON IS SO VEADS OF A	CE OD 0	LDED THEN COORE 4			SCORE:			
IF THE PERSON IS 60 YEARS OF A	IGE OR O	LDER. THEN SCORE 1.						

A. History of Housing and Homelessness				
	□ Safe □ Out	nsitio e Have t door s		
	□ Ref	used		
IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRAN OR "SAFE HAVEN", THEN SCORE 1.	NSITIC	ONAL I	HOUSING",	SCORE:
2. How long has it been since you lived in permanent stable housing?			□ Refused	
3. In the last three years, how many times have you been homeless?			□ Refused	
IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.	OF HO	OMELI	ESSNESS,	SCORE:
B. Risks				
4. In the past six months, how many times have you				
a) Received health care at an emergency department/room?			☐ Refused	
b) Taken an ambulance to the hospital?			☐ Refused	
c) Been hospitalized as an inpatient?			☐ Refused	
d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?			□ Refused	
e) Talked to police because you witnessed a crime, were the victi of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?			□ Refused	
f) Stayed one or more nights in a holding cell, jail or prison, whe that was a short-term stay like the drunk tank, a longer stay for more serious offence, or anything in between?			□ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN EMERGENCY SERVICE USE.	I SCOF	RE 1 F	OR	SCORE:
5. Have you been attacked or beaten up since you've become homeless?	□ Y	□N	□ Refused	
6. Have you threatened to or tried to harm yourself or anyone else in the last year?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.				SCORE:

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?	□Y	□N	□ Refused	
IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.				SCORE:
8. Does anybody force or trick you to do things that you do not want to do?	□ Y	□N	□ Refused	
9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLO	OITATIO	ON.		SCORE:
C. Socialization & Daily Functioning				
10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?	□ Y	□N	□ Refused	
11 Day on the same and the same		_ A.	□ Dofused	
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	ЦY		□ Refused	
an inheritance, working under the table, a regular job, or				SCORE:
an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1	FOR N	MONEY		SCORE:
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12.Do you have planned activities, other than just surviving, that 	FOR N	MONEY		SCORE:
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12.Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? 	FOR N	MONEY □ N		
 an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. 13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean 	FOR N	MONEY □ N	□ Refused	
an inheritance, working under the table, a regular job, or anything like that? IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 MANAGEMENT. 12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. 13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?	FOR A	MONEY □ N	□ Refused	SCORE:

D	W	ام	IIn	ACC
	vv	CI		

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?	□ Y	□N	□ Refused	
16.Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	□ Y	□N	□ Refused	
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?	□ Y	□N	□ Refused	
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	□ Y	□N	□ Refused	
19.When you are sick or not feeling well, do you avoid getting help?	□ Y	□N	□ Refused	
20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant?	□ Y	□N	□ N/A or Refused	
				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEA	LTH.			
21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?	□ Y	□N	☐ Refused	
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	E.			SCORE:
23. Have you ever had trouble maintaining your housing, or been k apartment, shelter program or other place you were staying, be			an	
a) A mental health issue or concern?	\square Y	\square N	☐ Refused	
b) A past head injury?	\square Y	\square N	☐ Refused	
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ Refused	
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?	□ Y	□N	□ Refused	
IF WAREST TO ANNA OF THE ABOVE THEN SCORE 4 FOR MENTAL MANAGEMENT				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALT	H.			
IF THE DECOMENT SCORED 1 FOR DUVELCAL HEALTH AND 1 FOR CL	IDCTA	NCE LE	T AND 4	SCORE:
IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SU	ЉΣΙΑ	NCE US	E AND I	—SCORE:

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?	□ Y	□N	□ Refused	
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?	□ Y	□N	□ Refused	
IF "VES" TO ANY OF THE ABOVE SCORE 4 FOR MEDICATIONS				SCORE:
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS .				
27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?	□ Y	□N	□ Refused	
IF "VES" SCORE 1 FOR ARISE AND TRAILIAG				SCORE:
IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.				

Scoring Summary

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

Follow-Up Questions

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

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

- military service and nature of legal status in country discharge
- ageing out of care
- mobility issues

- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

Administration

Interviewer's Name	Agency	□ Team □ Staff □ Volunteer		
Survey Date	Survey Time	Survey Location		
DD/MM/YYYY//	:			

Opening Script

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

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

Basic Information

	First Name	Nicknan	ne	Last Name			
PARENT 1	In what language do you feel best able to express yourself?						
PAF	Date of Birth	Age	Social Security Number	Consent to pa	rticipate		
-	DD/MM/YYYY/			□Yes	□No		
	□ No second parent currently par	t of the h	nousehold				
T 2	First Name	Nicknan	ne	Last Name			
PARENT	In what language do you feel best	able to	express yourself?				
	Date of Birth	Age	Social Security Number	Consent to pa	rticipate		
	DD/MM/YYYY/			□Yes	□No		
15.5	SCORE:						
TIFE	ITHER HEAD OF HOUSEHOLD IS 60	YEARS U	FAGE OR OLDER, THEN SO	LURE I.			

Cł	nildren					
1.	How many children under the ag	e of 18 are currently with you?			☐ Refused	
2.	. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed?				□ Refused	
3.	, , ,				☐ Refused	
4.	Please provide a list of children's					
	First Name	Last Name	Age		Date of Birth	
AN IF AN	THERE IS A SINGLE PARENT WITH ND/OR A CURRENT PREGNANCY, T THERE ARE TWO PARENTS WITH 3 ND/OR A CURRENT PREGNANCY, T	HEN SCORE 1 FOR FAMILY SIZE . + CHILDREN, AND/OR A CHILD HEN SCORE 1 FOR FAMILY SIZE .				SCORE:
4.	History of Housing a	na nometessness				
5.	Where do you and your family sle one)	eep most frequently? (check	☐ Shel ☐ Tran ☐ Safe ☐ Outo ☐ Othe	sitio Have doors	5	
			□ Refu	sed		
	THE PERSON ANSWERS ANYTHING R "SAFE HAVEN", THEN SCORE 1.	G OTHER THAN "SHELTER", "TRA	NSITIOI	NAL I	HOUSING",	SCORE:
6.	How long has it been since you a permanent stable housing?	nd your family lived in			□ Refused	
7.	In the last three years, how many family been homeless?	times have you and your			□ Refused	
	THE FAMILY HAS EXPERIENCED 1 (OF HOM	IELES	SSNESS,	SCORE:

B. Risks

o. In the past six months, now many times have you or anyone in your la	шиу		
a) Received health care at an emergency department/room?		☐ Refused	
b) Taken an ambulance to the hospital?		☐ Refused	
c) Been hospitalized as an inpatient?		☐ Refused	
d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?		☐ Refused	
e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along?		□ Refused	
f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?	_	□ Refused	
IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCO	RE 1 FC	OR ,	SCORE:
EMERGENCY SERVICE USE.			
9. Have you or anyone in your family been attacked or beaten up □ Y since they've become homeless?	□N	☐ Refused	
10. Have you or anyone in your family threatened to or tried to ☐ Y harm themself or anyone else in the last year?	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.			SCORE:
11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live?	□N	□ Refused	
IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.			SCORE:
12.Does anybody force or trick you or anyone in your family to do □ Y things that you do not want to do?	□N	□ Refused	
13.Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that?	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATIO	N.		SCORE:

C. Socialization & Daily Functioning				
14.Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money?	□ Y	□N	□ Refused	
15.Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?	ПΥ		□ Refused	
IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 MANAGEMENT.	FOR N	MONEY	•	SCORE:
16.Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?	ПΥ		□ Refused	
IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.				SCORE:
17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?	ПΥ		□ Refused	
IF "NO," THEN SCORE 1 FOR SELF-CARE.				SCORE:
18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted?	□ Y	□N	□ Refused	
IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.				SCORE:
D. Wellness				
19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family?	□ Y	□N	□ Refused	
20.Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart?	□ Y	□N	☐ Refused	
21.If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family?	□ Y	□N	□ Refused	
22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?	□ Y	□N	□ Refused	
23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEA	LTH.			SCORE:

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past?	□ Y	□N	□ Refused	
25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing?	□ Y	□N	☐ Refused	
				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE US	et.			
26. Has your family ever had trouble maintaining your housing, or apartment, shelter program or other place you were staying, be			out of an	
a) A mental health issue or concern?	\square Y	\square N	□ Refused	
b) A past head injury?	\square Y	\square N	□ Refused	
c) A learning disability, developmental disability, or other impairment?	□ Y	□N	☐ Refused	
27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed?	□ Y	□N	□ Refused	
				SCORE:
IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALT	Н.			
28.IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance us		□N	□ N/A or Refused	
TE WARRY COORS A SOR THE MORNING				SCORE:
IF "YES", SCORE 1 FOR TRI-MORBIDITY .				
29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking?	□Y	□N	□ Refused	
30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.				SCORE:
IF TES TO ANT OF THE ABOVE, SCORE FFOR MEDICATIONS.				
31.YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced?	□ Y	□N	□ Refused	
IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.				SCORE:
TI TES, SCORE FRON ADOSE AND TRAUMA.				

E. Family Unit				
32. Are there any children that have been removed from the family by a child protection service within the last 180 days?	□ Y	□N	☐ Refused	
33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing?	□ Y	□N	□ Refused	
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUE S	S.			SCORE:
34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation?	□ Y	□N	☐ Refused	
35. Has any child in the family experienced abuse or trauma in the last 180 days?	□ Y	□N	☐ Refused	
36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week?	ПΥ		□ N/A or Refused	
IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 3	6, SCC	RE 1 F	OR NEEDS	SCORE:
OF CHILDREN.				
37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that?	□ Y	□N	□ Refused	
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?	□ Y	□N	☐ Refused	
IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.				SCORE:
39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that?	ΠY	□N	□ Refused	
40. After school, or on weekends or days when there isn't school, is spend each day where there is no interaction with you or anoth				
a) 3 or more hours per day for children aged 13 or older?	\square Y	\square N	□ Refused	
b) 2 or more hours per day for children aged 12 or younger?	\square Y	\square N	☐ Refused	
41.IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that?	□ Y	□N	□ N/A or Refused	
IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 4	1, SCO	RE 1 F	OR	SCORE:

PARENTAL ENGAGEMENT.

Scoring Summary

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

Follow-Up Questions

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

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

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

Attachment 1E-1 Objective Criteria-Rate, Rank, Review, and Selection Criteria

The CoC's project application review process includes the use of objective criteria and factors related to achieving positive housing outcomes. The questions relating to these two criteria are contained in the CoC's scorecards for new and renewal projects, which are attached. Page references for these criteria are listed below.

Objective criteria:

- Dedicated chronically homeless beds in PSH programs
 - o Renewal Scorecard: p. 9, question 3.2
 - o New Scorecard: p. 3, question 2.5
- Performance data from HMIS, including utilization, target populations served, positive exits, employment and income
 - o Renewal Scorecard: p. 10-11, questions 4.1-4.12
 - o New Scorecard: p. 13-14, questions 5.1-5.10
- Previous grant spending rates
 - o Renewal Scorecard: p. 10, question 4.18
 - o New Scorecard: p. 14, questions 5.12-5.13

Factors related to achieving positive housing outcomes:

- Questions regarding the percentage of exits to positive housing destinations from RRH and PSH programs
 - o Renewal Scorecard: p.10, questions 4.7 and 4.8
 - New Scorecard: p. 13: questions 5.3 and 5.4



North Carolina Balance of State Continuum of Care

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2018 Scorecard for CoC Funds: New Projects

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

This scorecard has four goals:

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

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

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

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

PROJECT QUALITY REQUIREMENTS		
New projects must receive at least the standard and minimum score in each section.	Maximum	PSH: 86
Standards and funding priorities will be used in the ranking process. If a standard or	Score	RRH: 85
minimum is not met, further review will be triggered. After further review, the Project	Possible:	SSO: 34
Review Committee will determine potential consequences, including whether the		
project is ineligible for inclusion in final NC BoS CoC application or will receive	Project	
reduced funding. Thresholds are a requirement for new projects. Projects that do not	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section	I: General Application	Section	I Score
Possible Poir			
	oints Required or Review is Triggered: 8		
1.1	with Mission Does the project fit within the mission of the agency? Does the agency currently serve homeless households in their community? [New Project Form]	Stand met ur unmet, docur provided	
Accuracy an	d Appropriateness of Responses	Possible Score	Project Score
1.2	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.3	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? [New Project Form]	Standard met unmet unmet, documentation not provided	
1.4	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.5	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.5	Are questions regarding housing for participants completed and accurate? [Proj. App: 4B]	3	
1.6	Are all questions answered thoroughly and consistently?	3	



Section	II: Program Design	Section II Score
	nts: PSH: 30 RRH: 30 SSO: 0	
	ints Required or Review is Triggered:	
	H: 11 SSO: Standards Met	
-	Need Statement	
2.1	New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe:	Standard
	 What community need the new project will address, 	
	including local data (PIT Count, coordinated assessment	☐ met ☐ unmet
	data, waiting lists, etc.) that demonstrates the need	unmet, documentation not
	 How the community has used other resources to address 	provided
	this need	
	[New Project Form]	
Permanent	Housing Projects (PSH, RRH, and RRH-TH)	
2.2	What priority is this project in its region?	
	[Priority 1, 2, 3, or not prioritized, based on funding priorities document]	
	uocumentj	no priority
		_ ,
Targeting to	Prioritized Subpopulations	
2.3	The Department of Housing and Urban Development (HUD) and the	
	NC Balance of State CoC (NC BoS CoC) prioritize funding for certain homeless subpopulations, including chronically homeless individuals and families, homeless Veterans, people with disabilities, and youth. Projects requesting HUD funding must provide a narrative	Standard
		Standard
		☐ met ☐ unmet
		unmet, documentation not
	identifying the subpopulations for which the project will serve and	provided
	describe the ways in which the project will engage these	process
	subpopulations to ensure entry into permanent housing.	
2.4	[New Project Form] Does the project demonstrate that households will be quickly	Standard
	enrolled and helped to find safe and appropriate housing, ideally in	
	less than 30 days?	☐ met ☐ unmet
	[New Project Form]	unmet, documentation not
		provided
2.5	PSH projects: Is this a permanent supportive (PSH) project dedicated	Threshold
	to serving chronically homeless households per HUD Notice CPD-16-	
	11?	☐ met ☐ unmet ☐ N/A
	[Policies and procedures]	unmet, documentation not
		provided
2.6	Rental assistance projects are preferred to leasing projects as rental	Standard
	assistance projects adjust to FMR and provide tenants with	
	a lease in their name. Projects that wish to provide leasing must	☐ met ☐ unmet ☐ N/A
	submit a written statement that explains why the project is not	unmet, documentation not
	applying as a rental assistance project.	provided



2.7	RRH projects: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the 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. In 2018 exceptions may also be made for projects applying for the DV-RRH bonus funding).	Threshold met unmet N/A unmet, documentation not provided	
	ervices Only (SSO) Projects		
2.8	SSO projects : Is this a coordinated assessment project that will serve the NC BoS CoC's seventy-nine counties?	Thre	shold N/A
Housing Ove	er Services		
2.9	Total \$ request for housing activities (acquisition, rehab, construction, rental assistance, leased units, and/or leased structures): [Proj. App: 61] Total Assistance Requested (not including match or admin):		
	[Proj. App: 61, Line 6]		
2.11	Percentage of total budget devoted to housing activities (housing activities request ÷ total request x 100):	Possible Score	Project Score
	Less than 35%	0	
	Between 35% and 54.9%	5	
	Between 55% and 74.9%	10	
	Between 75% and 84.9%	20	
	Between 85% and 100%	30	
2.12	 PSH, RRH, and RRH-TH projects: While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	☐ met ☐ u	ndard nmet
Housing Firs			
2.13	Is this a Housing First project? Must meet all statements below to meet threshold. [Policies and procedures]	Threshold (must meet all statements below) of 2 met	
2.13a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state		nmet mentation not
	mandated restrictions)		



	☐ History of domestic violence (e.g. lack of protective order,	
	of separation from abuser, or law enforcement involvement)	
2.13b	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	unmet, documentation not
	☐ Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
PSH Projects	only: Key Elements of Permanent Supportive Housing	
2.14	Does this project include the following key elements of permanent	
2.17	supportive housing as defined by the Substance Abuse and Mental	Must meet all statements below
	Health Services Administration (SAMHSA) ¹ ? If the applicant does not	of 9 met
	demonstrate that the project will meet all standards, the application	
	should not be included in the CoC competition.	
2.14a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a	Standard
	disability. [Sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Deviewer Netes (if we rest or decorrection not may ideal note why).	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14c	House rules, if any, are similar to those found in housing for people	Standard
	who do not have disabilities and do not restrict visitors or otherwise	Standard
	interfere with a life in the community. [Program/house rules, policies	☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
	, , , , , , , , , , , , , , , , , , , ,	

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



2.14d	and owners' option. [Key Elements of PSH form, policies and	Standard			
	procedures, sample lease]	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.14e	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. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided			
2.14f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.14g	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.14h	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				



2.14i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
For RRH Pro	grams Only: Rapid Re-Housing Performance Benchmarks and Program	Standards		
2.15	Does this project include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? If applicant does not demonstrate that the project will meet all standards, the application should not be included in the CoC competition. [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met		
2.15a	Core Program Standard: Housing Identification	Must meet all statements below of 4 met		
2.15a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. [RRH Program Standards Form, policies and procedures Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
2.15a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			

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



2.15a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Program can negotiate additional supports, as needed, on a case-by-case basis. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.15a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.15b	Core Program Standard: Rent and Move-In Assistance	Must meet all statements below of 3 met			
2.15b1	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				
2.15b2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided			
	Reviewer Notes (if unmet or documentation not provided, note why):				

2.15b3	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c	Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
2.15c1	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



	Reviewer Notes (if unmet or documentation not provided, note why):			
2.15d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided		
2 4544	Reviewer Notes (if unmet or documentation not provided, note why):			
	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided		
2.15d3	Reviewer Notes (if unmet or documentation not provided, note why): Eligibility criteria for the program do not include a period of sobriety,			
2.15d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.15d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		
2.15d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.15c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		

Section	on III: Scope of Services	Section	III Score
Possible	•		
Service N	leeds .	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? [Proj. App: 4A Question 2]	4	
Employn	nent Services	Possible Score	Project Score
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? [Proj. App: 4A]	2	
Access to	Mainstream Benefits	Possible Score	Project Score
3.3	Does the project include services to help participants access mainstream benefits such as unemployment benefits, TANF, and food stamps/SNAP? [Proj. App: 4A]	1	
3.4	Does the project use SOAR caseworkers?	1	

Staff Scoring

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

Section	on IV: Organizational Capacity	Section	IV Score
Possible	Points: 16		
Minimur	m Points Required or Review is Triggered: 8		
Complet	ed Similar Projects	Possible Score	Project Score
4.1	Has the agency successfully implemented a CoC-funded project of		
	the same project type (PSH, RRH, or SSO)?		
	[Proj. App: 3B; New Project Form; interview with agency]		
	Has successfully implemented the same project type	8	
	Has not implemented the same project type	0	
4.2	If not, has the agency successfully implemented this same type of	4	
	project (permanent supportive housing, rapid rehousing,		
	coordinated assessment) using another funding source?		
	[Proj. App: 3B; New Project Form; interview with agency]		
4.3	If the answer to either of the questions is yes, are the same staff		
	that were operating the program at that time going to be operating	2	
	the proposed project?		
	[Proj. App: 3B; New Project Form; interview with agency]		
4.4	If none of the above, has the agency successfully implemented a		
	different HUD-funded project (ESG, Section 8, HPRP, etc.) or a CoC-		
	funded project of a different type?	2	
	[Proj. App: 3B; New Project Form; interview with agency]		
-	. 100		
Agency S	Stability		



4.5	Has the agency been in operation for at least three years? [Proj. App: 3B; New Project Form; interview with agency]		Thres	shold	
		☐ met	□ur	nmet	□ N/A
		unmet	docur	nentat	ion not
		provid	led		
4.6	Non-profits only: Did the applicant submit a signed audit letter and a copy of their budget from the most recent fiscal year? (Financial		Thres	shold	
	statements will be used to assess fiscal stability of the applicant	☐ met	☐ ur	nmet	□ N/A
	agency. Financial statements that demonstrate instability may result in the agency not meeting requirements.) [Audit letter and budget]	unmet provid		mentat	ion not
4.7	Non-profits only: Does the agency have the financial capacity to operate this project on a reimbursement basis?		Thres	shold	
	[Budget]	☐ met	☐ ur	nmet	□ N/A
		unmet	, docur	nentat	ion not
		provid	led		
4.8	Non-profits only: Has the agency submitted a list of their board of		- 1		
	directors and a copy of the minutes from their three most recent board meetings? Does the agency have an active and engaged		Thres	shold	
	board of directors?	☐ met	☐ ur	nmet	□ N/A
	[Board list and minutes]	unmet, documentation not provided		ion not	
	Provide Needed Services				
4.9	Does the agency have the capacity to provide the services that will be needed? a) Do the services described seem adequate and		Stan	dard	
	appropriate and b) is the staffing pattern or subcontract plan				
	adequate and appropriate? Do program staff have sufficient experience and knowledge to effectively run the type of program	∐ met	ur		□ N/A
	applied for?	unmet provid		nentat	ion not
	[Proj. App: 3B and 4A; organizational chart]				
Administrativ	ve Capacity	Possible :	Score	Proj	ect Score
4.10	Is the administrative staff separate from the services staff? [Organizational chart]	3			
4.11	Is funding for the administrative staff stable? Is there adequate administrative staff to ensure agency stability throughout program implementation? [Budget]	3			



Section V: Project Performance

Section V Score

Possible Points Added: PSH: 14 RRH: 13 SSO: 0

Minimum Points Required or Review is Triggered: PSH: 8 RRH: 7 SSO: 0

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2017, to December 31, 2017, unless otherwise noted. All applicants that currently run a RRH or PSH program, regardless of funding source, will be scored for this section using the CoC-APR report from HMIS.

Populati	ons Served	Possible Score	Project Scor
5.1	What is the program's unit utilization rate?		
	[compare actual units in HMIS vs. application projections]		
	95% or higher	2	
	0-94%	0	
5.2	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	,	1	
	Yes	1	
- 2	No	0	
5.3	RRH projects : what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	2	
5.4	PSH projects : what percentage of program participants exited to a permanent housing destination? (if no exits, 2 points are automatically awarded) [CoC-APR 23c]		
	Below 80%	0	
	80% or higher	2	
5.5	What percentage of program participants exited to a known destination?		
	95% or higher	1	
	0-94%	0	
5.6	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 28%	1	
5.7	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 75%	1	
5.8	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	0	
	Performance met BoS Goal: At least 94%	1	
12.410./0	mparable Database Participation	Possible Score	Project Score



5.9	Are all of the agency's projects that are listed in the 2018 HIC participating in HMIS? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] For Victim Service Providers only: Did the agency report all their beds for the 2018 HIC? [HIC]					
	Yes	5				
	No	0				
5.10	Does the agency commit to enter 100% of this project's beds into HMIS (with client consent)? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] [New Project Form; interview with agency] For Victim Service Providers only: Does the agency have a	☐ met ☐ unmet provid	Thresho unme , documer	t	on no	ot
	comparable database that collects Universal Data Elements and can run required reports?					
HUD Monito						
5.11	If the agency has other existing projects, 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.	☐ met	Standar		□N	Ι/Δ
	[New Project Form; Interview with agency]	Пінес				1,77
5.12	Previous Project Spending Rates These questions are for projects that least one year at the time of the NOFA release. (percentage rounded to [Scored on APR. If APR is not available, agencies will submit a LOCCS so completed year. If agencies are spending less than 90% of funding, the explaining why the agency is underspending their grant.] Amount awarded Amount spent	o the neare reenshot o	est whole f final dra	nui w f	mber or las	-
5.13	Percentage 90+%		Standar			
3.13	referringe 30170	☐ met ☐ unmet provid	☐ unme	t		N/A ot
5.14	How many grant extensions from HUD were given in for a reason other than merging grants? (Note: only applicable for current CoC grantees) [Interview with agency or information from HUD]	☐ met ☐ unmet provid	Standar unme , documer ed	t	□ N on no	



Section '	VI: Agency's Relationship to Community	Section	VI Score	
Possible Poin Minimum Po	ts: 3 ints Required or Review is Triggered: Standards Met			
The following	in Regional Committee Activities g participation questions will be scored based on project participation ll Committees within the grant coverage area.			
6.1	Did the applicant participate in 75% of Regional Committee meetings from July 2017 – June 2018? [Regional Committee Information Form]	Standard met unmet		
6.2	Application has been presented to Regional Committee for consideration by the BoS Project Review Committee [Letter of support from Regional Committee(s)]	Threshold met unmet unmet, documentation not provided		
6.3	Participated in regional ESG planning process (participated in scoringor other ESG subcommittees) [Regional Committee Information Form]	Possible Score	Project Score	
6.4	Applicant agrees to actively participate in the local Coordinated Assessment process as designed by the Regional Committee and only take referrals directly from the regional coordinated entry prioritization wait list. [New Project Form; interview with applicant]	Threshold met unmet unmet, documentation not provided		
6.5	Applicant accurately describes the process to take referrals through coordinated entry. [New Project Form]		ndard unmet	
6.6	Do all of applicant's projects on the 2018 HIC participate in the Coordinated Assessment system? Agency staff must attend any coordinated assessment meetings, including regular case conferencing, regularly. Emergency shelters must conduct prevention and diversion screens and VI-SPDATs on residents and refer all people who have received VI-SPDATs to the regional coordinated entry prioritization list.		dard unmet □N/A	
	RRH and PSH projects must only take referrals directly from the coordinated entry prioritization wait list. [Interview with region's Coordinated Assessment Lead and applicant]			



	VII: Application Deadlines and entation	Section VII Score		
Possible Ded				
Minimum Po	oints Required or Review is Triggered: Not more than loss of -15			
Budget & Ma	atch	Possible Score	Project Score	
7.1	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5		
7.2	Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.]	Standard ☐ met ☐ unmet		
Deadlines		Possible Score	Project Score	
7.3	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published.)	-10		
7.4	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10		
7.5	The online application and accompanying documents must be submitted by the deadline.	Thres	hold	
7.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Thres	shold	
		☐ met	unmet	





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2018 Scorecard for CoC Funds: Renewal Projects

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

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering

 Committee
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

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

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

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

PROJECT QUALITY REQUIREMENTS		
Renewal projects must receive at least the standard and minimum score in each	Maximum	2011 402
section. Standards and funding priorities will be used in the ranking process. If a	Score	PSH: 192 RRH: 172
standard or minimum is not met, further review will be triggered. After further	Possible:	KKH. 172
review, the Project Review Committee will determine potential consequences,		
including whether the project is ineligible for inclusion in final BoS CoC application	Project	
or will receive reduced funding. Thresholds must be met in order for the project	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section	ı I: General Application	Section	I Score
Possible Po	pints: 12		
Minimum I	Points Required or Review is Triggered: 6		
Accuracy a	nd Appropriateness of Responses	Possible Score	Project Score
1.1	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.2	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.3	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.4	Are all questions answered thoroughly and consistently?	3	
Section	ı II: Program Design	Section 1	II Score
Possible Po	oints: PSH: 10 RRH: 0		
Housing Fi	rst		
2.2	Is this a Housing First project? Must meet all statements below to meet standard [Proj. App: 3B, question 3d; policies and procedures]	Stand (must meet all sta o	
2.2a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state mandated restrictions) History of domestic violence (e.g. lack of protective order, of separation from abuser, or law enforcement involvement)	☐ met ☐ un ☐ unmet, docum provided	



2.2b	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	unmet, documentation not
	Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
Key Eleme	nts of Permanent Supportive Housing	
2.5	If this project is a permanent supportive housing project, does it include the following key elements of permanent supportive housing as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) ¹ ?	Must meet all statements below of 9 met
2.5a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a	
	disability. [Sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise	Standard
	interfere with a life in the community. [Program/house rules, policies	☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5d	Housing is not time-limited, and the lease is renewable at tenants'	Standard
	and owners' option. [Key Elements of PSH form, policies and	
	procedures, sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

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



2.5e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): As needs change over time, tenants can receive more intensive or less	Standard met unmet N/A unmet, documentation not provided Standard
	intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.5h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.5i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
Rapid Re-H	Housing Performance Benchmarks and Program Standards	
2.7	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met

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



Standard
met unmet N/A unmet, documentation not provided
Standard met unmet N/A unmet, documentation not provided
Standard met unmet N/A unmet, documentation not provided
Standard met unmet N/A unmet, documentation not provided
st meet all statements below of 3 met
Standard met unmet N/A unmet, documentation not provided



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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
Reviewer Notes (if unmet or documentation not provided, note why):	
Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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	Standard met unmet N/A unmet, documentation not provided
	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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): 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. [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): Core Program Standard: Rapid Re-Housing Case Management and Services 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 manage.) [RRH Program S



	scheduled meetings.) [RRH Program Standards Form, policies and procedures]	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.7c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.7c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.7d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met
2.7d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.7d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.7d3	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. [RRH Program Standards Form, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
	1 , 7	



2.7d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standomet un un un unmet, docun provided	met
	Reviewer Notes (if unifiet or documentation not provided, note why).		
Services Fu	ınding Plan		
2.8	 While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: All funding sources that the project is currently using to provide supportive services and if these resources will be expanded. Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	Stand met un unmet, docun provided	met 🗌 N/A
Permanen	t Supportive Housing: Move-on Program	Possible Score	Project Score
2.9	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. Move-on programs 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 project. ³ Does the permanent supportive housing project have a formal move-on program? To receive full points a move-on program should include the following: • Standardized criteria to identify people who may be ready to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority); • A method to prepare tenants to move-on; • A method to link move-on tenants to mainstream services and supports; and		



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

 A strategy to evaluate the effectiveness of the move-on program. ogram policies] 		
Yes	10	
No	0	

Staff Scoring

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

Section	n III: NC BoS CoC Priorities	Section 1	II Score
Possible Po	pints: 20		
Minimum	Points Required or Review is Triggered: 11		
	ver Services		
3.1a	Total \$ request for housing activities (leased units, leased structures,		
	and/or rental assistance):		
2.41	[Proj. App.: 61]		
3.1b	Total Assistance requested (not including match or admin):		
3.1c	[Proj. App.: 61, line 6] Percentage of total budget devoted to housing activities		
3.10	(housing activities request ÷ total assistance request x 100):		%
	(Housing activities request + total assistance request x 100).	Possible Score	Project Score
	Less than 35%	0	110,000
	Between 35% and 54.9%	5	
3.1d	Between 55% and 74.9%	10	
	Between 75% and 84.9%	15	
	Between 85% and 100%	20	
Permanen	t Supportive Housing: Prioritizing Beds for Chronically Homeless Particip	pants	
3.2	Does the project have 100% of their beds prioritized for chronically	Stand	dard
	homeless participants?	☐ met ☐ un	met 🗌 N/A
	[Proj. App: 4B, CH beds]	unmet, docun	nentation not
		provided	

Section	n IV: Project Performance	Section 1	V Score
Possible Po	pints Added: PSH: 150 RRH: 140		
Possible Po	pints Subtracted: PSH: -15 RRH: -15		
Minimum	Points Required or Review is Triggered: PSH: 48 RRH: 30		
	,		
	ing project performance scores are based on CoC Annual Performance Re	eports (CoC-APRs)	for January 1,
	ecember 31, 2017, unless otherwise noted.	Possible Score	Duelest Coors
Population	is serveu	Lozzinie 2cote	Project Score



4.1	PSH projects: What percentage of the households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 100%	0	
	100%	8	
4.2	RRH projects: What percentage of the households served by the		
4.2	projects. What percentage of the Households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 25%	0	
	25-49%	2	
	50-74%	4	
	75-99%	6	
	100%	8	
4.3	What percentage of the adults served by the project were veterans? [CoC-APR Q25a/b]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.4	What percentage of adults served by the project were chronically homeless? [CoC-APR Q26]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.5	What is the program's unit utilization rate? [compare actual units in HMIS vs. application projections]		
	0-79%	-5	
	80-94%	0	
	95% or higher	5	
4.6	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	Yes	0	
	No	-5	
4.7	RRH projects : what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	15	
4.8	PSH projects: what percentage of program participants exited to a permanent housing destination? (if no exits, 10 points are automatically awarded) [CoC-APR 23c]		
	automatically awarded [ede 7 ii 7 200]		
	Below 80%	0	



4.9	What percentage of program participants exited to a known		
	destination?	_	
	95% or higher	5	
	80-94%	0	
4.40	0-79%	-5	
4.10	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 28%	15	
4.11	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 75%	15	
4.12	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	5	
	Performance met BoS Goal: At least 94%	15	
-	cipation Il law domestic violence programs are prohibited from using HMIS and from this section)	Possible Score	Project Score
4.13	HMIS Data Completeness		
4.13	[0640 – HUD Data Quality Report Framework Report, Q2-Q5]		
	0-10%	15	
	Above 10%	0	
4.14	Are all of the agency's projects that are listed in the 2017 HIC participating in HMIS? [HIC]		
	Yes	5	
	No	0	
4.15	Did the program submit their APR on or before the designated deadline?		
	Yes	5	
	No	0	
4.16	Did program staff adhere to the APR review process with CoC staff?		
	Yes	5	
	No	0	
HUD Moni			
4.17	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. [Interview with agency]	Stan □ met	dard unmet
4.18	Previous Project Spending Rates These questions are for projects that hone year at the time of the NOFA release. (percentage rounded to the national system) [Scored on APR. If APR is not available, agencies will submit a LOCCS screece completed year. If agencies are spending less than 90% of funding, they explaining why the agency is underspending their grant.] Amount awarded	earest whole nu eenshot of final a	mber) Iraw for last
	Amount spent		



4.19	Percentage 90+%	Stand	dard
	(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.)	☐ met ☐ un☐ un☐ unmet, docun provided	
4.20	How many grant extensions from HUD were given in for a reason		
	other than merging grants? [Interview with agency or information from HUD]	Possible Score	Project Score
	0	15	
	1	0	
Coondinate	2+	further review	
	ed Assessment and Prioritization		
4.21	Does the program fill all open slots directly from the coordinated entry prioritization wait list? [Interviews with Regional Committee CA Lead and agency]	Stand ☐ met	dard □ unmet
4.22	Permanent Supportive Housing: Has the program adopted HUD's prioritization policy as outlined in HUD Notice CPD-16-011 and added it to their program policies? [Program policies]	Stand met ur	dard nmet
	v: Application Deadlines and lentation	Section	V Score
Possible De	eductions: -25		
Minimum I	Points Required or Review is Triggered: Not more than loss of -15		
Budget & I		Possible Score	
5.1	If questions regarding the budget are not complete and accurate,		Project Score
	subtract up to 5 points.	-5	Project Score
5.2		-5 Stand ☐ met	
5.2 Deadlines	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the	Stand	dard
	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the	Stand met	dard unmet
Deadlines	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.] If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA	Stand met Possible Score	dard unmet



5.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold met unmet

Attachment 1E-3 Public Posting-CoC Approved Consolidated Application

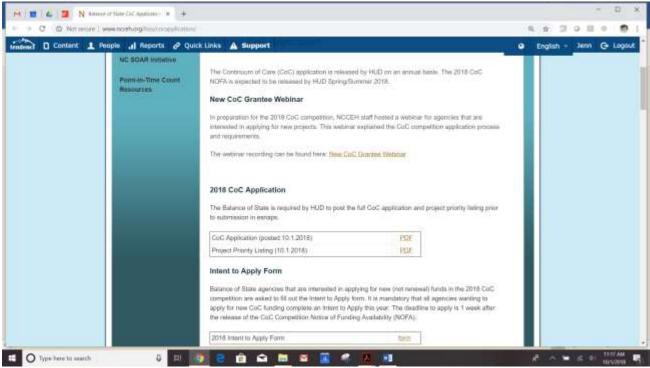


Figure 1 Posted Consolidated CoC application and Project Priority Listing. Posted on October 1, 2018

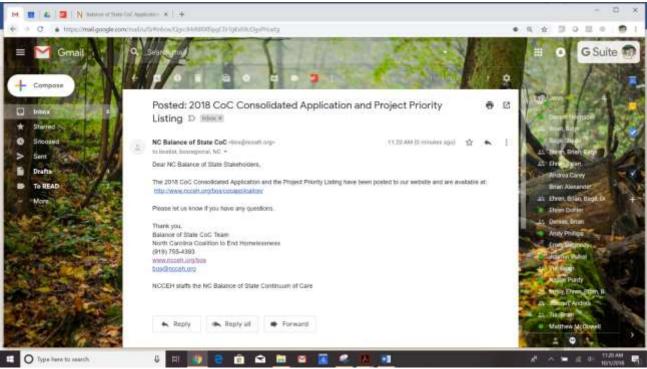


Figure 2Email notifying Listserve of posting for 2018 Consolidated CoC Application and Project Prioroity Listing. Posted October 1, 2018



bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

Attachment 1E-3

Public Posting-Local Competition Rate, Rank, Review, and Selection Criteria

This attachment includes the following:

- 1. Screenshot of scorecards posted on NC BoS CoC's website with date of posting; screenshot (same as previous screenshot) of posted Funding priorities document, used to establish CoC-wide and regional funding priorities for the 2018 CoC competition, on NC BoS CoC's website with date of posting
- 2. Screenshot of Appeal Process and minutes from Scorecard Committee (which creates scorecards) posted on NC BoS CoC's website with date of posting
- 3. Screenshot of minutes from Project Review Committee (which reviews and scores project applications) posted on NC BoS CoC's website with date of posting
- 4. Screenshot of Steering Committee/ CoC Board's minutes posted on Nc BoS CoC (8/30/18) approval of the 2018 CoC priority list
- 5. 2018 New Project Scorecard
- 6. 2018 Renewal Project Scorecard
- 7. 2018 NC BoS CoC Funding Priorities document
- 8. 2018 Appeal Process

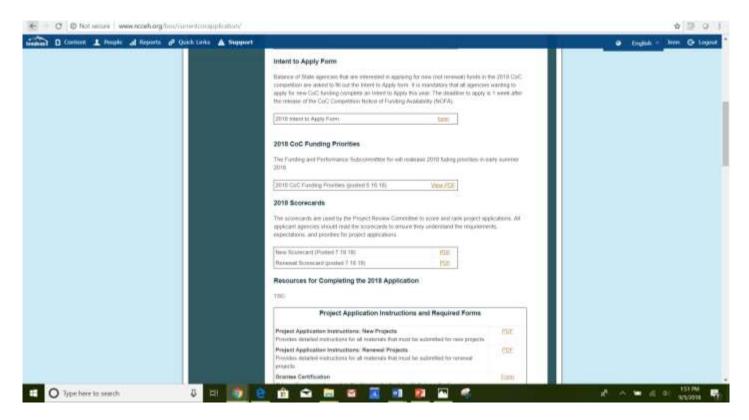


Figure 1 screenshot of 2018 CoC Funding Priorities, new scorecard, and renewal scorecard with date of posting.

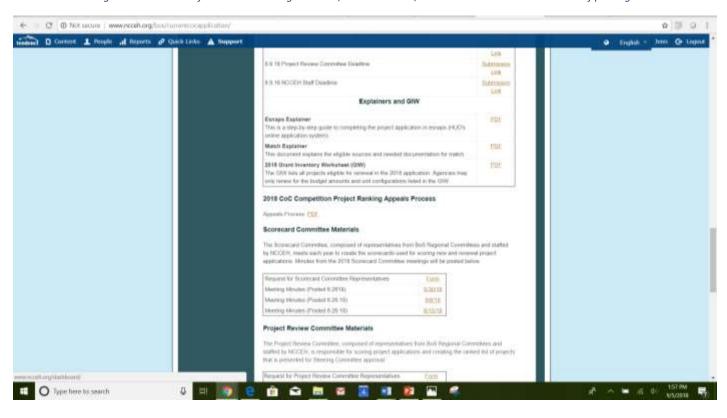


Figure 2 Screen shot of Appeal Process posted and Scorecard Committee minutes with posting date on the NC BoS CoC website.



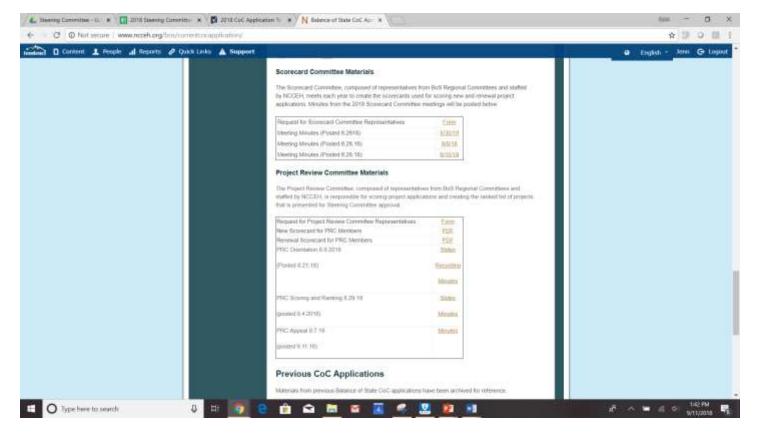


Figure 3 Posting of Project Review Committee Minutes on NC BoS CoC Website with date of posting.

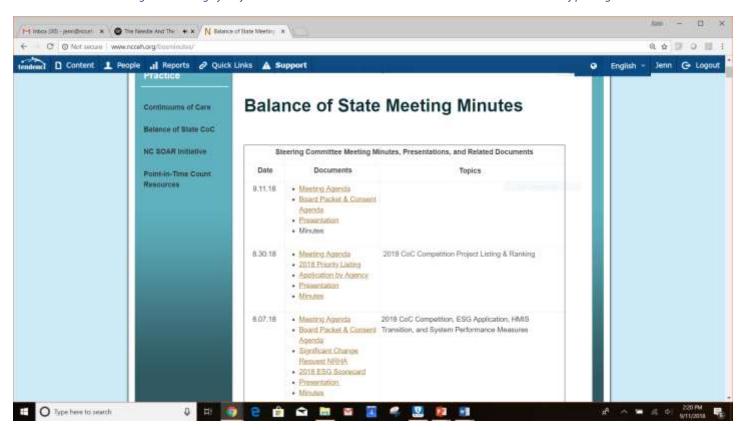


Figure 4 August 30, 2018 CoC Board Minutes posted on Nc BoS CoC Website





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2018 Scorecard for CoC Funds: New Projects

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

This scorecard has four goals:

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

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

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

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

PROJECT QUALITY REQUIREMENTS		
New projects must receive at least the standard and minimum score in each section.	Maximum	PSH: 86
Standards and funding priorities will be used in the ranking process. If a standard or	Score	RRH: 85
minimum is not met, further review will be triggered. After further review, the Project	Possible:	SSO: 34
Review Committee will determine potential consequences, including whether the		
project is ineligible for inclusion in final NC BoS CoC application or will receive	Project	
reduced funding. Thresholds are a requirement for new projects. Projects that do not	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section	I: General Application	Section	I Score
Possible Poir			
	oints Required or Review is Triggered: 8		
1.1	with Mission Does the project fit within the mission of the agency? Does the agency currently serve homeless households in their community? [New Project Form]	Stand met ur unmet, docur provided	
Accuracy an	d Appropriateness of Responses	Possible Score	Project Score
1.2	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.3	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? [New Project Form]	Stand Stand I wrote I wroted I	
1.4	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.5	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.5	Are questions regarding housing for participants completed and accurate? [Proj. App: 4B]	3	
1.6	Are all questions answered thoroughly and consistently?	3	



Section	II: Program Design	Section II Score
	nts: PSH: 30 RRH: 30 SSO: 0	
	ints Required or Review is Triggered:	
	H: 11 SSO: Standards Met	
-	Need Statement	
2.1	New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe:	Standard
	 What community need the new project will address, 	
	including local data (PIT Count, coordinated assessment	☐ met ☐ unmet
	data, waiting lists, etc.) that demonstrates the need	unmet, documentation not
	 How the community has used other resources to address 	provided
	this need	
	[New Project Form]	
Permanent	Housing Projects (PSH, RRH, and RRH-TH)	
2.2	What priority is this project in its region?	
	[Priority 1, 2, 3, or not prioritized, based on funding priorities document]	
	uocumentj	no priority
		_ ,
Targeting to	Prioritized Subpopulations	
2.3	The Department of Housing and Urban Development (HUD) and the	
	NC Balance of State CoC (NC BoS CoC) prioritize funding for certain	Standard
	homeless subpopulations, including chronically homeless individuals	Standard
	and families, homeless Veterans, people with disabilities, and youth.	☐ met ☐ unmet
	Projects requesting HUD funding must provide a narrative	unmet, documentation not
	identifying the subpopulations for which the project will serve and	provided
	describe the ways in which the project will engage these	process
	subpopulations to ensure entry into permanent housing.	
2.4	[New Project Form] Does the project demonstrate that households will be quickly	Standard
	enrolled and helped to find safe and appropriate housing, ideally in	
	less than 30 days?	☐ met ☐ unmet
	[New Project Form]	unmet, documentation not
		provided
2.5	PSH projects: Is this a permanent supportive (PSH) project dedicated	Threshold
	to serving chronically homeless households per HUD Notice CPD-16-	
	11?	☐ met ☐ unmet ☐ N/A
	[Policies and procedures]	unmet, documentation not
		provided
2.6	Rental assistance projects are preferred to leasing projects as rental	Standard
	assistance projects adjust to FMR and provide tenants with	
	a lease in their name. Projects that wish to provide leasing must	☐ met ☐ unmet ☐ N/A
	submit a written statement that explains why the project is not	unmet, documentation not
	applying as a rental assistance project.	provided



2.7	RRH projects: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the 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. In 2018 exceptions may also be made for projects applying for the DV-RRH bonus funding).	Threshold met unmet N/A unmet, documentation not provided	
	ervices Only (SSO) Projects		
2.8	SSO projects : Is this a coordinated assessment project that will serve the NC BoS CoC's seventy-nine counties?	Thre ☐ yes ☐ no	shold N/A
Housing Ove	er Services		
2.9	Total \$ request for housing activities (acquisition, rehab, construction, rental assistance, leased units, and/or leased structures): [Proj. App: 61] Total Assistance Requested (not including match or admin):		
	[Proj. App: 61, Line 6]		
2.11	Percentage of total budget devoted to housing activities (housing activities request ÷ total request x 100):	Possible Score	Project Score
	Less than 35%	0	
	Between 35% and 54.9%	5	
	Between 55% and 74.9%	10	
	Between 75% and 84.9%	20	
	Between 85% and 100%	30	
2.12	 PSH, RRH, and RRH-TH projects: While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	☐ met ☐ u	ndard nmet
Housing Firs			
2.13	Is this a Housing First project? Must meet all statements below to meet threshold. [Policies and procedures]	Threshold (must meet all statements below) of 2 met	
2.13a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state		nmet mentation not
	mandated restrictions)		



	☐ History of domestic violence (e.g. lack of protective order,	
	of separation from abuser, or law enforcement involvement)	
2.13b	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	unmet, documentation not
	☐ Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
PSH Projects	only: Key Elements of Permanent Supportive Housing	
2.14	Does this project include the following key elements of permanent	
2.17	supportive housing as defined by the Substance Abuse and Mental	Must meet all statements below
	Health Services Administration (SAMHSA) ¹ ? If the applicant does not	of 9 met
	demonstrate that the project will meet all standards, the application	
	should not be included in the CoC competition.	
2.14a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a	Standard
	disability. [Sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Deviewer Netes (if we rest or decorrection not may ideal note why).	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14c	House rules, if any, are similar to those found in housing for people	Standard
	who do not have disabilities and do not restrict visitors or otherwise	Standard
	interfere with a life in the community. [Program/house rules, policies	☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
	, , , , , , , , , , , , , , , , , , , ,	

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



2.14d	and owners' option. [Key Elements of PSH form, policies and	Standard
	procedures, sample lease]	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14e	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. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.14f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14g	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14h	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



2.14i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
For RRH Pro	grams Only: Rapid Re-Housing Performance Benchmarks and Program	Standards
2.15	Does this project include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? If applicant does not demonstrate that the project will meet all standards, the application should not be included in the CoC competition. [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met
2.15a	Core Program Standard: Housing Identification	Must meet all statements below of 4 met
2.15a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. [RRH Program Standards Form, policies and procedures Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.15a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

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



2.15a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Program can negotiate additional supports, as needed, on a case-by-case basis. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15b	Core Program Standard: Rent and Move-In Assistance	Must meet all statements below of 3 met
2.15b1	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15b2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

2.15b3	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c	Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
2.15c1	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
2 4544	Reviewer Notes (if unmet or documentation not provided, note why):	
	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
2.15d3	Reviewer Notes (if unmet or documentation not provided, note why): Eligibility criteria for the program do not include a period of sobriety,	
2.15d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
2.15d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided

Section	on III: Scope of Services	Section	III Score
Possible	•		
Service N	leeds .	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? [Proj. App: 4A Question 2]	4	
Employn	nent Services	Possible Score	Project Score
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? [Proj. App: 4A]	2	
Access to	Mainstream Benefits	Possible Score	Project Score
3.3	Does the project include services to help participants access mainstream benefits such as unemployment benefits, TANF, and food stamps/SNAP? [Proj. App: 4A]	1	
3.4	Does the project use SOAR caseworkers?	1	

Staff Scoring

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

Section	on IV: Organizational Capacity	Section IV Score	
Possible	Points: 16		
Minimur	m Points Required or Review is Triggered: 8		
Complet	ed Similar Projects	Possible Score	Project Score
4.1	Has the agency successfully implemented a CoC-funded project of		
	the same project type (PSH, RRH, or SSO)?		
	[Proj. App: 3B; New Project Form; interview with agency]		
	Has successfully implemented the same project type	8	
	Has not implemented the same project type	0	
4.2	If not, has the agency successfully implemented this same type of	4	
	project (permanent supportive housing, rapid rehousing,		
	coordinated assessment) using another funding source?	·	
	[Proj. App: 3B; New Project Form; interview with agency]		
4.3	If the answer to either of the questions is yes, are the same staff		
	that were operating the program at that time going to be operating	2	
	the proposed project?		
	[Proj. App: 3B; New Project Form; interview with agency]		
4.4	If none of the above, has the agency successfully implemented a		
	different HUD-funded project (ESG, Section 8, HPRP, etc.) or a CoC-		
	funded project of a different type?	2	
	[Proj. App: 3B; New Project Form; interview with agency]		
-	. 100		
Agency S	Stability		



4.5	Has the agency been in operation for at least three years? [Proj. App: 3B; New Project Form; interview with agency]		Thres	shold	
		☐ met	□ur	nmet	□ N/A
		unmet	docur	nentat	ion not
		provid	led		
4.6	Non-profits only: Did the applicant submit a signed audit letter and a copy of their budget from the most recent fiscal year? (Financial		Thres	shold	
	statements will be used to assess fiscal stability of the applicant	☐ met	☐ ur	nmet	□ N/A
	agency. Financial statements that demonstrate instability may result in the agency not meeting requirements.) [Audit letter and budget]	unmet provid		mentat	ion not
4.7	Non-profits only: Does the agency have the financial capacity to operate this project on a reimbursement basis?		Thres	shold	
	[Budget]	☐ met	☐ ur	nmet	□ N/A
		unmet	, docur	nentat	ion not
		provid	led		
4.8	Non-profits only: Has the agency submitted a list of their board of		- 1		
	directors and a copy of the minutes from their three most recent board meetings? Does the agency have an active and engaged		Thres	shold	
	board of directors?	☐ met	☐ ur	nmet	□ N/A
	[Board list and minutes]	unmet, documentation not provided			ion not
	Provide Needed Services				
4.9	Does the agency have the capacity to provide the services that will be needed? a) Do the services described seem adequate and		Stan	dard	
	appropriate and b) is the staffing pattern or subcontract plan				
	adequate and appropriate? Do program staff have sufficient experience and knowledge to effectively run the type of program	∐ met	ur		□ N/A
	applied for?	unmet unmet		nentat	ion not
	[Proj. App: 3B and 4A; organizational chart]				
Administrativ	ve Capacity	Possible :	Score	Proj	ect Score
4.10	Is the administrative staff separate from the services staff? [Organizational chart]	3			
4.11	Is funding for the administrative staff stable? Is there adequate administrative staff to ensure agency stability throughout program implementation? [Budget]	3			



Section V: Project Performance

Section V Score

Possible Points Added: PSH: 14 RRH: 13 SSO: 0

Minimum Points Required or Review is Triggered: PSH: 8 RRH: 7 SSO: 0

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2017, to December 31, 2017, unless otherwise noted. All applicants that currently run a RRH or PSH program, regardless of funding source, will be scored for this section using the CoC-APR report from HMIS.

Populati	ons Served	Possible Score	Project Scor
5.1	What is the program's unit utilization rate?		
	[compare actual units in HMIS vs. application projections]		
	95% or higher	2	
	0-94%	0	
5.2	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	,	1	
	Yes	1	
- 2	No	0	
5.3	RRH projects : what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	2	
5.4	PSH projects : what percentage of program participants exited to a permanent housing destination? (if no exits, 2 points are automatically awarded) [CoC-APR 23c]		
	Below 80%	0	
	80% or higher	2	
5.5	What percentage of program participants exited to a known destination?		
	95% or higher	1	
	0-94%	0	
5.6	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 28%	1	
5.7	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 75%	1	
5.8	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	0	
	Performance met BoS Goal: At least 94%	1	
12.410./0	mparable Database Participation	Possible Score	Project Score



5.9	Are all of the agency's projects that are listed in the 2018 HIC participating in HMIS? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] For Victim Service Providers only: Did the agency report all their beds for the 2018 HIC? [HIC]					
	Yes	5				
	No	0				
5.10	Does the agency commit to enter 100% of this project's beds into HMIS (with client consent)? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] [New Project Form; interview with agency] For Victim Service Providers only: Does the agency have a	☐ met ☐ unmet provid	Thresho unme , documer	t	on no	ot
	comparable database that collects Universal Data Elements and can run required reports?					
HUD Monito						
5.11	If the agency has other existing projects, 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.	☐ met	Standar		□N	Ι/Δ
	[New Project Form; Interview with agency]	Пінес				1,77
5.12	Previous Project Spending Rates These questions are for projects that least one year at the time of the NOFA release. (percentage rounded to [Scored on APR. If APR is not available, agencies will submit a LOCCS so completed year. If agencies are spending less than 90% of funding, the explaining why the agency is underspending their grant.] Amount awarded Amount spent	o the neare reenshot o	est whole f final dra	nui w f	mber or las	-
5.13	Percentage 90+%		Standar			
3.13	referringe 30170	☐ met ☐ unmet provid	☐ unme	t		N/A ot
5.14	How many grant extensions from HUD were given in for a reason other than merging grants? (Note: only applicable for current CoC grantees) [Interview with agency or information from HUD]	☐ met ☐ unmet provid	Standar unme , documer ed	t	□ N on no	



Section '	VI: Agency's Relationship to Community	Section	VI Score	
Possible Poin Minimum Po	ts: 3 ints Required or Review is Triggered: Standards Met			
The following	in Regional Committee Activities g participation questions will be scored based on project participation ll Committees within the grant coverage area.			
6.1	Did the applicant participate in 75% of Regional Committee meetings from July 2017 – June 2018? [Regional Committee Information Form]	Standard met unmet		
6.2	Application has been presented to Regional Committee for consideration by the BoS Project Review Committee [Letter of support from Regional Committee(s)]	Threshold met unmet unmet, documentation not provided		
6.3	Participated in regional ESG planning process (participated in scoringor other ESG subcommittees) [Regional Committee Information Form]	Possible Score	Project Score	
6.4	Applicant agrees to actively participate in the local Coordinated Assessment process as designed by the Regional Committee and only take referrals directly from the regional coordinated entry prioritization wait list. [New Project Form; interview with applicant]	Threshold met unmet unmet, documentation no provided		
6.5	Applicant accurately describes the process to take referrals through coordinated entry. [New Project Form]		ndard unmet	
6.6	Do all of applicant's projects on the 2018 HIC participate in the Coordinated Assessment system? Agency staff must attend any coordinated assessment meetings, including regular case conferencing, regularly. Emergency shelters must conduct prevention and diversion screens and VI-SPDATs on residents and refer all people who have received VI-SPDATs to the regional coordinated entry prioritization list.		dard unmet □N/A	
	RRH and PSH projects must only take referrals directly from the coordinated entry prioritization wait list. [Interview with region's Coordinated Assessment Lead and applicant]			



	VII: Application Deadlines and entation	Section V	/II Score
Possible Ded			
Minimum Po	oints Required or Review is Triggered: Not more than loss of -15		
Budget & Ma	atch	Possible Score	Project Score
7.1	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	
7.2	Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.]	Stan	dard □ unmet
Deadlines		Possible Score	Project Score
7.3	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published.)	-10	
7.4	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	
7.5	The online application and accompanying documents must be submitted by the deadline.	Thres	hold
7.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Thres	shold
		☐ met	unmet





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2018 Scorecard for CoC Funds: Renewal Projects

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

This scorecard has four goals:

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

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

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

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

PROJECT QUALITY REQUIREMENTS		
Renewal projects must receive at least the standard and minimum score in each	Maximum	2011 402
section. Standards and funding priorities will be used in the ranking process. If a	Score	PSH: 192 RRH: 172
standard or minimum is not met, further review will be triggered. After further	Possible:	KKH. 172
review, the Project Review Committee will determine potential consequences,		
including whether the project is ineligible for inclusion in final BoS CoC application	Project	
or will receive reduced funding. Thresholds must be met in order for the project	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section	I Score
Possible Po	pints: 12		
Minimum I	Points Required or Review is Triggered: 6		
Accuracy a	nd Appropriateness of Responses	Possible Score	Project Score
1.1	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.2	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.3	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.4	Are all questions answered thoroughly and consistently?	3	
Section II: Program Design		Section 1	II Score
Possible Po	oints: PSH: 10 RRH: 0		
Housing Fi	rst		
2.2	Is this a Housing First project? Must meet all statements below to meet standard [Proj. App: 3B, question 3d; policies and procedures]	Standard (must meet all statements below of 2 met	
2.2a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state mandated restrictions) History of domestic violence (e.g. lack of protective order, of separation from abuser, or law enforcement involvement)	☐ met ☐ un ☐ unmet, docum provided	



2.2b	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	unmet, documentation not
	Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
Key Elements of Permanent Supportive Housing		
2.5	If this project is a permanent supportive housing project, does it include the following key elements of permanent supportive housing as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) ¹ ?	Must meet all statements below of 9 met
2.5a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a disability. [Sample lease]	
		☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise interfere with a life in the community. [Program/house rules, policies	Standard
		☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. [Key Elements of PSH form, policies and procedures, sample lease]	Standard
		☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

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



2.5e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): As needs change over time, tenants can receive more intensive or less	Standard met unmet N/A unmet, documentation not provided Standard
	intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.5h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.5i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
Rapid Re-H	Housing Performance Benchmarks and Program Standards	
2.7	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met

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



Standard	
met unmet N/A unmet, documentation not provided	
Standard met unmet N/A unmet, documentation not provided	
Standard met unmet N/A unmet, documentation not provided	
Standard met unmet N/A unmet, documentation not provided	
Must meet all statements below of 3 met	
Standard met unmet N/A unmet, documentation not provided	



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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
Reviewer Notes (if unmet or documentation not provided, note why):	
Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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	Standard met unmet N/A unmet, documentation not provided
	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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): 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. [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): Core Program Standard: Rapid Re-Housing Case Management and Services 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 manage.) [RRH Program S



	scheduled meetings.) [RRH Program Standards Form, policies and procedures]		
	Reviewer Notes (if unmet or documentation not provided, note why):		
2.7c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided	
	Reviewer Notes (if unmet or documentation not provided, note why):		
2.7c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided	
	Reviewer Notes (if unmet or documentation not provided, note why):		
2.7d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met	
2.7d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided	
	Reviewer Notes (if unmet or documentation not provided, note why):		
2.7d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided	
	Reviewer Notes (if unmet or documentation not provided, note why):		
2.7d3	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. [RRH Program Standards Form, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided	
	1 , 7		



2.7d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standomet un un un unmet, docun provided	met
	Reviewer Notes (if unifiet or documentation not provided, note why).		
Services Fu	ınding Plan		
2.8	 While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: All funding sources that the project is currently using to provide supportive services and if these resources will be expanded. Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	Stand met un unmet, docun provided	met 🗌 N/A
Permanen	t Supportive Housing: Move-on Program	Possible Score	Project Score
2.9	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. Move-on programs 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 project. ³ Does the permanent supportive housing project have a formal move-on program? To receive full points a move-on program should include the following: • Standardized criteria to identify people who may be ready to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority); • A method to prepare tenants to move-on; • A method to link move-on tenants to mainstream services and supports; and		



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

 A strategy to evaluate the effectiveness of the move-on program. ogram policies] 		
Yes	10	
No	0	

Staff Scoring

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

Section	n III: NC BoS CoC Priorities	Section III Score	
Possible Po	pints: 20		
Minimum	Points Required or Review is Triggered: 11		
	ver Services		
3.1a	Total \$ request for housing activities (leased units, leased structures,		
	and/or rental assistance):		
2.41	[Proj. App.: 61]		
3.1b	Total Assistance requested (not including match or admin):		
3.1c	[Proj. App.: 61, line 6] Percentage of total budget devoted to housing activities		
3.10	(housing activities request ÷ total assistance request x 100):		%
	(Housing activities request + total assistance request x 100).	Possible Score	Project Score
	Less than 35%	0	110,000
	Between 35% and 54.9%	5	
3.1d	Between 55% and 74.9%	10	
	Between 75% and 84.9%	15	
	Between 85% and 100%	20	
Permanen	t Supportive Housing: Prioritizing Beds for Chronically Homeless Particip	pants	
3.2	Does the project have 100% of their beds prioritized for chronically	Stand	dard
	homeless participants?	☐ met ☐ un	met 🗌 N/A
	[Proj. App: 4B, CH beds]	unmet, docun	nentation not
		provided	

Section	n IV: Project Performance	Section 1	V Score
Possible Po	pints Added: PSH: 150 RRH: 140		
Possible Po	pints Subtracted: PSH: -15 RRH: -15		
Minimum	Points Required or Review is Triggered: PSH: 48 RRH: 30		
	,		
	ing project performance scores are based on CoC Annual Performance Re	eports (CoC-APRs)	for January 1,
	ecember 31, 2017, unless otherwise noted.	Possible Score	Duelest Coors
Population	is serveu	Lozzinie 2cote	Project Score



4.1	PSH projects: What percentage of the households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 100%	0	
	100%	8	
4.2	RRH projects: What percentage of the households served by the		
4.2	projects. What percentage of the Households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 25%	0	
	25-49%	2	
	50-74%	4	
	75-99%	6	
	100%	8	
4.3	What percentage of the adults served by the project were veterans? [CoC-APR Q25a/b]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.4	What percentage of adults served by the project were chronically homeless? [CoC-APR Q26]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.5	What is the program's unit utilization rate? [compare actual units in HMIS vs. application projections]		
	0-79%	-5	
	80-94%	0	
	95% or higher	5	
4.6	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	Yes	0	
	No	-5	
4.7	RRH projects : what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	15	
4.8	PSH projects: what percentage of program participants exited to a permanent housing destination? (if no exits, 10 points are automatically awarded) [CoC-APR 23c]		
	automatically awarded [ede 7 ii 7 200]		
	Below 80%	0	



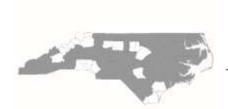
4.9	What percentage of program participants exited to a known		
	destination?	_	
	95% or higher	5	
	80-94%	0	
4.40	0-79%	-5	
4.10	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 28%	15	
4.11	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 75%	15	
4.12	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	5	
	Performance met BoS Goal: At least 94%	15	
-	cipation Il law domestic violence programs are prohibited from using HMIS and from this section)	Possible Score	Project Score
4.13	HMIS Data Completeness		
4.13	[0640 – HUD Data Quality Report Framework Report, Q2-Q5]		
	0-10%	15	
	Above 10%	0	
4.14	Are all of the agency's projects that are listed in the 2017 HIC participating in HMIS? [HIC]		
	Yes	5	
	No	0	
4.15	Did the program submit their APR on or before the designated deadline?		
	Yes	5	
	No	0	
4.16	Did program staff adhere to the APR review process with CoC staff?		
	Yes	5	
	No	0	
HUD Moni			
4.17	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. [Interview with agency]	Standard □ met □ unmet	
4.18	Previous Project Spending Rates These questions are for projects that have been operating for at least one year at the time of the NOFA release. (percentage rounded to the nearest whole number) [Scored on APR. If APR is not available, agencies will submit a LOCCS screenshot of final draw for last completed year. If agencies are spending less than 90% of funding, they must submit a narrative explaining why the agency is underspending their grant.] Amount awarded		
	Amount spent		



4.19	Percentage 90+%	Stand	dard
	(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.)	☐ met ☐ un☐ un☐ unmet, docun provided	
4.20	How many grant extensions from HUD were given in for a reason		
	other than merging grants? [Interview with agency or information from HUD]	Possible Score	Project Score
	0	15	
	1	0	
Coondinate	2+	further review	
	ed Assessment and Prioritization		
4.21	Does the program fill all open slots directly from the coordinated entry prioritization wait list? [Interviews with Regional Committee CA Lead and agency]	Stand ☐ met	dard □ unmet
4.22	Permanent Supportive Housing: Has the program adopted HUD's prioritization policy as outlined in HUD Notice CPD-16-011 and added it to their program policies? [Program policies]	Stand met ur	dard nmet
	Section V: Application Deadlines and Documentation		V Score
Possible De	eductions: -25		
Minimum I	Points Required or Review is Triggered: Not more than loss of -15		
Budget & I		Possible Score	
5.1	If questions regarding the budget are not complete and accurate,		Project Score
	subtract up to 5 points.	-5	Project Score
5.2		-5 Stand ☐ met	
5.2 Deadlines	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the	Stand	dard
	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the	Stand met	dard unmet
Deadlines	subtract up to 5 points. Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.] If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA	Stand met Possible Score	dard unmet



5.6	5	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold met unmet



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2018 Funding Priorities for Continuum of Care Competition

Introduction

This document outlines the North Carolina Balance of State Continuum of Care's (NC BoS CoC) priorities for the 2018 Continuum of Care funding competition.

In addition to applying the approved new and renewal scorecards, the Project Review Committee should consider these priorities in its review and ranking of projects in the 2018 competition:

- Ensure essential infrastructure elements are in place, including HMIS and coordinated assessment
- Ensure adequate coverage of permanent supportive housing across the CoC
- Increase the availability of rapid re-housing
- Ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance

Section I of this document summarizes the history of how the NC BoS CoC has prioritized projects for funding in the past and the Funding and Performance Subcommittee's process to arrive at the priorities for the 2018 competition. Section II explains each funding priority. Section III provides additional guidance to the Project Review Committee about how to implement these funding priorities during the rank and review process, including a detailed grid that sets priorities for new projects by project type and region.

Section I: Funding Priorities Background and Process

As part of the annual CoC competition, each CoC is required to submit a project listing to HUD that lists its new and renewal projects in order of priority. The NC BoS CoC's project ranking and review process, conducted by the Project Review Committee, determines which projects are included in the application to HUD and the order in which they are listed. Projects high on the list are likely to be funded by HUD, while projects lowest on the list run the risk of not receiving funding.

The NC BoS CoC's ranking and review process has two steps: first, the CoC reviews all projects using a standardized scorecard; second, the Project Review Committee ranks projects based on the scores and other CoC priorities. In the past few years, these CoC priorities have largely been based on HUD's priorities.

The Scorecard Committee has also set priorities when designing the annual new and renewal scorecards. Scorecards reward projects for better performance, adhering to best practice program design standards, targeting specific homeless subpopulations such as chronically homeless individuals and families, and prioritizing allocated dollars for direct housing assistance over services. The NC BoS CoC's current portfolio reflects this history of priority-setting. Aligned with HUD priorities, the NC BoS CoC's portfolio is all permanent housing projects (PSH and RRH) except for one HMIS project.

The NC BoS CoC set CoC funding priorities for the first time in 2017. In 2018 the CoC formed a standing Funding and Performance Subcommittee, which sets funding priorities and examines other aspects of CoC performance. The Subcommittee reviewed the 2017 funding priorities and determined that they still apply for 2018, so only made minor changes.

The Subcommittee set general goals for the priority-setting process:

- Base funding priorities on the needs of the NC BoS CoC as a whole, without privileging specific communities;
- Help the Steering Committee and Project Review Committee think more broadly about the CoC;
- Stay open-minded about what needs to change to end homelessness;
- Better understand the CoC's needs;
- Provide tools and support to help the Steering Committee and Project Review Committee make good decisions for the CoC; and
- Establish a framework to help implement the funding priorities.

The Subcommittee examined data on current funding and needs across the CoC, which revealed three overarching issues, none of which were satisfactorily addressed in the 2017 competition:

- 1) There are resource gaps in certain areas, especially in a few regions that have little to no permanent supportive housing.
- 2) Resources are not distributed in a way that matches the distribution of need across the CoC.
- 3) CoC-funded rapid re-housing only exists in three of the thirteen regions.

The Subcommittee aimed to address geographical gaps in funding so everyone in the CoC has an option for permanent housing, no matter in which county they live. The Subcommittee also wanted to ensure that grantees spend all allocated funding each year, since underspent funds are returned to HUD instead of being used to assist people in the CoC. The workgroup also identified HMIS and coordinated assessment as priorities for new and continued funding because the NC BoS CoC needs this infrastructure to work well and to support HUD's requirements of all CoC and ESG grantees and other homeless service providers.

Section II: Funding Priorities

Ensure essential infrastructure elements are in place, including HMIS and coordinated assessment

A robust Homeless Management Information System (HMIS) and coordinated assessment system are key elements of a well-functioning CoC, and HUD requires all CoC and ESG grantees to participate in both. The Project Review Committee should put a high priority on funding both projects.

CoC funding for HMIS pays for the basic software system that collects administrative data on people served and services provided in the CoC and funds necessary staff to support and train participating agencies, complete mandated reporting to HUD, and help the CoC use its data to improve its work. In the past, the Project Review Committee has ranked the HMIS project first in the CoC competition to protect this basic infrastructure. The Project Review Committee should continue to consider funding HMIS a high priority in the 2017 CoC competition.

The NC BoS CoC was awarded its first CoC-funded coordinated assessment project in 2017, but at a lower amount than originally requested. The SSO-CE project that was awarded will not provide enough

funding to fund coordinated assessment in every Regional Committee. Providing additional funding for coordinated assessment in the NC BoS CoC would only be possible through additional reallocation. Coordinated assessment targets resources effectively and efficiently, increases access to homeless services, assists the CoC to identify gaps in its system, and helps providers better coordinate services. Since coordinated assessment is such an integral piece of the CoC, only projects that would cover all 79 counties of the CoC should be eligible for funding. If new funding is available for coordinated assessment through reallocation, the Project Review Committee should consider it a high priority.

Ensure adequate coverage of permanent supportive housing across the CoC

CoC funding is the only major public source for permanent supportive housing (PSH), which provides long-term financial assistance and intensive service supports to the most vulnerable households. The NC BoS CoC has always prioritized PSH and should continue to prioritize this key housing intervention in the CoC funding competition.

In the 2018 competition, the Project Review Committee should prioritize new PSH projects in the geographic areas that have significant unmet needs for PSH so all vulnerable people experiencing homelessness, regardless of their location in the CoC, have the option to live in permanent supportive housing (see Table 1: New Projects Priority Grid, below, for detailed explanation of which regions should have a priority for new PSH).

The Project Review Committee should prioritize current PSH grants as long as these projects meet the threshold spending rates (90% or above). PSH projects that currently underspend their funding and have made no attempt to correct the problem by serving additional counties, streamlining intake processes, or conducting more outreach should be considered for partial reallocation.

Increase the availability of rapid re-housing

A healthy homeless service system must have a good mix of permanent supportive housing and rapid rehousing (RRH) resources. PSH and RRH work together to create flow through the system. RRH helps move households quickly out of shelters and off the streets and allows PSH to focus on households with the highest needs. Households in RRH projects can transition to PSH if more support is needed, but most find stability within the two years of assistance that RRH can provide. While the NC BoS CoC portfolio currently includes 5 RRH projects, RRH should be increased across the CoC. In all regions, the CoC recommends that the Project Review Committee prioritize rapid re-housing for new funding (see Table 1 below for detailed priorities by region).

However, because other public funding sources can pay for RRH (i.e. Emergency Solutions Grants or Supportive Services for Veteran Families), the NC BoS CoC should reserve CoC funding to bring RRH programs to scale only after other funding sources have been used in a region. The scorecard already supports this principle: new RRH applicants must have used ESG or other funding source for RRH before applying for CoC funds. Regions should maximize the amount of ESG funding dedicated to RRH. CoC funding should never become the only source of funding for RRH.

The NC BoS CoC will not fund new joint Transitional Housing-Rapid Rehousing projects during the 2018 CoC Competition. The CoC should focus on bringing rapid rehousing to scale before introducing new program types. TH-RRH joint component projects are intended for areas with large unmet needs for shelter and for some groups for which a brief period in transitional housing could be beneficial. These

projects will be held to different standards than traditional transitional housing, with an emphasis on brief stays in TH. The NC BoS CoC has available Emergency Solutions Grants funding to meet unmet shelter needs, and agencies in the CoC need to focus on improving access to current RRH projects before exploring new program models.

Ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance

Since CoC funding is limited, the CoC should put a high priority on projects that maximize the funding they receive. Projects should:

- Spend as much of their funding as possible, reaching at least a 90% threshold;
- Target and serve people with the highest needs;
- Produce strong outcomes; and
- Meet the community's and CoC's needs.

The Scorecard Committee should make each of these items part of the 2018 new and renewal scorecards. Projects that do not meet some or all of these criteria should receive a reduced score and should be ranked accordingly. In addition to ranking, if a renewal project has a pattern of low spending, the Project Review Committee should consider reallocating some or all of that project's funding. Projects should consistently spend at least 90% of their funding. The CoC has a responsibility to find new, more effective projects if current projects cannot spend their allocated funding.

The NC BoS CoC will not fund projects that request acquisition, rehabilitation, or new construction funding. There is too little new funding available to the CoC each year to justify the large investment these activities would require. Agencies that need these types of funding should use other sources of federal, state, and local funding and focus CoC funding on activities that more quickly benefit people experiencing homelessness.

Section III. Additional Guidance on Implementing Priorities Project Review and Ranking Process

The Project Review Committee considers multiple factors when determining project rankings, including the priority of the project, the project's performance on the scorecard, and whether the project is a new project or renewal project. This year, even with detailed funding priorities, the PRC should continue to take all these factors into account when determining a project's ranking.

There are three ways the scorecards affect project ranking: points, standards, and thresholds. If a project does not meet a threshold, it is not eligible for funding. If a project does not meet the required minimum number of points or does not meet the standards, the Project Review Committee may lower the project's ranking, remove the project from the competition altogether, or recommend reducing its funding. Receiving more points than other projects can also increase a project's ranking.

This year, the priorities in this document will also help determine project rankings. New project priorities, as outlined in Table 1: New Projects Priority Grid below, will be recorded on the new project scorecard. The Project Review Committee should rank projects highly if they are *both* a high priority and perform well on the scorecard. Balancing a project's priority with its scorecard performance ensures

that funding goes to projects that meet best practices, perform well, and will have a sustained impact on homelessness in the CoC.

The Project Review Committee has historically ranked renewal projects ahead of new projects, with few exceptions. The priorities in this document may result in ranking some high-priority new projects ahead of renewal projects, especially if there are renewal projects that have consistently performed poorly or underspent their funds. In such cases, the Project Review Committee should consider the potentially detrimental geographic effect of ranking renewal projects low. In regions with very few projects, giving a renewal project a low rank could put almost all the funding for a region at-risk. The Project Review Committee should examine the Regional Committee's and the agency's ability to prevent current participants from becoming homeless in the case of a large or full reallocation. On the other hand, the PRC should consider the additional people new projects could help in a region, especially in regions with very few current housing assistance resources.

Priorities for New Projects

As stated above, a state-wide coordinated assessment project should be a high priority new project for reallocated funding. New RRH and PSH projects should be prioritized based on the grid below. In this grid, projects can be Priority 1, Priority 2, Priority 3, or No Priority. The Project Review Committee should take these priorities into account when ranking projects, but, as explained above, the priorities below should not be the only factor that determines a project's ranking. If projects are No Priority, the Project Review Committee should not recommend these projects for funding unless money is left unallocated in the competition.

Table 1: New Projects Priority Grid

Region	RRH	PSH
1	2	3
2	2	1
3	2	3
4	2	1
5	3	3
6	3	3
7	2	1
8	2	1
9	2	No Priority
10	2	3
11	2	3
12	2	No Priority
13	2	3

This grid aims to build a strong foundation for the future of the CoC. The performance of the CoC on future funding applications and the ability of the CoC to meet goals such as ending Veteran homelessness or implementing coordinated assessment can be hurt when some areas have extremely

low resources. Additionally, no one should find themselves homeless in a county that completely lacks homeless assistance. This grid tries to establish a baseline level of funding for PSH and RRH across all 79 counties in the NC BoS CoC.

Below is a brief explanation of the priorities (see the appendix for more detailed methodology):

Priority 1: PSH in regions that need a significant increase in PSH units to meet the need.

Priority 2: RRH in all regions that do not already have CoC-funded RRH.

Priority 3: RRH in regions that already have CoC-funded RRH and PSH in regions that have some unmet need.

Appendix: New Priorities Grid Sources and Methods

Priorities for PSH were determined based on a measure of the existing stock of PSH and whether it meets the current need. The table below outlines the data used to calculate the need for PSH in each region. Priority 1 regions have more unmet need (column D) than existing PSH beds (column A), implying that they would have to significantly increase their stock of PSH to meet the need. Priority 3 regions have some need for PSH but less than their current stock of PSH beds, implying that a relatively small increase in PSH in those regions would meet the need. RRH is Priority 2 in regions that have no CoCfunded RRH (column E) and in Region 7 because it has the lowest overall amount of CoC funding (column F). RRH in the remaining regions, which already have CoC-funded RRH (regions 5 and 6), are Priority 3.

	Column A	Column B	Column C	Column D	Column E	Column F
Region	Existing PSH	Annual PSH	Annualized	Unmet need	RRH	Total CoC
	beds	turnover beds	number of people	for PSH	funding	funding
			experiencing			
			chronic			
			homelessness			
1	74	11	27	16	\$0	\$375,842
2	30	5	86	81	\$0	\$256,549
3	109	16	36	20	\$0	\$554,084
4	50	8	59	51	\$0	\$263,714
5	170	26	47	21	\$325,345	\$1,434,009
6	153	23	40	17	\$451,818	\$1,444,521
7	1	0	57	57	\$0	\$3,909
8	33	5	43	38	\$0	\$143,854
9	192	29	7	None	\$0	\$1,048,346
10	105	16	35	19	\$0	\$501,849
11	31	5	7	2	\$0	\$164,444
12	226	34	21	None	\$0	\$1,333,113
13	53	8	33	25	\$0	\$281,904

NCCEH staff calculated Column D (unmet need for PSH) using the following methodology:

- Staff calculated the number of existing PSH beds (column A) by multiplying the number of PSH
 units in each region (as reported on the HUD funding applications) by their corresponding
 number of bedrooms. For example, a region with one 1-bedroom unit and two 2-bedroom units
 would have five beds.
- Then staff estimated the number of PSH beds that would become available during a year (column B) using a reasonable estimate of annual turnover. The turnover rate was assumed to be 15% for all projects, the same rate used in the United States Interagency Council on Homelessness's <u>Supportive Housing Opportunities Planner (SHOP)</u> tool.
- Next, to estimate the need for PSH during a full year, staff multiplied the number of people counted as chronically homelessness during the 2017 Point-in-Time Count by 1.3 (column C).
 This annualization factor is also used in USICH's SHOP tool. This number estimates the total need for PSH in a region.





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North Carolina Balance of State Continuum of Care 2018 CoC Competition Project Ranking Appeals Process

The NC Balance of State Continuum of Care (NC BoS CoC) strives to create a fair and transparent process for reviewing and ranking CoC competition project applications. The Project Review Committee may recommend that some new applications should not be included in the project priority ranking or that some renewal projects should be partially or fully reallocated. To ensure fairness these projects will have the opportunity to appeal the Project Review Committee's decision.

Who may appeal:

- New applicants whose projects were not included in the NC BoS CoC's project priority ranking
- Renewal applicants whose projects were partially or fully reallocated

How to appeal:

- Applicants must submit a letter on agency letterhead, signed by a director-level position, by 5
 PM on Thursday, September 6, 2018.
- Letters must be emailed as PDFs to bos@ncceh.org.
- No appeals will be considered after the deadline.

Appeal letters must present additional information or explain extenuating circumstances that address the deficiencies in the project application. Letters requesting an appeal without additional information will not be considered.

The Project Review Committee will consider each appeal and decide whether to amend the project priority listing by Monday, September 10, 2018.

If the Project Review Committee decides to amend the project priority listing after appeals are made, the project priority listing will be re-approved by the NC BoS CoC Steering Committee on Tuesday, September 11, 2018. Revised project applications need to be submitted in esnaps by 12:00pm on Wednesday, September 12, 2018. Applications that fail to make revisions and submit in esnaps by the deadline will still not be funded.



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2018 Reallocation Process

Although we have yet to hit the 20% reallocation mark, the NC BoS CoC has a robust process to reallocate low performing projects to new projects that show evidence they will have a higher performance. For the past two years, the Project Review Committee has decided to partially and fully reallocate renewal projects due to low spending or poor performance. In 2018, the NC BoS CoC decided to fully reallocate two projects and partially reallocate three projects to create three new projects.

The CoC's reallocation process is guided by two documents: CoC Funding Priorities and the CoC's Renewal Scorecard, which are described below and attached. The Project Review Committee uses these documents to determine projects that should be reallocated to create new projects. The CoC's Intent to Apply Process recruits new potentially high performing projects that could use reallocated funding.

Funding Priorities

The NC BoS CoC Funding and Performance Subcommittee met in early spring 2018 to create the 2018 NC BoS CoC Funding Priorities for the CoC. This document was approved by the Steering Committee and posted to our website on May 16, 2018.

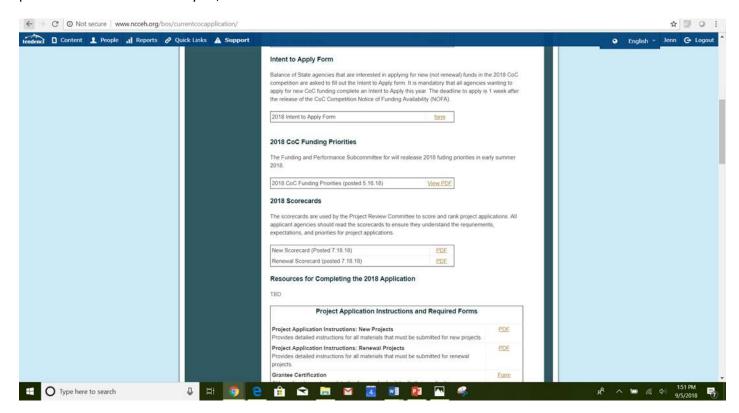


Figure 1 Funding Priorities posted to NC BoS CoC Website

The 2018 NC BoS CoC Funding Priorities prioritize projects that maximize the CoC funding they have been allocated. A specific funding priority in the documents states the Project Review Committee should ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance. Since CoC funding is limited, the CoC should put a high priority on projects that maximize the funding they receive. Projects should:

- Spend as much of their funding as possible, reaching at least a 90% threshold;
- Target and serve people with the highest needs;
- Produce strong outcomes; and
- Meet the community's and CoC's needs.

The Scorecard Committee should make each of these items part of the 2018 new and renewal scorecards

Scorecard

The 2018 Scorecard Committee met three times in the months of May and June and minutes were posted to our website on June 26, 2018.

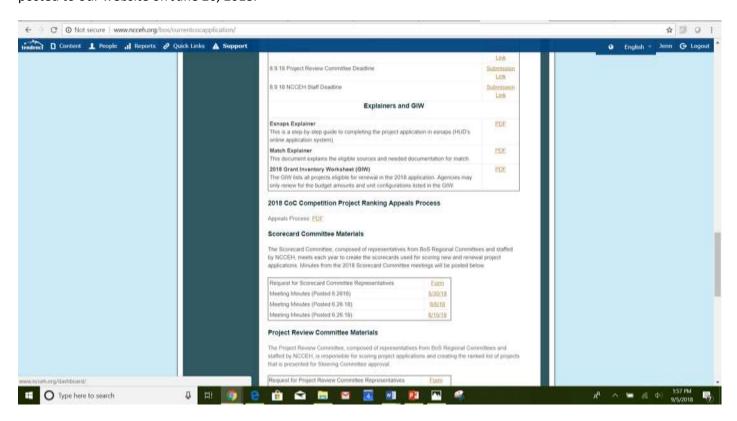


Figure 2 New and Renewal Scorecards posted to NC BoS CoC Website

The funding priorities criteria was incorporated into the new and renewal scorecards to identify projects that should receive a reduced score and be ranked or reallocated, accordingly.

Encouraging New and Existing Providers to Apply

The NC BoS CoC encouraged new and existing providers to apply for new projects that could be created through reallocation. The NC BoS CoC created an Intent to Apply form for all agencies

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that were interested in applying for new CoC grants, including existing grantees and agencies that have never received CoC funding. CoC staff conducted one-on-one phone calls with all agencies that completed the form to review the proposed new project and explain the CoC funding program, deadlines in the application process, scorecards used to evaluate projects, and threshold items that new applicants must meet.

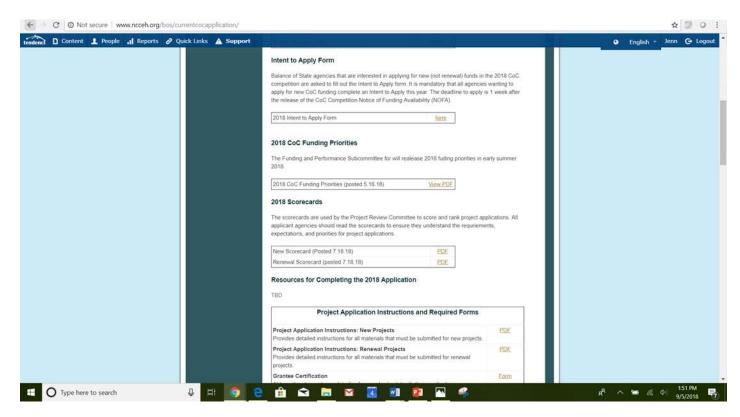


Figure 3 Intent to Apply Form posted to NC BoS CoC Website

The Intent to Apply form was announced in email on February 20, 2018 announcing a webinar for agencies interested in being a new CoC grantee. The link to the form was announced at Steering Committee meetings and via email from February through June 2018.

Communication of the Reallocation Process to the Steering Committee

The option to reallocate funds was presented to the Steering Committee July 10, 2018. At the meeting, CoC staff stated that new applications could be funded through Bonus Funding or through the partial or full reallocation of existing grants. The presentation and minutes from this call were publicly posted on the CoC website: http://www.ncceh.org/bosminutes/.



New projects can be created using bonus or reallocated funding

- NC BoS CoC can apply for new projects using bonus funding and/or reallocated funding:
 - PH-PSH projects dedicated to CH households
 - PH-RRH projects that will serve homeless individuals and families, including unaccompanied youth
 - TH-RRH projects (not allowed by NC BoS CoC in FY18)
 - SSO-CE projects (only allowable as CoC-wide)
- The PRC may choose to reallocate funds from lowperforming/low-spending renewals to create new projects.



Figure 4 Reallocation Slide from July 2018 Steering Committee Meeting

Project Review Committee

The Reallocation Process was presented to the Project Review Committee, which scores and ranks project applications, at the August 8, 2018 Orientation Meeting and again during the scoring and ranking process. The scorecard identified projects with a pattern of low spending and the Project Review Committee considered reallocating some or all the project's funding to allow for new, more effective projects.

The Reallocation Committee chose to fully reallocate one project due to performance. This renewal Grantee missed 14 standards and 3 minimums. Another project was fully reallocated because it was in it's second CoC competition and the project had failed to begin. The project has no spending history.

Three projects were partially reallocated due to spend rates of 60% or less. Similarly to a project that was fully reallocated, one of the projects that was partially reallocated had gone through two CoC competitions without beginning or having spending history. The Project Review committee chose to partially reallocate this project because there is a need for PSH in the area the grant would serve and no other option for PSH. Because of the vast geographic area of 79 counties, the NC BoS CoC must consider coverage when potentially reallocating a project that will leave a gap in a rural area. The Project Review Committee took coverage in high priority areas into account when ranking or reallocating projects.





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2018 Scorecard for CoC Funds: New Projects

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

This scorecard has four goals:

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

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

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

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

PROJECT QUALITY REQUIREMENTS		
New projects must receive at least the standard and minimum score in each section.	Maximum	PSH: 86
Standards and funding priorities will be used in the ranking process. If a standard or	Score	RRH: 85
minimum is not met, further review will be triggered. After further review, the Project	Possible:	SSO: 34
Review Committee will determine potential consequences, including whether the		
project is ineligible for inclusion in final NC BoS CoC application or will receive	Project	
reduced funding. Thresholds are a requirement for new projects. Projects that do not	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section	I: General Application	Section	I Score
Possible Poir			
	oints Required or Review is Triggered: 8		
1.1	with Mission Does the project fit within the mission of the agency? Does the agency currently serve homeless households in their community? [New Project Form]	Stand met ur unmet, docur provided	
Accuracy an	d Appropriateness of Responses	Possible Score	Project Score
1.2	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.3	Does the agency describe prior experience serving homeless persons that has prepared the agency for administering this grant? [New Project Form]	Standard met unmet unmet, documentation not provided	
1.4	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.5	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.5	Are questions regarding housing for participants completed and accurate? [Proj. App: 4B]	3	
1.6	Are all questions answered thoroughly and consistently?	3	



Section	II: Program Design	Section II Score
	nts: PSH: 30 RRH: 30 SSO: 0	
	ints Required or Review is Triggered:	
	H: 11 SSO: Standards Met	
-	Need Statement	
2.1	New CoC projects must demonstrate that they are meeting an existing need in their community. Projects must describe:	Standard
	 What community need the new project will address, 	
	including local data (PIT Count, coordinated assessment	☐ met ☐ unmet
	data, waiting lists, etc.) that demonstrates the need	unmet, documentation not
	 How the community has used other resources to address 	provided
	this need	
	[New Project Form]	
Permanent	Housing Projects (PSH, RRH, and RRH-TH)	
2.2	What priority is this project in its region?	
	[Priority 1, 2, 3, or not prioritized, based on funding priorities document]	
	uocumentj	no priority
		_ ,
Targeting to	Prioritized Subpopulations	
2.3	The Department of Housing and Urban Development (HUD) and the	
	NC Balance of State CoC (NC BoS CoC) prioritize funding for certain	Standard
	homeless subpopulations, including chronically homeless individuals	Standard
	and families, homeless Veterans, people with disabilities, and youth.	☐ met ☐ unmet
	Projects requesting HUD funding must provide a narrative	unmet, documentation not
	identifying the subpopulations for which the project will serve and	provided
	describe the ways in which the project will engage these	process
	subpopulations to ensure entry into permanent housing.	
2.4	[New Project Form] Does the project demonstrate that households will be quickly	Standard
	enrolled and helped to find safe and appropriate housing, ideally in	
	less than 30 days?	☐ met ☐ unmet
	[New Project Form]	unmet, documentation not
		provided
2.5	PSH projects: Is this a permanent supportive (PSH) project dedicated	Threshold
	to serving chronically homeless households per HUD Notice CPD-16-	
	11?	☐ met ☐ unmet ☐ N/A
	[Policies and procedures]	unmet, documentation not
		provided
2.6	Rental assistance projects are preferred to leasing projects as rental	Standard
	assistance projects adjust to FMR and provide tenants with	
	a lease in their name. Projects that wish to provide leasing must	☐ met ☐ unmet ☐ N/A
	submit a written statement that explains why the project is not	unmet, documentation not
	applying as a rental assistance project.	provided



2.7	RRH projects: Applicants must be currently receiving Emergency Solutions Grant (ESG) RRH funds and be in good standing with the 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. In 2018 exceptions may also be made for projects applying for the DV-RRH bonus funding).	☐ met ☐ u	shold nmet □ N/A mentation not
	ervices Only (SSO) Projects		
2.8	SSO projects : Is this a coordinated assessment project that will serve the NC BoS CoC's seventy-nine counties?	Thre ☐ yes ☐ no	shold N/A
Housing Ove	er Services		
2.9	Total \$ request for housing activities (acquisition, rehab, construction, rental assistance, leased units, and/or leased structures): [Proj. App: 61] Total Assistance Requested (not including match or admin):		
	[Proj. App: 61, Line 6]		
2.11	Percentage of total budget devoted to housing activities (housing activities request ÷ total request x 100):	Possible Score	Project Score
	Less than 35%	0	
	Between 35% and 54.9%	5	
	Between 55% and 74.9%	10	
	Between 75% and 84.9%	20	
	Between 85% and 100%	30	
2.12	 PSH, RRH, and RRH-TH projects: While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	☐ met ☐ u	ndard nmet
Housing Firs			
2.13	Is this a Housing First project? Must meet all statements below to meet threshold. [Policies and procedures]	Threshold (must meet all statements below) of 2 met	
2.13a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state		nmet mentation not
	mandated restrictions)		



	☐ History of domestic violence (e.g. lack of protective order,	
	of separation from abuser, or law enforcement involvement)	
2.13b	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	unmet, documentation not
	☐ Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
PSH Projects	only: Key Elements of Permanent Supportive Housing	
2.14	Does this project include the following key elements of permanent	
2.17	supportive housing as defined by the Substance Abuse and Mental	Must meet all statements below
	Health Services Administration (SAMHSA) ¹ ? If the applicant does not	of 9 met
	demonstrate that the project will meet all standards, the application	
	should not be included in the CoC competition.	
2.14a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a	Standard
	disability. [Sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Deviewer Netes (if we rest or decorrection not may ideal note why).	
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14c	House rules, if any, are similar to those found in housing for people	Standard
	who do not have disabilities and do not restrict visitors or otherwise	Standard
	interfere with a life in the community. [Program/house rules, policies	☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not
		provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
	, , , , , , , , , , , , , , , , , , , ,	

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



2.14d	Housing is not time-limited, and the lease is renewable at tenants' and owners' option. [Key Elements of PSH form, policies and procedures, sample lease]	Standard
	procedures, sample lease)	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14e	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. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.14f	As needs change over time, tenants can receive more intensive or less intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14g	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.14h	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. [Key Elements of PSH form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



2.14i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
For RRH Pro	grams Only: Rapid Re-Housing Performance Benchmarks and Program	Standards
2.15	Does this project include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? If applicant does not demonstrate that the project will meet all standards, the application should not be included in the CoC competition. [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met
2.15a	Core Program Standard: Housing Identification	Must meet all statements below of 4 met
2.15a1	Program designates staff whose responsibility is to identify and recruit landlords and encourage them to rent to homeless households served by the program. Staff have the knowledge, skills, and agency resources to: understand landlords' perspectives, understand landlord and tenant rights and responsibilities, and negotiate landlord supports. A program may have dedicated staff for whom this is the primary responsibility. If a program does not have a dedicated staff person(s) who performs this function, case manager job descriptions must include responsibilities including landlord recruitment and negotiation and at least some of the program's case managers must be trained in this specialized skill set to perform the recruitment function effectively. [RRH Program Standards Form, policies and procedures Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
2.15a2	Program has written policies and procedures for landlord recruitment activities, including screening out potential landlord partners who have a history of poor compliance with their legal responsibilities and fair housing practices. [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided

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



2.15a3	Program offers a standard, basic level of support to all landlords who lease to program participants. This support is detailed in a written policy distributed to landlords. Program can negotiate additional supports, as needed, on a case-by-case basis. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15a4	Program has a written policy requiring staff to explain to participants basic landlord-tenant rights and responsibilities and the requirements of their specific lease. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15b	Core Program Standard: Rent and Move-In Assistance	Must meet all statements below of 3 met
2.15b1	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15b2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

2.15b3	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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c	Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
2.15c1	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c2	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.) [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	



	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
2 4544	Reviewer Notes (if unmet or documentation not provided, note why):	
	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
2.15d3	Reviewer Notes (if unmet or documentation not provided, note why): Eligibility criteria for the program do not include a period of sobriety,	
2.15d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
2.15d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.15c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided

Section III: Scope of Services		Section	Section III Score		
Possible	Points: 8 n Points Required or Review is Triggered: 6				
Service N	Needs	Possible Score	Project Score		
3.1	Does the applicant demonstrate they will meet the anticipated individual service needs of participant households? Will services ensure households will be able to find and maintain permanent housing? [Proj. App: 4A Question 2]	4			
Employment Services		Possible Score	Project Score		
3.2	Does the project provide or link participants to employment services? Does the program have employment goals? [Proj. App: 4A]	2			
Access to Mainstream Benefits		Possible Score	Project Score		
3.3	Does the project include services to help participants access mainstream benefits such as unemployment benefits, TANF, and food stamps/SNAP? [Proj. App: 4A]	1			
3.4	Does the project use SOAR caseworkers?	1			

Staff Scoring

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

Section	on IV: Organizational Capacity	Section IV Score		
Possible I	Points: 16			
Minimum	n Points Required or Review is Triggered: 8			
Complete	ed Similar Projects	Possible Score	Project Score	
4.1	Has the agency successfully implemented a CoC-funded project of			
	the same project type (PSH, RRH, or SSO)?			
	[Proj. App: 3B; New Project Form; interview with agency]			
	Has successfully implemented the same project type	8		
	Has not implemented the same project type	0		
4.2	If not, has the agency successfully implemented this same type of	4		
	project (permanent supportive housing, rapid rehousing,			
	coordinated assessment) using another funding source?			
	[Proj. App: 3B; New Project Form; interview with agency]			
4.3	If the answer to either of the questions is yes, are the same staff	2		
	that were operating the program at that time going to be operating			
	the proposed project?			
	[Proj. App: 3B; New Project Form; interview with agency]			
4.4	If none of the above, has the agency successfully implemented a	2		
	different HUD-funded project (ESG, Section 8, HPRP, etc.) or a CoC-			
	funded project of a different type?			
	[Proj. App: 3B; New Project Form; interview with agency]			
Agency S	A-1-112a.			



4.5	Has the agency been in operation for at least three years? [Proj. App: 3B; New Project Form; interview with agency]		Thres	shold	
		☐ met	□ur	nmet	□ N/A
					ion not
		provid	led		
4.6	Non-profits only: Did the applicant submit a signed audit letter and a copy of their budget from the most recent fiscal year? (Financial		Thres	shold	
	statements will be used to assess fiscal stability of the applicant	☐ met	☐ ur	nmet	□ N/A
	agency. Financial statements that demonstrate instability may result in the agency not meeting requirements.)			mentat	ion not
	[Audit letter and budget]	provid	led		
4.7	Non-profits only: Does the agency have the financial capacity to				
	operate this project on a reimbursement basis? [Budget]		Thres	shold	
	[Budget]	☐ met	☐ ur	nmet	□ N/A
				mentat	ion not
		provid	led		
4.8	Non-profits only: Has the agency submitted a list of their board of				
	directors and a copy of the minutes from their three most recent board meetings? Does the agency have an active and engaged		Thres	shold	
	board of directors?	☐ met	☐ ur	nmet	□ N/A
	[Board list and minutes]	unmet	, docur	mentat	ion not
		provid	led		
Capacity to I	Provide Needed Services				
4.9	Does the agency have the capacity to provide the services that will		٥.		
	be needed? a) Do the services described seem adequate and appropriate and b) is the staffing pattern or subcontract plan		Stan	dard	
	adequate and appropriate? Do program staff have sufficient	☐ met	☐ ur	nmet	□ N/A
	experience and knowledge to effectively run the type of program	unmet		mentat	ion not
	applied for? [Proj. App: 3B and 4A; organizational chart]	provided			
	[oji, pp. ob ana ing organizational charty				
Administrativ		Possible	Score	Proj	ect Score
4.10	Is the administrative staff separate from the services staff? [Organizational chart]	3			
4.11	Is funding for the administrative staff stable? Is there adequate administrative staff to ensure agency stability throughout program implementation? [Budget]	3			



Section V: Project Performance

Section V Score

Possible Points Added: PSH: 14 RRH: 13 SSO: 0

Minimum Points Required or Review is Triggered: PSH: 8 RRH: 7 SSO: 0

The following project performance scores are based on CoC Annual Performance Reports (CoC-APRs) for January 1, 2017, to December 31, 2017, unless otherwise noted. All applicants that currently run a RRH or PSH program, regardless of funding source, will be scored for this section using the CoC-APR report from HMIS.

Populations Served		Possible Score	Project Scor
5.1	What is the program's unit utilization rate?		
	[compare actual units in HMIS vs. application projections]		
	95% or higher	2	
	0-94%	0	
5.2	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	,	1	
	Yes	1	
- 2	No	0	
5.3	RRH projects : what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	2	
5.4	PSH projects : what percentage of program participants exited to a permanent housing destination? (if no exits, 2 points are automatically awarded) [CoC-APR 23c]		
	Below 80%	0	
	80% or higher	2	
5.5	What percentage of program participants exited to a known destination?		
	95% or higher	1	
	0-94%	0	
5.6	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 28%	1	
5.7	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	0	
	Performance met BoS Goal: At least 75%	1	
5.8	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	0	
	Performance met BoS Goal: At least 94%	1	
12.410./0	mparable Database Participation	Possible Score	Project Score



5.9	Are all of the agency's projects that are listed in the 2018 HIC participating in HMIS? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] For Victim Service Providers only: Did the agency report all their beds for the 2018 HIC? [HIC]					
	Yes	5				
	No	0				
5.10	Does the agency commit to enter 100% of this project's beds into HMIS (with client consent)? (Note: per federal law, domestic violence programs are prohibited from using HMIS. If scoring victim service providers, see below.) [HIC] [New Project Form; interview with agency] For Victim Service Providers only: Does the agency have a	☐ met ☐ unmet provid	Thresho unme , documer	t	on no	ot
	comparable database that collects Universal Data Elements and can run required reports?					
HUD Monito						
5.11	If the agency has other existing projects, 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.	☐ met	Standar		□N	Ι/Δ
	[New Project Form; Interview with agency]	Пінес				1,77
5.12	Previous Project Spending Rates These questions are for projects that least one year at the time of the NOFA release. (percentage rounded to [Scored on APR. If APR is not available, agencies will submit a LOCCS so completed year. If agencies are spending less than 90% of funding, the explaining why the agency is underspending their grant.] Amount awarded Amount spent	o the neare reenshot o	est whole f final dra	nui w f	mber or las	-
5.13	Percentage 90+%		Standar			
3.13	referringe 30170	☐ met ☐ unmet provid	☐ unme	t		N/A ot
5.14	How many grant extensions from HUD were given in for a reason other than merging grants? (Note: only applicable for current CoC grantees) [Interview with agency or information from HUD]	☐ met ☐ unmet provid	Standar unme , documer ed	t	□ N on no	



Section '	VI: Agency's Relationship to Community	Section	VI Score	
Possible Poin Minimum Po	ts: 3 ints Required or Review is Triggered: Standards Met			
The following	in Regional Committee Activities g participation questions will be scored based on project participation ll Committees within the grant coverage area.			
6.1	Did the applicant participate in 75% of Regional Committee meetings from July 2017 – June 2018? [Regional Committee Information Form]	Standard ☐ met ☐ unmet		
6.2	Application has been presented to Regional Committee for consideration by the BoS Project Review Committee [Letter of support from Regional Committee(s)]	Threshold met unmet unmet, documentation not provided		
6.3	Participated in regional ESG planning process (participated in scoringor other ESG subcommittees) [Regional Committee Information Form]	Possible Score Project Score		
6.4	Applicant agrees to actively participate in the local Coordinated Assessment process as designed by the Regional Committee and only take referrals directly from the regional coordinated entry prioritization wait list. [New Project Form; interview with applicant]	Threshold met unmet unmet, documentation not provided		
6.5	Applicant accurately describes the process to take referrals through coordinated entry. [New Project Form]		ndard unmet	
6.6	Do all of applicant's projects on the 2018 HIC participate in the Coordinated Assessment system? Agency staff must attend any coordinated assessment meetings, including regular case conferencing, regularly. Emergency shelters must conduct prevention and diversion screens and VI-SPDATs on residents and refer all people who have received VI-SPDATs to the regional coordinated entry prioritization list.		dard unmet □N/A	
	RRH and PSH projects must only take referrals directly from the coordinated entry prioritization wait list. [Interview with region's Coordinated Assessment Lead and applicant]			



	VII: Application Deadlines and entation	Section V	/II Score
Possible Ded			
Minimum Po	oints Required or Review is Triggered: Not more than loss of -15		
Budget & Ma	atch	Possible Score	Project Score
7.1	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	
7.2	Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.]	Stan	dard □ unmet
Deadlines		Possible Score	Project Score
7.3	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published.)	-10	
7.4	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	
7.5	The online application and accompanying documents must be submitted by the deadline.	Thres	hold
7.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Thres	shold
		☐ met	unmet





North Carolina Balance of State Continuum of Care

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2018 Scorecard for CoC Funds: Renewal Projects

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

This scorecard has four goals:

- Fund organizations that have the capacity to run effective programs (can manage and administer the program, can operate on reimbursement basis, have experience serving this population or a similar one).
- Fund projects that reflect the NC BoS CoC & HUD's priorities: projects that meet community need, as outlined by the funding priorities document approved by the NC BoS CoC Steering

 Committee
- Incentivize agencies to be good partners (participating in community efforts to end homelessness, on HMIS, helping create infrastructure for their community's homeless service system to operate effectively throughout the year).
- Ensure that funded projects are being good stewards of NC BoS CoC funding and performing to NC BoS CoC standards, including descriptions in written standards and the NC BoS CoC grantee agreement.

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

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

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

PROJECT QUALITY REQUIREMENTS		
Renewal projects must receive at least the standard and minimum score in each	Maximum	DSUL 402
section. Standards and funding priorities will be used in the ranking process. If a	Score	PSH: 192 RRH: 172
standard or minimum is not met, further review will be triggered. After further	Possible:	KKH. 172
review, the Project Review Committee will determine potential consequences,		
including whether the project is ineligible for inclusion in final BoS CoC application	Project	
or will receive reduced funding. Thresholds must be met in order for the project	Score:	
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, and these two scores are averaged for each question. Find more information on the Project Review Committee in the NC BoS CoC Governance Charter: www.ncceh.org/bos.

Section I: General Application		Section	I Score
Possible Po	pints: 12		
Minimum I	Points Required or Review is Triggered: 6		
Accuracy a	nd Appropriateness of Responses	Possible Score	Project Score
1.1	Is the project description completed and accurate? [Proj. App: 3B]	3	
1.2	Are questions regarding services completed and accurate? [Proj. App: 4A]	3	
1.3	Are questions regarding outreach completed and accurate? [Proj. App: 5C]	3	
1.4	Are all questions answered thoroughly and consistently?	3	
Section II: Program Design		Section 1	II Score
Possible Po	oints: PSH: 10 RRH: 0		
Housing Fi	rst		
2.2	Is this a Housing First project? Must meet all statements below to meet standard [Proj. App: 3B, question 3d; policies and procedures]	Standard (must meet all statements below) of 2 met	
2.2a	Does the project ensure that participants are not screened out based on the following: Having too little or no income Active or history of substance abuse Having a criminal record (with exceptions for state mandated restrictions) History of domestic violence (e.g. lack of protective order, of separation from abuser, or law enforcement involvement)	☐ met ☐ unmet ☐ unmet, documentation not provided	



2.2b	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	unmet, documentation not
	Loss of income or failure to improve income	provided
	☐ Domestic violence	
	☐ Any other activity not covered in a lease agreement	
	typically found in the project's geographic area	
Key Eleme	nts of Permanent Supportive Housing	
2.5	If this project is a permanent supportive housing project, does it include the following key elements of permanent supportive housing as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) ¹ ?	Must meet all statements below of 9 met
2.5a	Leases or rental agreements do not have any provisions that would	Standard
	not be found in leases held by someone who does not have a	
	disability. [Sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5b	Participation in services is voluntary and tenants cannot be	Standard
	terminated from the program for rejecting services. [Key Element of	
	PSH form, program/house rules (if any)]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5c	House rules, if any, are similar to those found in housing for people who do not have disabilities and do not restrict visitors or otherwise	Standard
	interfere with a life in the community. [Program/house rules, policies	☐ met ☐ unmet ☐ N/A
	and procedures]	unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	
2.5d	Housing is not time-limited, and the lease is renewable at tenants'	Standard
	and owners' option. [Key Elements of PSH form, policies and	
	procedures, sample lease]	☐ met ☐ unmet ☐ N/A
		unmet, documentation not provided
	Reviewer Notes (if unmet or documentation not provided, note why):	

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



2.5e	Tenants have choices in the support services that they receive. They are asked about their choices and can choose from a range of services, and different tenants receive different types of services based on their needs and preferences. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): As needs change over time, tenants can receive more intensive or less	Standard met unmet N/A unmet, documentation not provided Standard		
	intensive support services without losing their homes. [Key Elements of PSH form, policies and procedures]	☐ met ☐ unmet ☐ N/A ☐ unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.5g	Before moving into permanent housing, tenants are asked about their housing preference and are offered the same range of choices as are available to others at their income level in the same housing market. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
2.5h	Support services promoting recovery are designed to help tenants choose, get, and keep housing. In all forms of permanent supportive housing, the staff helps tenants establish a household, meet the obligation of tenancy (such as paying rent on time), and get along with neighbors. [Key Elements of PSH form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
2.5i	The provision of housing and the provision of support services are distinct. (Note: This means that if a person is evicted from a unit, they can continue receiving services and be rehoused. Or, if the tenant refuses services or the service provider terminates services, the tenant can remain in housing.) [Key Elements of PSH form, policies and procedures, sample lease] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
Rapid Re-H	Housing Performance Benchmarks and Program Standards			
2.7	If this project is a rapid re-housing project, does it include the following program standards as defined by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs (VA), the U.S. Department of Housing and Urban Development (HUD), U.S. Interagency Council on Homelessness (USICH), and Abt Associates ² ? [RRH Program Standards Form, program eligibility requirements, sample lease, program policies and procedures]	Must meet all statements below of 15 met		

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



Standard		
met unmet N/A unmet, documentation not provided		
Standard met unmet N/A unmet, documentation not provided		
Standard met unmet N/A unmet, documentation not provided		
Standard met unmet N/A unmet, documentation not provided		
Must meet all statements below of 3 met		
Standard met unmet N/A unmet, documentation not provided		



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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided
Reviewer Notes (if unmet or documentation not provided, note why):	
Core Program Standard: Rapid Re-Housing Case Management and Services	Must meet all statements below of 4 met
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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided
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	Standard met unmet N/A unmet, documentation not provided
	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.) [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): 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. [RRH Program Standards Form, policies and procedures] Reviewer Notes (if unmet or documentation not provided, note why): Core Program Standard: Rapid Re-Housing Case Management and Services 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 manage.) [RRH Program S



	scheduled meetings.) [RRH Program Standards Form, policies and procedures]			
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.7c3	Program has clearly defined relationships with employment and income programs that it can connect program participants to when appropriate. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.7c4	Program has clearly defined policies and objective standards for when case management should continue and end. These guidelines are flexible enough to respond to the varied and changing needs of program participants. In instances where cases are continued outside of these defined policies and objective standards, there is a review and approval process. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.7d	Core Program Standard: Program Philosophy and Design	Must meet all statements below of 4 met		
2.7d1	Program staff are trained on the principles of Housing First and oriented to the basic program philosophy of rapid re-housing. Program has routine way of onboarding new staff that includes training on Housing First and rapid re-housing principles. [RRH Program Standards Form, policies and procedures]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.7d2	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. [RRH Program Standards Form, RRH Program Eligibility Criteria]	Standard met unmet N/A unmet, documentation not provided		
	Reviewer Notes (if unmet or documentation not provided, note why):			
2.7d3	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. [RRH Program Standards Form, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standard met unmet N/A unmet, documentation not provided		
	1 , 7			



2.7d4	Leases for program participants are legally binding, written leases. Leases with additional requirements, such as drug testing or program participation, are not allowed. [RRH Program Standards Form, sample lease, RRH Program Eligibility Criteria] Reviewer Notes (if unmet or documentation not provided, note why):	Standomet un un un unmet, docum provided	met
	Reviewer Notes (if unifiet or documentation not provided, note why).		
Services Fu	ınding Plan		
2.8	 While services are an important component of supporting households in maintaining their housing, HUD prioritizes using CoC program funds for housing and using other sources of available funding to provide services. Projects requesting HUD funding to provide supportive services must provide a plan on how these services will be funded in the future from alternate sources. Please include these elements: All funding sources that the project is currently using to provide supportive services and if these resources will be expanded. Other potential sources of funding that the project is working to secure to fund supportive services. A plan for when the project will reduce its use of CoC funds for services. 	Stand met un unmet, docun provided	met 🗌 N/A
Permanen	t Supportive Housing: Move-on Program	Possible Score	Project Score
2.9	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. Move-on programs 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 project. ³ Does the permanent supportive housing project have a formal move-on program? To receive full points a move-on program should include the following: • Standardized criteria to identify people who may be ready to move-on; • A formal partnership with one or more affordable housing providers (like a public housing authority); • A method to prepare tenants to move-on; • A method to link move-on tenants to mainstream services and supports; and		



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

A strategy to evaluate the effectiveness of the move-on program. cam policies]		
Yes	10	
No	0	

Staff Scoring

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

Section	n III: NC BoS CoC Priorities	Section I	II Score
Possible Po	pints: 20		
Minimum	Points Required or Review is Triggered: 11		
	ver Services		
3.1a	Total \$ request for housing activities (leased units, leased structures,		
	and/or rental assistance):		
2.41	[Proj. App.: 61]		
3.1b	Total Assistance requested (not including match or admin):		
3.1c	[Proj. App.: 61, line 6] Percentage of total budget devoted to housing activities		
3.10	(housing activities request ÷ total assistance request x 100):		%
	(Housing activities request + total assistance request x 100).	Possible Score	Project Score
	Less than 35%	0	110,000
	Between 35% and 54.9%	5	
3.1d	Between 55% and 74.9%	10	
	Between 75% and 84.9%	15	
	Between 85% and 100%	20	
Permanen	t Supportive Housing: Prioritizing Beds for Chronically Homeless Particip	ants	
3.2	Does the project have 100% of their beds prioritized for chronically	Stand	dard
	homeless participants?	☐ met ☐ un	met 🗌 N/A
	[Proj. App: 4B, CH beds]	unmet, docun	nentation not
		provided	
Section	n IV: Project Performance	Section 1	V Score
	pints Added: PSH: 150 RRH: 140		
Possible Po	pints Subtracted: PSH: -15 RRH: -15		
	Points Required or Review is Triggered: PSH: 48 RRH: 30		
The follow	ing project performance scores are based on CoC Annual Performance Re	ports (CoC-APRs)	for January 1,
2017, to D	ecember 31, 2017, unless otherwise noted.		
Population	ns Served	Possible Score	Project Score



4.1	PSH projects: What percentage of the households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 100%	0	
	100%	8	
4.2	RRH projects: What percentage of the households served by the		
4.2	projects. What percentage of the Households served by the project were composed of at least one person with a disability? [CoC-APR]		
	Less than 25%	0	
	25-49%	2	
	50-74%	4	
	75-99%	6	
	100%	8	
4.3	What percentage of the adults served by the project were veterans? [CoC-APR Q25a/b]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.4	What percentage of adults served by the project were chronically homeless? [CoC-APR Q26]		
	Less than 25%	0	
	25-49%	4	
	50-74%	8	
	75-99%	12	
	100%	16	
4.5	What is the program's unit utilization rate? [compare actual units in HMIS vs. application projections]		
	0-79%	-5	
	80-94%	0	
	95% or higher	5	
4.6	Did 100% of program participants enter the program from an eligible situation? [if participants found ineligible, staff will follow up with grantee to determine eligibility]		
	Yes	0	
	No	-5	
4.7	RRH projects: what percentage of program participants exited to a permanent housing destination? [CoC-APR 23a/b]		
	Below 80%	0	
	Performance met RRH Performance Benchmark Goal: At least 80%	15	
4.8	PSH projects: what percentage of program participants exited to a permanent housing destination? (if no exits, 10 points are automatically awarded) [CoC-APR 23c]		
	automatically awarded [coc 711 / 200]		
	Below 80%	0	



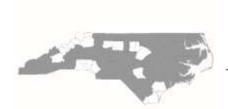
4.9	What percentage of program participants exited to a known		
	destination?	_	
	95% or higher	5	
	80-94%	0	
4.40	0-79%	-5	
4.10	What percentage of program participants were employed at program exit? [CoC-APR Q18]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 28%	15	
4.11	What percentage of program participants were receiving mainstream benefits at program exit? [CoC-APR Q20b]		
	Performance met HUD Goal: At least 20%	5	
	Performance met BoS Goal: At least 75%	15	
4.12	PSH projects : what percentage of program participants remained in the program for 6 months or longer? [CoC-APR 22a]		
	Performance met HUD Goal: At least 80%	5	
	Performance met BoS Goal: At least 94%	15	
	cipation Il law domestic violence programs are prohibited from using HMIS and from this section)	Possible Score	Project Score
4.13	HMIS Data Completeness		
4.13	[0640 – HUD Data Quality Report Framework Report, Q2-Q5]		
	0-10%	15	
	Above 10%	0	
4.14	Are all of the agency's projects that are listed in the 2017 HIC participating in HMIS? [HIC]		
	Yes	5	
	No	0	
4.15	Did the program submit their APR on or before the designated deadline?		
	Yes	5	
	No	0	
4.16	Did program staff adhere to the APR review process with CoC staff?		
	Yes	5	
	No	0	
HUD Moni			
4.17	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. [Interview with agency]	Stan	dard □ unmet
4.18	Previous Project Spending Rates These questions are for projects that hone year at the time of the NOFA release. (percentage rounded to the national spending of the NOFA release) [Scored on APR. If APR is not available, agencies will submit a LOCCS screeced or agencies are spending less than 90% of funding, they explaining why the agency is underspending their grant.] Amount awarded	nearest whole nu eenshot of final o	mber) Iraw for last
	Amount spent		



4.19	Percentage 90+%	Stand	dard
	(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.)	☐ met ☐ un☐ un☐ unmet, docun provided	
4.20	How many grant extensions from HUD were given in for a reason other than merging grants? [Interview with agency or information from HUD]	Possible Score	Project Score
		15 0	
	2+	further review	
Coordinate	ed Assessment and Prioritization		
4.21	Does the program fill all open slots directly from the coordinated entry prioritization wait list? [Interviews with Regional Committee CA Lead and agency]	Stand met	dard unmet
4.22	Permanent Supportive Housing: Has the program adopted HUD's prioritization policy as outlined in HUD Notice CPD-16-011 and added it to their program policies? [Program policies]	Stand met ur	dard Imet
	n V: Application Deadlines and nentation	Section	V Score
Possible De	eductions: -25		
Minimum	Points Required or Review is Triggered: Not more than loss of -15		
Budget & I	Match	Possible Score	Project Score
5.1	If questions regarding the budget are not complete and accurate, subtract up to 5 points.	-5	
5.2	Do match letters sufficiently document the required match for the project type? [Match amounts are based on documentation submitted by the applicant by the submission deadline. Information submitted after the deadline will not be included in the scoring of these sections.]	Stand met	dard □ unmet
Deadlines		Possible Score	Project Score
5.3	If the online application was NOT completed correctly, subtract up to 10 points. (Specific dates for deadlines will be clarified as the NOFA timeline is discerned or published.)	-10	·
5.4	If required accompanying documents were NOT completed correctly, subtract up to 10 points.	-10	
5.5	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.	Stand met	dard □ unmet



5.6	Was the signed NC BoS CoC Grantee Agreement submitted?	Threshold met unmet



North Carolina Balance of State Continuum of Care

bos@ncceh.org

919.755.4393

www.ncceh.org/BoS

2018 Funding Priorities for Continuum of Care Competition

Introduction

This document outlines the North Carolina Balance of State Continuum of Care's (NC BoS CoC) priorities for the 2018 Continuum of Care funding competition.

In addition to applying the approved new and renewal scorecards, the Project Review Committee should consider these priorities in its review and ranking of projects in the 2018 competition:

- Ensure essential infrastructure elements are in place, including HMIS and coordinated assessment
- Ensure adequate coverage of permanent supportive housing across the CoC
- Increase the availability of rapid re-housing
- Ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance

Section I of this document summarizes the history of how the NC BoS CoC has prioritized projects for funding in the past and the Funding and Performance Subcommittee's process to arrive at the priorities for the 2018 competition. Section II explains each funding priority. Section III provides additional guidance to the Project Review Committee about how to implement these funding priorities during the rank and review process, including a detailed grid that sets priorities for new projects by project type and region.

Section I: Funding Priorities Background and Process

As part of the annual CoC competition, each CoC is required to submit a project listing to HUD that lists its new and renewal projects in order of priority. The NC BoS CoC's project ranking and review process, conducted by the Project Review Committee, determines which projects are included in the application to HUD and the order in which they are listed. Projects high on the list are likely to be funded by HUD, while projects lowest on the list run the risk of not receiving funding.

The NC BoS CoC's ranking and review process has two steps: first, the CoC reviews all projects using a standardized scorecard; second, the Project Review Committee ranks projects based on the scores and other CoC priorities. In the past few years, these CoC priorities have largely been based on HUD's priorities.

The Scorecard Committee has also set priorities when designing the annual new and renewal scorecards. Scorecards reward projects for better performance, adhering to best practice program design standards, targeting specific homeless subpopulations such as chronically homeless individuals and families, and prioritizing allocated dollars for direct housing assistance over services. The NC BoS CoC's current portfolio reflects this history of priority-setting. Aligned with HUD priorities, the NC BoS CoC's portfolio is all permanent housing projects (PSH and RRH) except for one HMIS project.

The NC BoS CoC set CoC funding priorities for the first time in 2017. In 2018 the CoC formed a standing Funding and Performance Subcommittee, which sets funding priorities and examines other aspects of CoC performance. The Subcommittee reviewed the 2017 funding priorities and determined that they still apply for 2018, so only made minor changes.

The Subcommittee set general goals for the priority-setting process:

- Base funding priorities on the needs of the NC BoS CoC as a whole, without privileging specific communities;
- Help the Steering Committee and Project Review Committee think more broadly about the CoC;
- Stay open-minded about what needs to change to end homelessness;
- Better understand the CoC's needs;
- Provide tools and support to help the Steering Committee and Project Review Committee make good decisions for the CoC; and
- Establish a framework to help implement the funding priorities.

The Subcommittee examined data on current funding and needs across the CoC, which revealed three overarching issues, none of which were satisfactorily addressed in the 2017 competition:

- 1) There are resource gaps in certain areas, especially in a few regions that have little to no permanent supportive housing.
- 2) Resources are not distributed in a way that matches the distribution of need across the CoC.
- 3) CoC-funded rapid re-housing only exists in three of the thirteen regions.

The Subcommittee aimed to address geographical gaps in funding so everyone in the CoC has an option for permanent housing, no matter in which county they live. The Subcommittee also wanted to ensure that grantees spend all allocated funding each year, since underspent funds are returned to HUD instead of being used to assist people in the CoC. The workgroup also identified HMIS and coordinated assessment as priorities for new and continued funding because the NC BoS CoC needs this infrastructure to work well and to support HUD's requirements of all CoC and ESG grantees and other homeless service providers.

Section II: Funding Priorities

Ensure essential infrastructure elements are in place, including HMIS and coordinated assessment

A robust Homeless Management Information System (HMIS) and coordinated assessment system are key elements of a well-functioning CoC, and HUD requires all CoC and ESG grantees to participate in both. The Project Review Committee should put a high priority on funding both projects.

CoC funding for HMIS pays for the basic software system that collects administrative data on people served and services provided in the CoC and funds necessary staff to support and train participating agencies, complete mandated reporting to HUD, and help the CoC use its data to improve its work. In the past, the Project Review Committee has ranked the HMIS project first in the CoC competition to protect this basic infrastructure. The Project Review Committee should continue to consider funding HMIS a high priority in the 2017 CoC competition.

The NC BoS CoC was awarded its first CoC-funded coordinated assessment project in 2017, but at a lower amount than originally requested. The SSO-CE project that was awarded will not provide enough

funding to fund coordinated assessment in every Regional Committee. Providing additional funding for coordinated assessment in the NC BoS CoC would only be possible through additional reallocation. Coordinated assessment targets resources effectively and efficiently, increases access to homeless services, assists the CoC to identify gaps in its system, and helps providers better coordinate services. Since coordinated assessment is such an integral piece of the CoC, only projects that would cover all 79 counties of the CoC should be eligible for funding. If new funding is available for coordinated assessment through reallocation, the Project Review Committee should consider it a high priority.

Ensure adequate coverage of permanent supportive housing across the CoC

CoC funding is the only major public source for permanent supportive housing (PSH), which provides long-term financial assistance and intensive service supports to the most vulnerable households. The NC BoS CoC has always prioritized PSH and should continue to prioritize this key housing intervention in the CoC funding competition.

In the 2018 competition, the Project Review Committee should prioritize new PSH projects in the geographic areas that have significant unmet needs for PSH so all vulnerable people experiencing homelessness, regardless of their location in the CoC, have the option to live in permanent supportive housing (see Table 1: New Projects Priority Grid, below, for detailed explanation of which regions should have a priority for new PSH).

The Project Review Committee should prioritize current PSH grants as long as these projects meet the threshold spending rates (90% or above). PSH projects that currently underspend their funding and have made no attempt to correct the problem by serving additional counties, streamlining intake processes, or conducting more outreach should be considered for partial reallocation.

Increase the availability of rapid re-housing

A healthy homeless service system must have a good mix of permanent supportive housing and rapid rehousing (RRH) resources. PSH and RRH work together to create flow through the system. RRH helps move households quickly out of shelters and off the streets and allows PSH to focus on households with the highest needs. Households in RRH projects can transition to PSH if more support is needed, but most find stability within the two years of assistance that RRH can provide. While the NC BoS CoC portfolio currently includes 5 RRH projects, RRH should be increased across the CoC. In all regions, the CoC recommends that the Project Review Committee prioritize rapid re-housing for new funding (see Table 1 below for detailed priorities by region).

However, because other public funding sources can pay for RRH (i.e. Emergency Solutions Grants or Supportive Services for Veteran Families), the NC BoS CoC should reserve CoC funding to bring RRH programs to scale only after other funding sources have been used in a region. The scorecard already supports this principle: new RRH applicants must have used ESG or other funding source for RRH before applying for CoC funds. Regions should maximize the amount of ESG funding dedicated to RRH. CoC funding should never become the only source of funding for RRH.

The NC BoS CoC will not fund new joint Transitional Housing-Rapid Rehousing projects during the 2018 CoC Competition. The CoC should focus on bringing rapid rehousing to scale before introducing new program types. TH-RRH joint component projects are intended for areas with large unmet needs for shelter and for some groups for which a brief period in transitional housing could be beneficial. These

projects will be held to different standards than traditional transitional housing, with an emphasis on brief stays in TH. The NC BoS CoC has available Emergency Solutions Grants funding to meet unmet shelter needs, and agencies in the CoC need to focus on improving access to current RRH projects before exploring new program models.

Ensure CoC funding is being used well, including potentially re-allocating some funding from projects that have patterns of low spending or poor performance

Since CoC funding is limited, the CoC should put a high priority on projects that maximize the funding they receive. Projects should:

- Spend as much of their funding as possible, reaching at least a 90% threshold;
- Target and serve people with the highest needs;
- Produce strong outcomes; and
- Meet the community's and CoC's needs.

The Scorecard Committee should make each of these items part of the 2018 new and renewal scorecards. Projects that do not meet some or all of these criteria should receive a reduced score and should be ranked accordingly. In addition to ranking, if a renewal project has a pattern of low spending, the Project Review Committee should consider reallocating some or all of that project's funding. Projects should consistently spend at least 90% of their funding. The CoC has a responsibility to find new, more effective projects if current projects cannot spend their allocated funding.

The NC BoS CoC will not fund projects that request acquisition, rehabilitation, or new construction funding. There is too little new funding available to the CoC each year to justify the large investment these activities would require. Agencies that need these types of funding should use other sources of federal, state, and local funding and focus CoC funding on activities that more quickly benefit people experiencing homelessness.

Section III. Additional Guidance on Implementing Priorities Project Review and Ranking Process

The Project Review Committee considers multiple factors when determining project rankings, including the priority of the project, the project's performance on the scorecard, and whether the project is a new project or renewal project. This year, even with detailed funding priorities, the PRC should continue to take all these factors into account when determining a project's ranking.

There are three ways the scorecards affect project ranking: points, standards, and thresholds. If a project does not meet a threshold, it is not eligible for funding. If a project does not meet the required minimum number of points or does not meet the standards, the Project Review Committee may lower the project's ranking, remove the project from the competition altogether, or recommend reducing its funding. Receiving more points than other projects can also increase a project's ranking.

This year, the priorities in this document will also help determine project rankings. New project priorities, as outlined in Table 1: New Projects Priority Grid below, will be recorded on the new project scorecard. The Project Review Committee should rank projects highly if they are *both* a high priority and perform well on the scorecard. Balancing a project's priority with its scorecard performance ensures

that funding goes to projects that meet best practices, perform well, and will have a sustained impact on homelessness in the CoC.

The Project Review Committee has historically ranked renewal projects ahead of new projects, with few exceptions. The priorities in this document may result in ranking some high-priority new projects ahead of renewal projects, especially if there are renewal projects that have consistently performed poorly or underspent their funds. In such cases, the Project Review Committee should consider the potentially detrimental geographic effect of ranking renewal projects low. In regions with very few projects, giving a renewal project a low rank could put almost all the funding for a region at-risk. The Project Review Committee should examine the Regional Committee's and the agency's ability to prevent current participants from becoming homeless in the case of a large or full reallocation. On the other hand, the PRC should consider the additional people new projects could help in a region, especially in regions with very few current housing assistance resources.

Priorities for New Projects

As stated above, a state-wide coordinated assessment project should be a high priority new project for reallocated funding. New RRH and PSH projects should be prioritized based on the grid below. In this grid, projects can be Priority 1, Priority 2, Priority 3, or No Priority. The Project Review Committee should take these priorities into account when ranking projects, but, as explained above, the priorities below should not be the only factor that determines a project's ranking. If projects are No Priority, the Project Review Committee should not recommend these projects for funding unless money is left unallocated in the competition.

Table 1: New Projects Priority Grid

Region	RRH	PSH
1	2	3
2	2	1
3	2	3
4	2	1
5	3	3
6	3	3
7	2	1
8	2	1
9	2	No Priority
10	2	3
11	2	3
12	2	No Priority
13	2	3

This grid aims to build a strong foundation for the future of the CoC. The performance of the CoC on future funding applications and the ability of the CoC to meet goals such as ending Veteran homelessness or implementing coordinated assessment can be hurt when some areas have extremely

low resources. Additionally, no one should find themselves homeless in a county that completely lacks homeless assistance. This grid tries to establish a baseline level of funding for PSH and RRH across all 79 counties in the NC BoS CoC.

Below is a brief explanation of the priorities (see the appendix for more detailed methodology):

Priority 1: PSH in regions that need a significant increase in PSH units to meet the need.

Priority 2: RRH in all regions that do not already have CoC-funded RRH.

Priority 3: RRH in regions that already have CoC-funded RRH and PSH in regions that have some unmet need.

Appendix: New Priorities Grid Sources and Methods

Priorities for PSH were determined based on a measure of the existing stock of PSH and whether it meets the current need. The table below outlines the data used to calculate the need for PSH in each region. Priority 1 regions have more unmet need (column D) than existing PSH beds (column A), implying that they would have to significantly increase their stock of PSH to meet the need. Priority 3 regions have some need for PSH but less than their current stock of PSH beds, implying that a relatively small increase in PSH in those regions would meet the need. RRH is Priority 2 in regions that have no CoCfunded RRH (column E) and in Region 7 because it has the lowest overall amount of CoC funding (column F). RRH in the remaining regions, which already have CoC-funded RRH (regions 5 and 6), are Priority 3.

	Column A	Column B	Column C	Column D	Column E	Column F
Region	Existing PSH	Annual PSH	Annualized	Unmet need	RRH	Total CoC
	beds	turnover beds	number of people	for PSH	funding	funding
			experiencing			
			chronic			
			homelessness			
1	74	11	27	16	\$0	\$375,842
2	30	5	86	81	\$0	\$256,549
3	109	16	36	20	\$0	\$554,084
4	50	8	59	51	\$0	\$263,714
5	170	26	47	21	\$325,345	\$1,434,009
6	153	23	40	17	\$451,818	\$1,444,521
7	1	0	57	57	\$0	\$3,909
8	33	5	43	38	\$0	\$143,854
9	192	29	7	None	\$0	\$1,048,346
10	105	16	35	19	\$0	\$501,849
11	31	5	7	2	\$0	\$164,444
12	226	34	21	None	\$0	\$1,333,113
13	53	8	33	25	\$0	\$281,904

NCCEH staff calculated Column D (unmet need for PSH) using the following methodology:

- Staff calculated the number of existing PSH beds (column A) by multiplying the number of PSH
 units in each region (as reported on the HUD funding applications) by their corresponding
 number of bedrooms. For example, a region with one 1-bedroom unit and two 2-bedroom units
 would have five beds.
- Then staff estimated the number of PSH beds that would become available during a year (column B) using a reasonable estimate of annual turnover. The turnover rate was assumed to be 15% for all projects, the same rate used in the United States Interagency Council on Homelessness's <u>Supportive Housing Opportunities Planner (SHOP)</u> tool.
- Next, to estimate the need for PSH during a full year, staff multiplied the number of people counted as chronically homelessness during the 2017 Point-in-Time Count by 1.3 (column C).
 This annualization factor is also used in USICH's SHOP tool. This number estimates the total need for PSH in a region.





FY2018 CoC Intent to Apply - NC Balance of State CoC

If you are interested in applying for a new (not renewal) project in NC Balance of State Continuum of Care in the FY2018 CoC competition, please fill out this form. NCCEH staff will be in touch to discuss your proposal.

It is mandatory that all agencies wanting to apply for new CoC funding complete an Intent to Apply this year. The deadline to apply is 1 week after the release of the CoC Competition Notice of Funding Availability (NOFA).

Agency Info Agency * Website Agency Type * Address * Tax ID or EIN **DUNS Number** Non-profits only: Status Documentation Does the agency receive ESG, SSVF or CoC funds? * Has the applicant ever received a federal grant? * If yes, what type of federal grant?

Does your agency	v enter data into NC HMIS? *
•	
Contact Info	
Please enter inform	nation for the primary contact for this project. NCCEH staff will follow
	to discuss the proposed project.
Name *	
ivaliie	
Title *	
Phone *	
Email *	
	nt *
Project Compone	nt * ct are you interested in applying for? ▼
Project Compone What type of projec	ct are you interested in applying for?
Project Compone What type of projec	et are you interested in applying for? ▼
Project Compone What type of projec	et are you interested in applying for? ▼
What counties wil	t are you interested in applying for? ▼ I be served by this project? *
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Project Compone What type of project What counties will What household t How many house Will the project ta	I be served by this project?* ype(s) will this project serve?* holds do you plan to serve per year?* rget specific populations?*

Dedicated Chronically Homeless Check this box if the program will only serve chronically homeless people. Veterans Check this box if your project will! serve veterans. Other specific populations: Will your project serve other specific populations? If so, list here.
Check this box if your project willl serve veterans. Other specific populations:
Check this box if your project willl serve veterans. Other specific populations:
Will the project follow the Housing First model? * ▼
Please provide a short description of the project. *
What local gaps/needs will this project fill? *
 Budget
Please complete the budget for the entire grant term you are requesting. For instance if you are requesting a 2-year grant term, complete the budget with the total 2-year amounts. For guidance on the listed budget categories, please refer to HUD's Interim Rule: https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormaedVersion.pdf The program components and eligible costs are under Subpart D.
Grant term *
•
New Construction \$ Request
Acquisition \$ Request
Rehabilitation \$ Request
Leasing \$ Request

Rental Assistance \$ Request
Supportive Services \$ Request
Operating \$ Request
HMIS \$ Request
Total \$ Request *
Match Sources * CoC grants require a 25% cash or in-kind match. Please list the sources of match for your proposed project.
Regional Committee Info What is your Regional Committee? *
Who is your Regional Lead? *
Who from your agency attends Reg. Com. meetings?*
Have you introduced the project to your Reg. Com.? * ▼
What input has the Reg. Com. given on the project?
Send me a copy of my responses

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CoC Application: Project Listing Approval

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

Fri, Aug 31, 2018 at 9:27 AM

To: Emily Carmody <emily@ncceh.org>, Matthew McDowell <matt@ncceh.org>
Cc: NC Balance of State CoC <box@ncceh.org>

Dear NCCEH,

The NC BoS CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- Twenty-nine approved without changes

Four new project applications

- Rapid Re-Housing project submitted by Pitt County Planning serving Pitt County
- · Rapid Re-Housing project submitted by Union County Community Shelter
- Rapid Re-Housing for Domestic Violence Bonus Funding submitted by NC Coalition Against Domestic Violence
- SSO-Coordinated Entry project submitted by NCCEH serving all BoS counties

Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

Balance of State CoC Team

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

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments



NCCEH_ SSO-CE Expansion Grant _New scorecard.pdf



CoC Application: Project Listing Approval

NC Balance of State CoC

To: Amy Modlin <amy.modlin@trilliumnc.org>

Cc: NC Balance of State CoC

Coc

Fri, Aug 31, 2018 at 9:20 AM

Dear Trillium,

The BoS Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
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Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

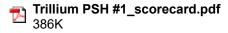
Balance of State CoC Team

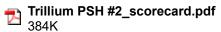
North Carolina Coalition to End Homelessness
(919) 755-4393

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

3 attachments





Trillium PSH #3_scorecard.pdf



CoC Application: Project Listing Approval

NC Balance of State CoC

To: Lori Watts

Iorelei.watts@vayahealth.com>

Co: NC Balance of State CoC

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NC Balance of State CoC

In the state of State CoC

In the sta

Fri, Aug 31, 2018 at 9:24 AM

Dear Vaya Health,

The NC BoS CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- Twenty-nine approved without changes

Four new project applications

- Rapid Re-Housing project submitted by Pitt County Planning serving Pitt County
- · Rapid Re-Housing project submitted by Union County Community Shelter
- Rapid Re-Housing for Domestic Violence Bonus Funding submitted by NC Coalition Against Domestic Violence
- SSO-Coordinated Entry project submitted by NCCEH serving all BoS counties

Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

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

3 attachments



Vaya Health PSH Central Combo_scorecard.pdf

Vaya Health PSH Western Combo_scorecard.pdf 386K



CoC Application: Project Listing Approval

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

Fri, Aug 31, 2018 at 9:22 AM

To: Kathy Bragg <kathy.bragg@unionshelter.org>, Melissa McKeown <melissa.mckeown@unionshelter.org> Cc: NC Balance of State CoC

Coc

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Dear Union County Community Shelter,

The NC BoS CoC Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- Twenty-nine approved without changes

Four new project applications

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Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

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

Rapid Re-housing UCCS_new scorecard.pdf



CoC Application: Project Listing Approval

NC Balance of State CoC

To: Kristen Martin

Kmartin@thrive4health.org>

Cc: NC Balance of State CoC

Coc <

Fri, Aug 31, 2018 at 9:18 AM

Dear Thrive,

The BoS Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- · Twenty-nine approved without changes

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Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

Balance of State CoC Team

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

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments

Thrive_pathways to permanent housing 3_scorecard.pdf 388K

Thrive_Pathways to Permanent Housing Henderson County_scorecard.pdf



CoC Application: Project Listing Approval

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

Fri, Aug 31, 2018 at 9:14 AM

To: tamara.veit@yahoo.com

Cc: NC Balance of State CoC <box@ncceh.org>

Dear Surry Homeless and Affordable Housing Coalition,

The BoS Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- · Twenty-nine approved without changes

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Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

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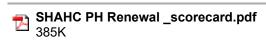
Thank you,

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





CoC Application: Project Listing Approval

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

Fri, Aug 31, 2018 at 9:16 AM

To: mfahrer@newrha.org

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

Dear New Reidsville Housing Authority,

The BoS Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
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Please find attached the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

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





CoC Application: Project Listing Approved

NC Balance of State CoC

To: Amy Steele <amysteele67@gmail.com>

Cc: NC Balance of State CoC

Coc <br/

Fri, Aug 31, 2018 at 9:12 AM

Dear Rockingham County Help for the Homeless,

The BoS Steering Committee met yesterday to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

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Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

Balance of State CoC Team

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

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments

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RCHH Permanent Supportive Housing Renewal_scorecard.pdf

RCHH Rapid Re-Housing Renewal _scorecard.pdf 386K



CoC Application: Project Listing Approval

NC Balance of State CoC

To: "James, Lynne" <lynne.james@pittcountync.gov>

Cc: NC Balance of State CoC

bos@ncceh.org>

Fri, Aug 31, 2018 at 9:07 AM

Dear Pitt County Planning,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

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- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- Twenty-nine approved without changes

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Thank you,

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





CoC Application: Project Listing Approval

NC Balance of State CoC

To: crowe@nccadv.org, Dana Mangum

dmangum@nccadv.org>

Cc: NC Balance of State CoC

bos@ncceh.org>

Fri, Aug 31, 2018 at 9:03 AM

Dear NC Coalition Against Domestic Violence,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

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Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

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

NCCADV_NC IPV Survivor Housing Solutions_ scorecard.pdf



CoC Application: Project Listing Approved

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

Fri, Aug 31, 2018 at 9:00 AM

To: bestmo@ghanc.net

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

Dear Housing Authority of Greenville,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

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Thank you,

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

5 attachments

Greenville HA_Project Hope Renewal scorecard.pdf

Greenville HA_Project Stable Solutions_scorecard.pdf

Greenville Housing Authority_Seeds of Change Renewal-] _scorecard.pdf 385K

Greenville HA_Solid Ground Renewal_scorecard.pdf 386K

NC BoS CoC appeals process.pdf



CoC Application: Project Listing Approved

NC Balance of State CoC <bos@ncceh.org> To: Nikki Ratliff <nratliff@burlingtonha.org> Cc: NC Balance of State CoC <bos@ncceh.org> Fri, Aug 31, 2018 at 8:57 AM

Dear Burlington Development Corporation,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

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- Two fully reallocated: Allied Churches of Alamance RRH, Eastpointe Beacon II PSH
- Twenty-nine approved without changes

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- SSO-Coordinated Entry project submitted by NCCEH serving all BoS counties

Please find attache the scorecard for your corresponding project(s). The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last weeks. We look forward to continuing to work with you all.

Thank you,

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

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments



BDC_Steps_ Scorecard.pdf



CoC Application: Project Listing Approved

NC Balance of State CoC

To: Teena Willis <TWillis@partnersbhm.org>

Cc: NC Balance of State CoC

Coc

Fri, Aug 31, 2018 at 9:04 AM

Partners Behavioral Health Management,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. The ranked list includes:

Thirty-two renewal project applications

- Three partially reallocated: Community Link Kerr Tarr PSH Renewal, Community Link PBH 2012 PSH Renewal, and Eastpointe Southeast SPC Renewal
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Thank you,

Balance of State CoC Team

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

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care





Bos Project Application Listing

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

To: SFVC-DIR <sfvc@ncrrbiz.com>

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

Fri, Aug 31, 2018 at 8:34 AM

Dear Robeson County Committee on Domestic Violence,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes.

The new SFVC RRH Program was not included in the final ranked list. The Project Review and Steering Committees decided to not include this project because it missed high numbers of standards and scorecard section minimums compared to other projects (new and renewal, respectively) in the competition and decided to fund new projects they felt would be more effective at ending homelessness.

12 Standards missed (1 waived)

Q2.3 Standard: Sub population narrative did not provide adequate information

Q2.15 RRH Benchmarks: 10/15 missed Q7.2: Match Documentation: waived for all

4 Section Minimums missed

Section 2: Program Design Section 3: Scope of Services Section 5: Project Performance

Section 7: Application was not completed correctly and documents were missing

Score

Total application received a 26.8/85

The Steering Committee voted to make an appeals process available to applicants whose projects were not included in the ranked list. Please see the attached document for an explanation of the appeals process.

Thank you,

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

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments

SFVC Rapid Re-housing Program_new scorecard.pdf 415K

NC BoS CoC appeals process.pdf 131K



BoS Project Application Listing

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

Fri, Aug 31, 2018 at 7:58 AM

To: Richard Gary <rgary@alliedchurches.org> Cc: NC Balance of State CoC <bos@ncceh.org>

Dear Richard,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes.

Neither ACAC CoC Rapid Re-Housing Renewal 2018 nor the ACAC CoC Rapid Re-Housing New Project were not included in the final ranked list. The Project Review and Steering Committees decided to not include these projects because they had the highest numbers of standards and scorecard section minimums missed of all projects (new and renewal, respectively) in the competition and decided to fund new projects they felt would be more effective at ending homelessness.

Allied Churches RRH Renewal

14 Standards missed (1 waived); 3 section minimums missed (2 waived)

Q2.2 Standard: The program is not Housing First

Q2.7 RRH Benchmarks and Standards: section had 11/15 standards unmet

Q4.21 Standard: No Coordinated Entry system Q5.2: Match Documentation: waived for all

3 Minimums missed

Section 3: NC BoS CoC Priorities: waived for all

Section 4: Project Performance

Section 5: Application was not completed correctly and documents were not correct: waived for all

Score

Total application received a 20/172 points

Allied Churches RRH New

15 Standards missed (2 waived); 2 section minimums missed

Q2.12 Services Plan: not provided: waived for all

Q2.7 RRH Benchmarks and Standards: section had 11/15 unmet

Q6.5 Standard: No Coordinated Entry system Q6.6: Standard: No Coordinated Entry system Q7.2 Match Documentation: waived for all

2 Minimums missed

Section 5: Project Performance

Section 7: Application was not completed correctly and documents were not correct

Total application received a 26.5/85 points

The Steering Committee voted to make an appeals process available to applicants whose projects were not included in the ranked list. Please see the attached document for an explanation of the appeals process.

Thank you,

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

3 attachments



New Rapid Re-housing Program 2018_Scorecard.pdf 417K

NC BoS CoC appeals process.pdf 131K



BoS Project Application Listing

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

Thu, Aug 30, 2018 at 4:59 PM

To: "Dewitt, Nicole" <nicoled@communitylinknc.org>, "Rice, Jr., Harold" <haroldr@communitylink-nc.org> Cc: NC Balance of State CoC <box@ncceh.org>

Dear Community Link,

The NC BoS CoC Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. Listed below are the affects of the Priority Listing on your grants.

Reallocation

Kerr Tar Renewal 2018

The Steering Committee chose to reallocate 15% of the funds from Kerr Tar Renewal 2018. This project has spent less than 59% of its allocated funds in the last year. Project Review and Steering Committee members decided to reallocate 15% of the renewal budget for new applications because of the grant's history of underspending and returning dollars to HUD. With this 15% reallocation, the maximum budget that can be requested for Kerr Tar Renewal 2018 is \$795,501. The application in esnaps will need to be revised to reflect this amount.

2. PBH 2012 PSH Renewal

The Steering Committee chose to reallocate 20% of the funds from PBH 2012 PSH Renewal. This project has spent 44% of its allocated funds in the last year. Project Review and Steering Committee members decided to reallocated 20% of the renewal budget for new applications because of the grant's history of underspending and returning dollars to HUD. With this 20% reallocation, the maximum budget that can be requested for PBH 2012 PSH Renewal is \$543,875. The application in esnaps will need to be revised to reflect this amount.

The Steering Committee voted to make an appeals process available to applicants whose projects whose funding was reallocated. Please see the attached document for an explanation of the appeals process.

If Community Link chooses to take the option below to apply for a new expansion grant, the agency cannot submit an appeal.

Community Link has the option to apply for a new expansion grant in the amount of the reallocated dollars from the two grants above (approximately \$276,351). The agency would need to create a new application, mark the application as an expansion and then choose which grant renewal for which this new application would expand. Eastpointe can choose to expand any of its current grants, but the amount in the application should not exceed the reallocated amount. Community Link also will need to submit new match documentation per the new CoC application instructions on the website. The new expanded application with match documents along with the revised Kerr Tar Renewal 2018 and PBH2012 PSH Renewal applications must be submitted to bos@ncceh.org by 5 PM on Tuesday, September 4. Please let staff know if you have specific questions about the changes that are needed or the new expansion application.

Approvals

- 1. Community Link Permanent Supportive Housing-Renewal-2018 (\$250,109)
- 2. Community Link PBH 2011 Shelter Plus Care Program (\$178,577)
- 3. Community Link AC 1 Renewal 2018 (\$288,085)
- 4. Community Link Chatham Person 1 Renewal 2018 (\$124,521)
- 5. Community Link Community Link Rapid Rehousing-Renewal- 2018 (\$325,345)

The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last few weeks. We look forward to continuing to work with you all.

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

8 attachments



CL_AC 1 Renewal 2018_ scorecard.pdf 384K

CL_PBH 2011 SPC _scorecard.pdf 384K

CL_Kerr Tar PH Renewal scorecard.pdf

CL_PBH 2012 Renewal PSH _Scorecard.pdf 386K

Community Link_Chatham Person Scorecard.pdf

Community Link- PRC-Permanent Supportive Housing- Renewal-2018_scorecard.pdf 385K

Community Link-PRC-Rapid Rehousing-Renewal_scorecard.pdf



BoS Project Application Listing

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

Thu, Aug 30, 2018 at 4:54 PM

To: LaTasha McNair tmcnair@eastpointe.net, NC Balance of State CoC

tocolog>

Dear LaTasha,

The NC BoS CoC Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes. Listed below are the affects of the Priority Listing on your grants.

Reallocation

1. Eastpointe Shelter Plus Care Southeast - Renewal 2018

The Steering Committee chose to reallocate 50% of the funds from Eastpointe Shelter Plus Care Southeast - Renewal 2018. This project has spent 0% of its allocated funds since being awarded in the FY2016 CoC competition. Project Review and Steering Committee members felt that due to the grantees inability to get the grants started and find eligible households to house, a portion of the budget should be reallocated With this 50% reallocation, the maximum budget that can be requested for Eastpointe's SPC Southeast - Renewal 2018 is \$71,927. The application in esnaps will need to be revised to reflect this amount so as not to exceed the \$71,927 amount.

2. Eastpointe Shelter Plus Care Beacon II-Renewal 2018

The Steering Committee chose to reallocate 100% of the funds from Eastpointe Shelter Plus Care Beacon II - Renewal 2018. This project has spent 0% of its allocated funds in the last two years since being awarded in the FY2016 CoC competition. Project Review and Steering Committee members felt that due Eastpointe having another PSH grant (Beacon SPC) in the same catchment area that is underspent and the agency's inability to start the new grant awarded in FY2016 that the entire renewal budget should be reallocated for other new projects.

The Steering Committee voted to make an appeals process available to applicants whose projects whose funding was reallocated. Please see the attached document for an explanation of the appeals process.

If Eastpointe chooses to take the option below to apply for an new expansion grant, the agency cannot submit an appeal.

Eastpointe has the option to apply for a new expansion grant in the amount of the reallocated dollars from the two grants above (approximately \$139,341). The agency would need to create a new application, mark the application as an expansion and then choose which grant renewal for which this new application would expand. Eastpointe can choose to expand any of its current grants, but the amount in the application should not exceed the reallocated amount. Eastpointe also will need to submit new match documentation per the new CoC application instructions on the website. The new expanded application with match documents along with the revised SPC - Southeast renewal application must be submitted to bos@ncceh.org by 5 PM on Tuesday, September 4. Please let staff know if you have specific questions about the changes that are needed or the new expansion application.

Approvals

- 1. Eastpointe Human Services Eastpointe Shelter Plus Care Beacon Renewal 2018 (\$53,799)
- 2. Eastpointe Human Services Eastpointe Shelter Plus Care 3 Renewal 2018 (\$236,187)
- 3. Eastpointe Human Services Eastpointe Shelter Plus Care -Combined Renewal 2018 (\$162,203)

The ranked list of project applications as approved by the Steering Committee is posted on the BoS minutes webpage: http://www.ncceh.org/bosminutes/

Thank you all for your hard work on your applications over the last few weeks. We look forward to continuing to work with you all.

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

6 attachments



Eastpointe Shelter Plus Care Beacon Renewal _scorecard.pdf 385K

Eastpointe Shelter Plus Care -Combined -Renewal_scorecard.pdf

Eastpointe Shelter Plus Care Beacon II Renewal 2018_scorecard.pdf

Eastpointe Shelter Plus Care Southeast-Renewal 2018_scorecard.pdf

NC BoS CoC appeals process.pdf 131K



BoS Project Application Listing

NC Balance of State CoC

State CoC

To: Michele Knapp

Michele Knapp <b

Fri, Aug 31, 2018 at 8:21 AM

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

Dear Diakonos,

The BoS Steering Committee met earlier today to review and vote on the ranked list of project applications that was proposed by the Project Review Committee. The Steering Committee voted to approve the ranked list proposed by the Project Review Committee without making any changes.

Diakonos' new PSH Program was not included in the final ranked list. The Project Review and Steering Committees decided to not include this project because it missed high numbers of standards and scorecard section minimums compared to other projects (new and renewal, respectively) in the competition and decided to fund new projects they felt would be more effective at ending homelessness.

9 Standards missed (1 waived)

Q2.12 Standard: Services Plan not provided: waived for all

Q2.14 PSH Key Standards: 7/9 missed due to missing policies & procedures and sample lease

Q4.9: overall capacity was unmet due to staff limitations

Q7.2: Match Documentation: waived for all

5 section minimums missed

Section 2: Program Design

Section 3: Scope of Services

Section 4: Organizational Capacity

Section 5: Project Performance

Section 7: Application was not completed correctly and documents were missing

Score

Total application received a 11/86 points

The Steering Committee voted to make an appeals process available to applicants whose projects were not included in the ranked list. Please see the attached document for an explanation of the appeals process.

Thank you,

Balance of State CoC Team

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

www.ncceh.org/bos
bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

2 attachments

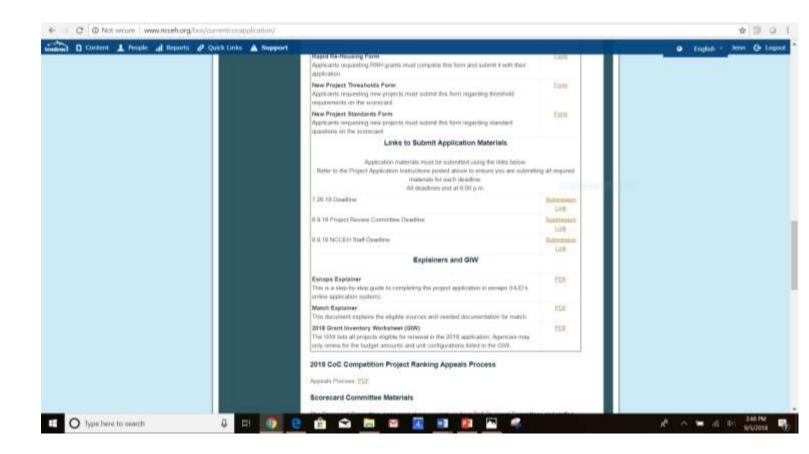


NC BoS CoC appeals process.pdf 131K



Diakonos_ NEW PSH_scorecard.pdf

FY2018 CoC Program Competition Application Deadline- posted to the NC BoS CoC Website





2018 CoC Application Released

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

Fri, Jun 29, 2018 at 6:37 PM

To: Richard Gary <rgary@alliedchurches.org>, Michele Knapp <mknapp@fifthstreetministries.com>, Melissa McKeown <melissa.mckeown@unionshelter.org>, wandee.norwood@crossmark.com, Lynn Alligood <lynn@merha.org>, Amy Modlin <Amy.Modlin@trilliumnc.org>, Jackie.Lucas@uss.salvationarmy.org, "James, Lynne" <lynne.james@pittcountync.gov>, Emily Carmody <emily@ncceh.org>, emily.locklear@ymail.com, jdmercer33@yahoo.com, plamend@nchfa.com, crowe@nccadv.org, Agency Email <jlhca@jlhcommunityaction.org>, dcom2005@duplinchristian.com, pathshelter@bellsouth.net, Susan King <havened@haveninleecounty.org>, tmcclammy@onslowco.org, bosgrantees@ncceh.org

Cc: NC Balance of State CoC <box@ncceh.org>, bosregional@ncceh.org

Dear Balance of State,

The FY 2018 Continuum of Care (CoC) project applications are now available in *e-snaps*. HUD *has not* yet published the Detailed Instructions for the project application or the E-snaps Explainer document. NCCEH staff have posted instructions and forms on the website that you can begin to review prior to HUD releasing these helpful documents. All applicants should review the complete set of instructions and documents on the website for the 2018 CoC Competition. We will continuously update the website with new information as we get it: http://www.ncceh.org/bos/currentcocapplication/

The current BoS CoC application timeline:

1st Deadline: July 26th 6:00pm

Use this form to submit materials due on the JULY 26 DEADLINE ONLY. Both New and Renewal Projects should attach:

- · HMIS reports
- APRs
- · Grantee Certification
- State Con Plan certification
- Local Con Plan certification (only projects in area with local Con Plan)
- New Project Threshold Form (new projects only)
- Budget, audit, & board materials (new projects only)
- Org. chart (new projects only)

2nd Deadline: August 9th 6:00pm

Applicants will submit two separate forms, one for the Project Review Committee and one for NCCEH Staff.

Use this form to submit materials due on the AUGUST 9 PRC DEADLINE ONLY.

New Projects Attach:

- Project Application
- New Projects Standards Form
- Permanent Supportive Housing Form (PSH projects only)
- Rapid Re-Housing Form (RRH projects only)
- Leasing Justification Statement (Leasing projects only)
- · Services Funding Plan (Supportive Services Funding projects only)

Renewal Projects Attach:

- Project Application
- Permanent Supportive Housing Form (PSH projects only)
- Rapid Re-Housing Form (RRH projects only)

Use this form to submit materials due on the AUGUST 9 NCCEH STAFF DEADLINE ONLY.

New and Renewal Projects Attach:

- · Applicant Profile from esnaps
- Documentation of Match

These deadlines allow time for project applications to be review by the Project Review Committee and NCCEH Staff and then tiered and ranked.

Special Steering Committee Meeting: August 30th 10:30am

The NC BoS CoC Steering Committee will convene on August 30th at 10:30am to approve the 2018 CoC Competition Ranking. Project Applicants will be notified of their Project Ranking with-in 24 hours of the vote.

Consolidated Application to HUD: September 14th

NCCEH is the Collaborative Applicant for the NC BoS CoC. The consolidated application submission Deadline is Tuesday, September 18, 2018 at 8:00 PM EDT. Staff will submit the CoC application and CoC Priority Listing as the CoC Consolidated Application to HUD prior to the deadline.

The FY 2018 CoC Program Competition NOFA was released on June 20 and provides detailed information on the 2018 CoC funding available.

Please let us know if you have questions at bos@ncceh.org.

Thank you,

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



Today 6:00pm: 2nd Deadline for CoC Competition

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

Thu, Aug 9, 2018 at 9:05 AM

To: Richard Gary <rgary@alliedchurches.org>, Michele Knapp <mknapp@fifthstreetministries.com>, Melissa McKeown <melissa.mckeown@unionshelter.org>, wandee.norwood@crossmark.com, Lynn Alligood <lynn@merha.org>, Amy Modlin <a href="mailto:knap-allied-normole-normol

Dear NC BoS CoC,

The NC BoS CoC's second deadline to submit materials is **today**, **August 9th at 6:00pm**. These deadlines allow time for project applications to be reviewed by the Project Review Committee and NCCEH Staff so they can be tiered and ranked.

Applicants will submit *two separate forms, one for the Project Review Committee to score and one for NCCEH Staff to score. Each form reguires different attachments

- PRC Form: https://app.smartsheet.com/b/form/7e54072aaf824717b18ee9911390c1af.
- 2. NCCEH staff form: https://app.smartsheet.com/b/form/b41d83b641c44a19a7f779df490ccd8c

1. PRC Submission

PRC Form:

https://app.smartsheet.com/b/form/7e54072aaf824717b18ee9911390c1af.

New Projects Attach:

- Project Application
- New Projects Standards Form
- Permanent Supportive Housing Form (PSH projects only)
- Rapid Re-Housing Form (RRH projects only)
- Leasing Justification Statement (Leasing projects only)
- Services Funding Plan (Supportive Services Funding projects only)

Renewal Projects Attach:

- Project Application
- Permanent Supportive Housing Form (PSH projects only)
- Rapid Re-Housing Form (RRH projects only)

2. NCCEH Staff Submission

NCCEH staff form:

https://app.smartsheet.com/b/form/b41d83b641c44a19a7f779df490ccd8c

New and Renewal Projects Attach:

- Applicant Profile from esnaps
- Documentation of Match

The FY 2018 Continuum of Care (CoC) project applications are available in e-snaps. All applicants should review the complete set of instructions and documents on the website for the 2018 CoC Competition. We will continuously update the website with new information as we get it: http://www.ncceh.org/bos/currentcocapplication/

Please let us know if you have questions at bos@ncceh.org.

Balance of State CoC Team

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bos@ncceh.org

NCCEH staffs the NC Balance of State Continuum of Care

Governance Charter for the Homeless Management Information System

NC-502 Durham City/Durham County Continuum of Care

NC-503 North Carolina Balance of State Continuum of Care

NC-513 Chapel Hill/Orange Continuum of Care

Section A: Purpose and Scope

The purpose of this Governance Charter is to confirm agreements of the shared governance of the regional Homeless Management Information System (hereinafter HMIS) among the three participating North Carolina Continuums of Care (CoCs): Durham, North Carolina Balance of State, and Orange. As such, the Governance Charter sets forth the general understandings, structure, and operations of the HMIS Advisory Board and specific responsibilities of each party relating to key aspects of the governance and operation of the HMIS. This Governance Charter is effective on July 1, 2018, after ratification by the three founding CoCs.

Section B: Background

The HMIS is a collaborative project of three North Carolina Continuums of Care (CoCs) – City of Durham/Durham County, North Carolina Balance of State, and Chapel Hill/Orange County – the HMIS Lead Agency, and participating Partner Agencies. An HMIS is an internet-based, local information technology system used to collect client-level data about the number, characteristics, and needs of persons experiencing homelessness and those at risk of homelessness as well as data on the provision of housing and services to these populations. Use of HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care, Emergency Solutions Grant, and Housing for Persons with AIDS funds; by the U.S. Department of Veterans Affairs for agencies receiving Supportive Services for Veteran Families and Grant Per Diem funds; and by

the U.S. Department of Health and Human Services for agencies receiving Projects for Assistance in Transition from Homelessness and Runaway and Homeless Youth funds.

Continuums of Care are community-wide initiatives that work to provide a range of housing and services for people experiencing homelessness. The Continuum of Care system includes homelessness prevention assistance, emergency shelter, transitional housing, permanent affordable and permanent supportive housing, supportive services, specialized programs and outreach for designated homeless subpopulations, and integration with "mainstream" programs.

HMIS enables homeless service providers to collect uniform client information over time. HMIS is essential to efforts to streamline client services and to inform public policy decisions aimed at addressing and ending homelessness at local, state, and federal levels. Through HMIS, people experiencing homelessness benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary for service and systems planning, effective resource allocation, and advocacy. The parties to this Governance Charter share a common interest in collaborating to end homelessness and successfully implementing and operating HMIS.

Section C. Guiding Principles

The following principles will be used to guide HMIS governance. The HMIS Advisory Board will:

- 1. Remain mindful of the purpose of the HMIS while governing its implementation.
- 2. Support the delivery of services and the evaluation of efforts to prevent and end homelessness in North Carolina through proactive support of system maintenance

Page 2

and modification.

- 3. Represent and seek to meet the needs of all HMIS stakeholders while sharing responsibility and authority.
- 4. Make governance and budgeting decisions cooperatively with input from a variety of stakeholders.
- 5. Review and openly discuss governance and budgets annually.
- 6. Involve stakeholders to ensure sufficient resources so HMIS can best meet the requirements of both service providers and policy makers.
- 7. Make decisions inclusively and with transparency.
- 8. Seek simplicity in any proposed changes to HMIS.
- 9. Ensure that progress is not slowed by undue delays and process.
- 10. Ensure stakeholders have the opportunity to participate in decisions impacting obligations and performance.

Section D. General Understandings

1. Continuum of Care Governance

The Continuums of Care are responsible for shared governance of the regional HMIS. The CoCs are the lead planning groups for efforts to end homelessness and for implementing and operating homeless service delivery systems. As such and under HUD policy (24 CFR part 580), the CoCs are responsible for HMIS oversight and implementation, including planning, software selection, HMIS Lead Agency designation, and setting up and managing the HMIS in compliance with HUD's national HMIS Standards. The CoCs' oversight and governance responsibilities are carried out by the HMIS Advisory Board (described below), which reviews and approves all HMIS policies and procedures.

2. HMIS Lead Agency Designation

Collectively, the CoCs designate the HMIS Lead Agency to manage HMIS operations on their behalf and to provide HMIS administrative functions at the direction of the CoCs through the HMIS Advisory Board. The North Carolina Coalition to End Homelessness is currently designated as the HMIS Lead Agency.

3. HMIS Advisory Board

The CoC members and HMIS Partner Agencies actively participate with the HMIS Lead Agency through the HMIS Advisory Board in the management of the HMIS. The HMIS Advisory Board is responsible for establishing policies, procedures, and protocols for functions essential to the viability and success of the HMIS, including, but not limited to, data privacy, data quality, analysis, reporting, and data sharing protocols. CoCs will be represented on the HMIS Advisory Board to ensure shared governance.

4. Funding

Funding for the software and operations of the HMIS shall be provided by the participating CoCs. The HMIS Advisory Board is responsible for establishing a cost-sharing plan to distribute the costs amongst the participating CoCs. Funding may be provided through a HUD Continuum of Care Program HMIS grant or other funding from the CoC. Funding may also be provided from agencies operating programs federally required to enter data into HMIS. Partner Agencies may be required to pay user fees for the HMIS software and reporting licenses assigned to their agency. In the event there is a shortfall in funding for the software or operation of the HMIS, the HMIS Advisory Board will be responsible for exploring options to increase revenue.

5. Fiscal Year

The fiscal year for the HMIS project is defined as July 1-June 30.

6. Software and Hosting

The CoCs delegate their responsibility for selecting a single software product to serve as the sole HMIS software application to the HMIS Advisory Board. The HMIS currently uses ServicePoint, a software application by Bowman Systems, a company of Mediware.

7. Compliance with Homeless Management Information System Standards

The HMIS is operated in compliance with the HMIS Data and Technical Standards and any other applicable laws. The parties anticipate that HUD will release revised HMIS Standards periodically. The parties agree to make changes to this Governance Charter, the HMIS Policies and Procedures, and other HMIS operational documents to comply with the revised standards within the HUD-specified timeframe for such changes.

8. Operational Policies and Agreements

The HMIS operates within the framework of agreements, policies, and procedures that have been developed and approved over time by the HMIS Lead Agency and the CoCs through the HMIS Advisory Board. These agreements, policies, and procedures include, but are not limited to, the HMIS Policies and Procedures Manual, Data Quality Plan, Privacy Policies and the Consumer Notice, Partner Agency Agreements, and User Agreements. All operational agreements and policies and procedures are reviewed annually by the HMIS Lead Agency, the HMIS Advisory Board, and the CoCs to comply with the HMIS Standards or otherwise improve HMIS operations.

9. Data Ownership

The data entered into the HMIS is owned by the Partner Agency responsible for entering the client-level information. The HMIS Lead Agency, CoCs, and Partner Agencies are jointly responsible for ensuring that HMIS data processing capabilities, including the collection, maintenance, use, disclosure, transmission, and destruction of data, comply with the HMIS privacy, security, and confidentiality policies and procedures.

Section E: HMIS Advisory Board Structure and Operating Guidelines

1. HMIS Advisory Board Composition

- A. The HMIS Advisory Board is a partnership of representatives from each of the participating CoCs and additional stakeholders. The HMIS Advisory Board may have 11-17 voting members. The committee is composed of:
 - two designated representatives from each CoC
 - one designated representative from the HMIS Lead Agency
 - stakeholders representing various interests (non-designated)
- B. The HMIS Advisory Board is responsible for identifying and recruiting members that are not designated by the CoC or HMIS Lead Agency. The Executive Committee approves all non-designated members.
- C. Selection of additional HMIS Advisory Board Members may include, but is not limited to, representation from HMIS User Agencies. Selection of representation from HMIS User Agencies will take into account HMIS user diversity, considering the following attributes: HMIS user level; geographic location of the agency where the Board member is employed; population density of the location of the Board member's agency; size or client volume of the Board member's agency or program; type of service or program provided by the Board member's agency; and the special interest or demographic served by the Board member's agency.
- D. Every participating CoC shall be responsible for selecting their designated representatives to the HMIS Advisory Board and recording representatives in CoC meeting minutes. Each CoC shall be allowed to determine any requirements to be a representative to the HMIS Advisory Board.
- E. Advisory Board Members serve two-year terms. Non-designated members may be renewed for additional terms upon agreement by the Advisory Board and the member seeking reappointment.

2. Subcommittees and Workgroups

- A. The HMIS Advisory Board may establish official subcommittees that are composed exclusively of its members or may include additional non-member stakeholders. All official subcommittees must record minutes. These minutes must be distributed to all HMIS Advisory Board members.
- B. The HMIS Advisory Board may establish workgroups that are composed exclusively of its members, or may include additional non-member stakeholders, as it deems necessary, to address short term issues or projects.
- C. All subcommittee and workgroup meetings are open meetings unless the executive committee decides otherwise.

3. Executive Committee

The HMIS Advisory Board Executive Committee shall consist of all CoC designated representatives of the Advisory Board plus one representative from the HMIS Lead Agency.

Executive Committee Duties:

- Lead the processes of developing the annual budget, annual contract, and review of the cost sharing agreement.
- Lead the processes of evaluating the work of the HMIS Lead Agency, HMIS vendor, and the HMIS Advisory Board.
- Approve recommended actions from subcommittees or workgroups in order to avoid delay of necessary actions between full HMIS Advisory Board meetings.
- Any other duties designated by the HMIS Advisory Board.

4. Meetings and Attendance

- A. The HMIS Advisory Board will conduct regular meetings on a quarterly basis and will convene more frequently as needed.
- B. Meetings may be held in person, electronically, or via phone. Remote access to in-person meetings will be provided at the discretion of the Officers.
- C. In accordance with North Carolina General Statute Article 33C., meetings of the HMIS Advisory Board and its official subcommittees and workgroups are open meetings. The HMIS Advisory Board and its subcommittees will enter closed session when necessary, following section § 143-318.11 of the North Carolina General Statute Article 33C.
- D. Advisory Board members are required to attend all meetings. If a designated member is absent from more than one meeting in a quarter, that member's CoC Executive Committee or its equivalent shall be notified. Non-designated members who have two unexcused absences from two consecutive meetings will be asked to resign from the Advisory Board, unless a majority of the Advisory Board members determine there are extenuating circumstances. If the member does not resign within 30 days after being requested to do so by the Advisory Board, a majority of the Advisory Board may vote to remove the member. A majority of the Advisory Board is one half plus one of the members present at the meeting when the vote is taking place.
- E. Advisory Board members will be publicly identified and available for contact by HMIS users and agencies throughout the state.
- F. Advisory Board members are volunteers and are not compensated for their participation. Advisory Board members may receive reimbursement for costs incurred while attending Advisory Board meetings.

5. Quorum at HMIS Advisory Board Meetings

Two thirds of the total representatives on the HMIS Advisory Board will constitute a quorum.

A quorum is needed to:

- a) Amend the HMIS Governance Charter
- b) Change HMIS Lead Agency or software
- c) Approve HMIS Advisory Board Officers
- d) Modify HMIS Policies and Procedures
- e) Modify HMIS Advisory Board Governance Policies and Procedures
- f) Vote to remove an HMIS Advisory Board member as outlined in Section E.4.D.

6. Voting

- A. The HMIS Advisory Board operates by consensus whenever possible. When a vote is necessary, each HMIS Advisory Board Member shall have one vote on any motion. A simple majority vote of members present will be used to settle issues that reach an impasse, unless a quorum is required as outlined in Section E.5 or a 75% majority vote is required as outlined in Section E.6.B.
- B. Fiscal matters, Governance Charter changes, and decisions regarding the Lead Agency or software vendor require a 75% majority vote.
- C. Every HMIS Advisory Board Member who is entitled to vote may vote in person or, unless this Governance Charter otherwise provides, may vote by proxy executed in writing by the member.
- D. No member shall vote on any issue where there could be a conflict of interest.
- E. As needed, Robert's Rules of Order will govern procedural questions during meetings.
- F. Guests at Advisory Board meetings may speak if granted permission by the Chairperson but will not have voting privileges.

7. Officers

- A. The HMIS Advisory Board members shall elect a Chairperson, Vice-Chairperson, and Secretary. To be eligible to serve as an officer, an individual must be a designated CoC representative.
- B. The Chairperson's duties will be to:
 - Serve as primary point of contact for the HMIS Advisory Board
 - Preside over HMIS Advisory Board meetings
 - Facilitate the development of meeting agendas
 - Ensure communication of HMIS Advisory Board matters to all representatives
 - Chair the HMIS Advisory Board Executive Committee
- C. The Vice-Chairperson's duties will be to:
 - Assist the Chairperson as necessary
 - Fulfill the duties of the Chairperson in the event of his or her absence
 - Serve as a member of the HMIS Advisory Board Executive Committee
- D. The Secretary's duties will be to:
 - Ensure distribution of minutes and other meeting materials to all members
 - Carry out the duties of the Chairperson and Vice-Chairperson in the event both officers are absent
 - Serve as a member of the HMIS Advisory Board Executive Committee
- E. The HMIS Advisory Board shall elect the three officers during the last meeting of the fiscal year. The newly elected officers shall assume office at the first meeting of the new fiscal year and shall serve a term of one year.

- F. No one individual shall serve more than three full consecutive terms in the same office.
- G. No more than one representative from a CoC may hold a position as an officer at any time.

8. Resignation and Removal

- A. A member may resign from the HMIS Advisory Board by submitting a written notice to the Chairperson and to their CoC leadership. A CoC may replace their representative by submitting CoC minutes that show the change in representation.
- B. A member or officer may be removed from the HMIS Advisory Board as outlined in Section E.4.D. This may only occur if the member is in violation of the attendance policy or the Code of Conduct as outlined in Section E.9 and the member and the applicable CoC have been notified.
- C. If an officer resigns or is removed from the committee, an election will be held within the next 30 days to fill the vacancy.

9. Code of Conduct

The following Code of Conduct shall govern the performance, behavior, and actions of the HMIS Advisory Board and its members.

A. No committee member shall participate in the selection, award, or administration of a bid or contract supported by federal funds if a conflict of interest is real or apparent to a reasonable person.

Page 11

- B. Conflicts of interest may arise when any committee member has a financial, family, or other beneficial interest in the vendor firm selected or considered for an award.
- C. No committee member shall do business with, award contracts to, or show favoritism toward a member of his/her immediate family, spouse's family, or to any company or vendor who either employs or has any relationship to a family member; or award a contract or bid which violates the spirit or intent of federal, state, and local procurement laws and policies established to maximize free and open competition among qualified vendors.
- D. Committee members shall neither solicit nor accept gratuities, gifts, consulting fees, trips, favors, or anything having a monetary value from a vendor, potential vendor, or the family or employees of a vendor, potential vendor, or bidder; or from any party to a sub-agreement or ancillary contract.
- E. As permitted by law, rule, policy, or regulation, the HMIS Advisory Board shall pursue appropriate legal, administrative, or disciplinary action against a committee member, vendor, or vendor's agent who is alleged to have committed, has been convicted of, or pled no contest to a procurement related infraction. If said person has been convicted, disciplined, or pled no contest to a procurement violation, said person shall be removed from any further responsibility or activities on behalf of the HMIS Advisory Board.
- F. Harassment, interpreted as unwelcome conduct, comment, gesture, contact, or intimidating and offensive behavior likely to cause offense or humiliation will not be tolerated and may result in disciplinary measures up to and including removal from the Advisory Board.

G. HMIS Advisory Board business will be conducted in a manner that reflects the highest business standards and in accordance with all applicable federal, state, and local laws and regulations.

Section F: Specific Responsibilities of the Parties

1. Continuums of Care

The participating Continuums of Care provide oversight, project direction, policy setting, and guidance for the HMIS project. It is the responsibility of the CoCs to:

- a) Designate the HMIS Lead Agency and the software to be used for HMIS and approve any changes to the HMIS Lead Agency or software.
- b) Approve this HMIS Governance Charter or any amendments to it.
- Request revisions to any HMIS operational agreement, policy, or procedure. Requests will be sent to the HMIS Advisory Board through the CoC's representatives.
- d) Conduct outreach to homeless assistance agencies not using HMIS and encourage these agencies and other mainstream programs serving homeless people to participate in HMIS.
- e) Work to inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.
- f) Promote the effective use of HMIS data, including its use to measure the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs.
- g) Provide all local information as necessary for compilation of the Continuum of Care Housing Inventory Count and Point-in-Time Count and support the HMIS Lead Agency in preparing the Annual Homeless Assessment Report (AHAR) and System Performance Measures reporting.

2. HMIS Advisory Board

The HMIS operates under a model of shared governance of the participating Continuums of Care. The CoCs exercise the following responsibilities for HMIS governance through the HMIS Advisory Board:

- a) Implement and continuously improve the HMIS.
- b) Ensure the HMIS scope aligns with the requirements of agencies, HUD and other federal partners, and other stakeholder groups.
- c) Address any issue that has major implications for the HMIS, such as HMIS Data Standards revisions released by HUD or HMIS vendor performance problems.
- d) Review, revise, and approve all HMIS operational policies developed by the HMIS Lead Agency and submit all approved operational documents to each CoC Board of Directors or equivalent CoC governing body.
- e) Ensure agency and user compliance with the federal HMIS Standards and all HMIS operational agreements, policies, and procedures.
- f) Provide guidance and oversight of HMIS-related user and agency compliance monitoring undertaken by the HMIS Lead Agency.
- g) Approve HMIS Lead Agency recommendations to terminate a user license or restrict the HMIS participation of a Partner Agency.
- h) Evaluate the HMIS Lead Agency and software performance.
- i) Maintain and adhere to Governance Policies and Procedures to ensure the HMIS Advisory Board is governing in compliance with this Governance Charter and uses a clearly defined and transparent process.

3. HMIS Lead Agency

The North Carolina Coalition to End Homelessness has been designated as the HMIS Lead Agency for the shared HMIS project as of July 1, 2018. The HMIS Lead Agency is responsible for managing and administering all HMIS operations and activities. The HMIS Lead Agency exercises these responsibilities at the direction of the HMIS Advisory Board. These responsibilities are contingent on receipt of the appropriate funding from participating CoCs and Partner Agencies. The responsibilities of the HMIS Lead Agency include:

a) General

- 1. Obtain and maintain the contract with the selected software vendor.
- Determine the parameters of the HMIS as it relates to continuity of service, ability to limit access to the data, hosting responsibilities, general security and maintenance issues, data storage, back-up and recovery, customization, compliance with HUD Data Standards, reporting needs, training, and technical support.
- 3. Provide overall staffing for the operation of the HMIS, including the HMIS Advisory Board and its subcommittees and workgroups.
- 4. Develop and maintain all HMIS operational agreements, policies, and procedures, including a written privacy notice.
- 5. Obtain signed Partner Agency Agreements and User Agreements.
- 6. Invoice Partner Agencies and jurisdictions for HMIS fees approved by the HMIS Advisory Board.
- 7. Monitor Partner Agencies and users to ensure compliance with HMIS operational agreements, policies, and procedures on behalf of, and at the direction of, the HMIS Advisory Board.
- 8. Attend meetings of the participating CoCs' Boards of Directors or equivalent decision-making bodies.
- 9. Attend the HMIS or Data Committee meetings of the participating CoCs.
- 10. Provide and maintain the HMIS website.

- 11. Comply with federal HMIS Data Standards (including anticipated changes to the HMIS Standards) and all other applicable laws.
- 12. Apply as the project applicant for all HUD CoC Program HMIS Projects for the participating
- 13. CoCs.
- 14. Serve as the liaison to HUD regarding HUD HMIS grants.
- b) Administer the software, including:
 - 1. Ensure the software vendor complies with the responsibilities designated below in Section F.4.
 - 2. Report any concerns with the software vendor to the HMIS Advisory Board.
 - 3. Inform CoCs and agencies how each software release will change or impact current workflow and operations.
 - 4. Protect confidential data (in compliance with federal HMIS Standards, local privacy policies, and other applicable laws) and abide by any restrictions clients have placed on their own data.
 - 5. Ensure software implementation is in accordance with all HUD regulations and policies.
- c) Support HMIS end users, including:
 - 1. Provide and manage end user licenses, including authorizing usage and the level of access to HMIS for all users.
 - 2. Add and remove Partner Agency administrators.
 - 3. Provide all training and user guidance needed to ensure appropriate system usage, data entry, data reporting, and data security and confidentiality.
 - 4. Provide specific training for agency administrators and end users.

- 5. Establish the training requirements for users and agency administrators.
- 6. Maintain documentation of user training completion.
- 7. Outreach to Partner Agencies to provide end user support.
- 8. Develop and maintain a how-to manual that provides data entry guidance for users.
- 9. Maintain an email help desk for user support.
- 10. Communicate at least monthly with users through an e-newsletter.
- d) Ensure data quality, including:
 - Ensure all client and homeless program data are collected with adherence to the HUD HMIS Data Standards, the HMIS Policies and Procedures, and local additional requirements.
 - 2. Customize the HMIS application to meet local data requirements (within reason and within constraints of budget and other duties).
 - 3. Develop and implement a data quality plan.
 - 4. Monitor data quality and generate data quality reports under the data quality plan.
 - 5. Assist Partner Agencies and users to rectify data quality concerns.
 - 6. Carry out aggregate data extraction and reporting under the guidance of the HMIS Advisory Board.
 - 7. Assist Partner Agencies with agency-specific data collection and reporting needs, such as the Annual Progress Report and other program reports (within reason and within constraints of budget and other duties).
 - 8. Develop HMIS data entry workflow and requirements for HMIS data and reporting to meet Partner Agency reporting requirements.
 - e) Reporting, including:

- Complete or provide assistance with the completion of the Annual Homeless Assessment Report (AHAR), HUD CoC Program Application, Consolidated Annual Performance Evaluation Report (CAPER), Point-in-Time Count and Housing Inventory Chart, Partner Agency Annual Performance Reports, and other reports to funders from agencies federally mandated to use HMIS.
- 2. Ensure the HMIS Policies and Procedures and recommend data entry workflow align with collecting the data necessary to complete the reports listed above in Section F.3.E.1.
- 3. Construct, run, and publish all necessary system-wide reports to meet federal, state, and local reporting compliance.
- Provide aggregate reports to groups or stakeholders requesting HMIS information within the constraints detailed in the HMIS Policies and Procedures Manual.

f) Confidentiality and Security

- 1. Develop and implement security and confidentiality plans required by the HUD HMIS Standards.
- 2. Assist Partner Agencies to rectify agency data security and privacy concerns.

g) Satisfactory Assurances

It is understood that the HMIS will contain client information that may be subject to the privacy and security protections and requirements of federal HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. The HMIS Lead Agency hereby agrees that it will use protected client information only for purposes permitted by agreement with Partner Agencies and as permitted by the applicable laws and standards. Further, the HMIS Lead Agency agrees it will make use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule (where appropriate), other law, and local HMIS privacy and security policies and

procedures to prevent any unauthorized disclosure of protected client information.

4. Software Vendor

The selected software vendor and HMIS database must meet all HUD regulations and policies, and the following requirements:

- a) Ensure the HMIS design meets the federal HMIS Data Standards.
- b) Develop a codebook and provide other documentation of programs created.
- c) Provide ongoing support to the HMIS Lead pertaining to the needs of end users to mine the database, generate reports, and other interface needs.
- d) Administer the product servers, including web and database servers.
- e) Monitor access to HMIS through auditing.
- f) Monitor functionality, speed, and database backup procedures.
- g) Provide backup and recovery of internal and external networks.
- h) Maintain the system 24 hours a day, seven days a week.
- i) Communicate any planned or unplanned interruption of service to the HMIS Lead Agency.
- j) Take all steps needed to secure the system against breaches of security and system crashes.

Section G: Period of Agreement and Modification/Termination

1. Period of Operation and Termination

This Governance Charter will become effective July 1, 2018, after the ratification by the participating CoCs and shall remain in effect until terminated by the parties. Each party shall have the right to terminate this agreement as to itself only upon six months prior written notice to the HMIS Advisory Board in care of the HMIS Lead Agency.

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2. Annual Review

This Governance Charter shall be reviewed by the HMIS Advisory Board annually, beginning in the fiscal year after its adoption.

3. Dissolution of Relationship with the Shared HMIS

- A. If a Continuum of Care decides to withdraw from participating in the HMIS, it may do so at the end of the fiscal year with at least six-months notice. The CoC must provide written notice to the Chairperson and Vice-Chairperson of the HMIS Advisory Board and the HMIS Lead Agency Representative. A CoC withdrawing from the HMIS is still responsible for paying its share of outstanding costs as defined in the approved budget and cost sharing agreements unless the HMIS Advisory Board agrees otherwise.
- B. The severing of an individual CoC's relationship with the HMIS does not dissolve the HMIS or the existence of the implementation.
- C. If a CoC fails to ratify any recommendation of the HMIS Advisory Board that is submitted to the participating CoCs for ratification or approval, such failure shall lead to arbitration with the party. After arbitration, if the CoC cannot ratify or approve the recommendation, this shall constitute a decision to withdraw from participation in the HMIS.
- D. If all the participating Continuums of Care unanimously wish to dissolve their relationship with the HMIS, then the HMIS Advisory Board shall be dissolved.

4. Addition of Participating Continuums of Care

Additional CoCs may join the HMIS with HMIS Advisory Board approval and ratification by the participating CoCs. Upon approval, this Governance Charter will be amended to include the new CoC(s).

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Governance Charter for the HMIS, ratified June 2018

Section H: Amendments

- **1.** Amendments, including additions, deletions, or modifications to this Governance Charter must be agreed to by all parties to this Agreement.
- 2. Amendments shall be submitted at regular meetings of the HMIS Advisory Board. A vote on the submitted amendment will occur at the next meeting of the HMIS Advisory Board.
- **3.** Recommendations to change or amend this Governance Charter may be made by any member at any time and shall be submitted at a regular meeting of the HMIS Advisory Board as follows:
 - A. For proposals that fundamentally change the responsibilities of the parties or structure of HMIS Advisory Board, they shall stand for action and be open for discussion among members and upon recommendation of a 75% majority vote, shall be submitted to the participating CoCs for approval.
 - B. For changes that do not fundamentally alter the responsibilities or structure of the HMIS, they shall stand for action and be open for discussion among members and shall be in effect upon approval by a 75% majority vote of the current and present members of the committee.
- **4.** Upon approval, the Secretary shall update the Governance Charter document to reflect the changes and will distribute updated copies to all members before the next regular meeting. Members shall be responsible for communicating amendments to the Governance Charter made by the HMIS Advisory Board to their CoC leadership board and/or governing body.

2016 NC HMIS Operating Policies and Procedures

rev. 2016.12.08



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2016 North Carolina Statewide Homeless Management Information System (NC HMIS) Operating Policies and Procedures

The purpose of an HMIS project is to:

- Record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services
- Produce an unduplicated count of persons experiencing homelessness for each Continuum of Care
- Understand the extent and nature of homelessness locally, regionally and nationally
- Understand patterns of service usage and measure the effectiveness of projects and systems of care

These are the minimum standards of operation for the NC HMIS Project. CoCs may elect to implement more rigorous standards as agreed upon by their local CoC. The following operating policies and procedures apply to all designated HMIS Lead Agencies and participating agencies in North Carolina. (Contributing HMIS Organizations – CHOs).

KEY TERMS AND ACRONYMS:

	Acronym			
Term	(if used)	Brief Definition		
		A data system that meets HUD's HMIS requirements and is used to measure		
		homelessness and the effectiveness of related service delivery systems. The		
Homeless Management		HMIS is also the primary reporting tool for HUD homeless service grants as		
Information System	HMIS	well as for other public streams of funding related to homelessness.		
North Carolina Statewide				
Homeless Management		The North Carolina Statewide Homeless Management Information System is		
Information System	NC HMIS	the unified statewide HMIS for all of North Carolina's 12 Continua of Care.		
Continuum of Care	CoC	Planning body charged with guiding the local response to homelessness.		
Independent Jurisdiction		CoCs that are recognized by HUD and are usually organized around higher		
CoCs IJs		population counties.		
		The Balance of State CoC is composed of the communities/counties within		
		North Carolina that are not part of another CoC within the state.		
		Communities that are part of the Balance of State are typically smaller mid-		
Balance of State CoC	BOS	sized or rural communities.		
		The Michigan Coalition Against Homelessness is a nonprofit membership		
		organization that is an advocate for individuals and families who are		
Michigan Coalition Against		homeless or at-risk of becoming homeless, and the agencies that serve them.		
Homelessness	MCAH	MCAH serves as the HMIS statewide lead for the NC HMIS project.		
		The NC Governance Committee is composed of representatives from all 12		
North Carolina HMIS		North Carolina CoCs and provides direct oversight of the Statewide HMIS		
Governance Committee	GC	project.		
		The Interim MOU enables MCAH to serve as the HMIS Lead Agency and		
MCAH Memorandum of		administer the statewide HMIS implementation on behalf of the North		
Understanding	MOU	Carolina CoCs.		

Contributing HMIS				
Organizations	СНО	An organization that participates on the HMIS.		
O Familiations	2110	The Health Insurance Portability and Accountability Act of 1996, particularly		
		the Privacy Rule under Title II, regulates the use and disclosure of Protected		
The Health Insurance				
Portability and Accountability		Health Information (PHI) held by covered entities and business associates.		
1	LUDAA	HIPAA is the base operational privacy rule on which the NC HMIS privacy rule		
Act of 1996	HIPAA	is structured.		
		42 CFR Part 2 is the federal regulation governing the confidentiality of drug		
		and alcohol use treatment and prevention records. The regulations are		
		applicable to certain federally assisted substance use treatment programs		
42 CED Dowt 2	Dowt 3	This law limits use and disclosure of substance use patient records and		
42 CFR Part 2	Part 2	identifying information.		
		The agreement between NC HMIS participating agencies and MCAH that		
Participation Agreement		specifies the rights and responsibilities of MCAH and participating agencies.		
Data Use	Data Use	The agreement signed by each CHO, the local HMIS Lead Agency and MCAH		
Agreement/Administrative	Agreement	that governs the privacy standards for participants that can see data from		
Qualified Services	/Admin	multiple organizations.		
Organization Business	QSOBAA			
Associates Agreement				
Sharing Qualified Services		The Agreement between agencies that elect to share information using the		
Organization Business	Sharing	HMIS. The Agreement prevents the re-release of data and, in combination		
Associates Agreement	QSOBAA	with the Participation Agreement, defines the rules of sharing.		
User Agreement & Code of		The document each HMIS user signs that defines the HMIS standards of		
Ethics		conduct.		
		A Release of Information comes in two forms, a paper ROI and an electronic		
		ROI. A signed (paper) ROI giving informed client consent for sharing is also		
		required to share data between agencies. An electronic ROI must be		
Release of Information	ROI	completed to share a client's data on the HMIS.		
		Sharing refers to the exchange of client data between agencies. External data		
		sharing requires a Sharing QSOBAA between two or more agencies, and a		
		client signed Release of Information authorizing the sharing of that client's		
		information. Data entry (internal sharing) does not require a client signed		
		ROI as there is implied consent for the agency to keep records when a client		
Sharing		provides information.		
		Protected Personal Information is a category of sensitive information that is		
		associated with an individual. It should be accessed only on a strict need-to-		
		know basis and handled and stored with care. Before any portion of the		
Protected Personal		HMIS client record, outside of the Client Profile, can be shared, a Sharing		
Information	PPI	QSOBAA and a client signed release of information must be in place.		
		Refers to whether or not a provider page can view client data that has been		
		entered into another provider page. HMIS system visibility is configured		
		separately in each provider page. Visibility can be configured by individual		
Visibility		provider pages or by Visibility Groups.		
		A Visibility Group is a defined group of Provider Pages between which data is		
		shared. Internal Visibility Groups control internal sharing within an		
		organization. Internal Visibility is governed by an agency's internal privacy		
		rule. External Visibility Groups control sharing with other agencies and are		
Visibility Group		defined by a Sharing QSOBAA.		
		Coverage rate refers to the percentage of the homeless population in a		
		geographic area that is measured on the HMIS, divided by the total number		
		of homeless persons in that geographic area. Coverage estimates are used		
Coverage Rate		to project a total homeless count if there are homeless service providers in a		

		iuric diction that do not participate in NC LIMIC /Those may include persons
		jurisdiction that do not participate in NC HMIS. (These may include persons
		served in Domestic Violence Providers or other non-participating Shelters or
Project Types		 Outreach Projects.) See the NC HMIS Coverage Memo for guidance. HUD defines 12 Project Types in HMIS: Coordinated Assessment – A CoC project that coordinates assessment and referrals of persons seeking housing and/or services, and may include the use of a comprehensive and standardized assessment tool. ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of less than 3 months. TH: Transitional Housing- Transitional environments with a planned LOS of not more than 2 years that provide supportive services. PH: PSH Permanent Supportive Housing- Permanent Housing for the formerly homeless with services attached to persons served under this project. PH: Permanent Housing- Permanent housing that may be supported by a voucher but does not have services attached to the housing. RR: Rapid Rehousing- A project that rapidly rehouses those who are identified at Literally Homeless. HP: Homeless Prevention- A project that helps those who are at imminent risk of losing housing, to retain their housing. SO: Street Outreach Project- A project that serves homeless persons who are living on the street or other places not meant for habitation. SSO: Services Only Project- A project that serves persons only with no residential component. These projects often provide case management and other forms of support and meet with clients in an office, at the client's home, or in a shelter. Safe Haven: A project that provides low-demand shelter for hard-to-
		serve persons with severe disabilities. The clients have often failed in other sheltering environments.
Length of Stay	LOS	The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates. NC HMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.
,		An annual count, that is required for all CoCs. It is usually performed during
		the last week in January. Every other year, the PIT Count must include an
Point in Time Count	PIT	"unsheltered" or street count.
Tome in time count		The HIC Chart is where all residential projects (both HMIS participating and non-participating) specify the number of beds and units available to homeless persons within a jurisdiction. The numbers are recorded in the agency's HMIS provider pages, (for NC HMIS participating projects), or in
Housing Inventory Chart	HIC	"shell" provider pages for non-HMIS participating agencies.
Homeless Definition		See Homeless Definition Crosswalk. The HEARTH Act defines 4 categories of homelessness. NC HMIS has adopted the HUD definition for counting persons experiencing homelessness. • Category 1: Literally Homeless • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statutes • Category 4: Fleeing/Attempting to Flee DV
Homeless Delillidon		

		Not all projects can serve all categories and some may utilize a different		
		definition when delivering services.		
		PATH is funded by the Substance Abuse and Mental Health Services		
		Administration (SAMHSA). It provides services to mentally ill homeless		
Projects for Assistance in		people, primarily through street outreach, to link them to permanent		
Transition from		community housing. This project has different reporting requirements than		
Homelessness	PATH	HUD funded projects and uses HMIS to collect this information.		
		Shelter + Care provides Permanent Supportive Housing to disabled persons		
Shelter Plus Care	S+C	and reports on the HMIS.		
		HOPWA provides housing assistance and related supportive services for		
		persons with HIV/AIDS, and family members who are homeless or at risk of		
Housing Opportunities for		homelessness. This project has different project reporting requirements		
Persons with AIDS	HOPWA	than the other HUD funded projects in this document.		
		Coordinated assessment is now required for all communities receiving HUD		
		funding. Each CoC must develop a plan based on their local providers and		
		resources. The shared objective of these locally defined processes is to		
Coordinated Assessment		ensure that access to homeless resources is optimized and based on a		
Programs	CA	standardized assessment of need.		

I. POLICIES AND PROCEDURES SUMMARY:

A. Policy Disclaimers and Updates

Operating Procedures defined in this document represent the minimum standards of participation on the NC HMIS project and represent general "best practice" operational procedures. Local HMIS Lead Agencies in coordination with their CoCs may add additional standards to this base document, which define the local HMIS policies within their jurisdiction.

Operational standards in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA and VA providers have operating rules specific to HHS and VA.

The NC HMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of an annual review. Draft updates will be reviewed at the NC HMIS monthly System Administrator Call-In and included in the meeting minutes' distribution email. Before being finalized, the NC HMIS Policies and Procedures will be formally approved by the North Carolina HMIS Governance Committee. To allow for evolution of compliance standards without re-issuing core agreements, updated policies supersede related policies in any previously published Policies and Procedures document or agreements. Any changes from the previous year will be highlighted. A current copy of the NC HMIS Policies and Procedures may also be found on the NC HMIS website www.nchmis.org

II. AGREEMENTS, CERTIFICATIONS, LICENSES AND DISCLAIMERS:

CoCs, agencies and users are required to uphold specific rules and responsibilities as participants in the NC HMIS project.

A. Required Agency Agreements, Certifications and Policies

Participating CHOs or other partners on the NC HMIS project must have the following contracts, agreements, policies and procedures available for review:

- 1. All CoCs participating on the NC HMIS must sign the MCAH Memorandum of Understanding that designates the Michigan Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness as the Statewide Lead Agency for administration of the statewide database. (Within national HMIS circles, this document is often called a Joint Governance Charter.) Each jurisdiction will identify a local Lead Agency that coordinates with the Statewide Agency and is responsible for specific tasks. The Charter supports the ability for multiple jurisdictions to participate on a single HMIS information system.
- 2. All agencies must have the following fully executed documents on file and be in compliance with the policies and directives contained therein:
 - a. A **Data Use Agreement/Administrative QSOBAA** governing administrative access to the system.
 - b. A **Participation Agreement** governing the basic operating principles of the system and rules of membership.
 - c. **Sharing QSOBAA's** (if applicable) governing the nature of the sharing and the re-release of data.
 - d. A board certified **Confidentiality Policy** governing the privacy and security standards for the Agency.
 - e. A board certified **Grievance Policy** outlining a structured process for resolving complaints or grievances against, or within, the organization.

B. HMIS User Requirements:

All agencies must have the following documents on file for all active users licensed in the NC HMIS project.

- 1. A fully executed **User Agreement and Code of Ethics** document governing the individual's participation in the system.
- 2. All agencies must keep training certificates for active users on file.
 - a. All users are required to take full privacy training when they are first licensed, and take privacy update suite of trainings at least annually. Successful completion of the certification questionnaire is required for both the full privacy training and the privacy update. Documentation of completion of these trainings must be available for review.
 - All users will complete workflow training, related workflow updates and have documentation of the training completion for all programs with which they work. If local CoCs or Agency Administrators have additional training requirements or offerings, they

- should have a method for documenting successful completion and have that documentation available at their local agencies for review as needed.
- c. All users are trained in the HUD Data Standards Universal Data Elements and any Program Specific Elements that apply to the programs with which they work. This includes training on both the process for collecting client identifying information, the Homeless Definition and the Chronic Homeless Definition.

C. Agency Administrator Requirements

All agencies participating on the system must have an assigned Agency Administrator.

- 1. Agency Administrator Training Requirements Agency Administrators must complete and maintain documentation of the following:
 - a. All trainings required for standard HMIS users on the system.
 - b. Provider Page training.
 - c. Workflow Training for all workflows used in their agency. This training will be developed by the NC HMIS Project, the funding agency or an agency authorized to train on behalf of the funding agency or NC HMIS.
 - d. Reports Training (agency users and leadership are tasked with supporting data quality as well as monitoring outcome and other performance issues).
 - e. Other training as specified by the CoC.
- 2. Agency Administrator Participation Requirements Agency Administrators should participate in the following CoC or agency meetings:
 - a. CoC HMIS Agency Administrator meetings and trainings.
 - b. Agency specific HMIS user meetings or preside over an HMIS specific topic during routine staff meetings.
 - c. A local Reports Committee that reviews and governs the publication of CoC information.

III. PRIVACY:

A. Privacy Statement

NC HMIS is committed to making the project safe for participating agencies and the clients whose information is recorded on the system.

Toward that end:

- Sharing is a planned activity guided by sharing agreements between agencies (Sharing QSOBAAs). Agencies may elect to keep private some or all of the client record including all identifying data.
- All organizations will screen for safety issues related to the use of automation.
- NC HMIS has systematized the risk assessment related to clients through the standard NC HMIS
 release. The standardized release offers options for the use of a client's Social Security number.
 It also provides guidance on using unnamed records and how the Privacy Notice is explained to
 clients.

- NC HMIS has adopted a Privacy Notice (with minor modifications) that was developed in close collaboration with providers that manage information that may put a client at risk.
- The NC HMIS system is compliant with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of providers may participate in the project.
- Privacy Training is a requirement for all agencies and users on the NC HMIS system.
- Privacy training is an opportunity for all participating organizations to revisit and improve their overall privacy practices. Many agencies choose to have all of their staff complete the NC HMIS training curricula – not just those with user access to the system.
- All users issued access to the system must sign a User Agreement & Code of Ethics form, and
 agencies must sign a NC HMIS Participation Agreement. Taken together, these documents
 obligate participants to core privacy procedures. If agencies decide to share information, they
 must sign an agreement that defines their sharing and prevents re-release of information to
 unauthorized third parties (the Sharing QSOBAA).
- Policies have been developed that protect not only a client's privacy, but also an agency's
 privacy. Privacy practice principles around the use and publication of agency or CoC specific
 data have been developed and included in both the Participation Agreement and this HMIS
 Policies and Procedures document.
- The NC HMIS System allows projects with multiple components/locations that serve the same client to operate on a single case plan. This reduces the amount of staff and client time spent in documentation of activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.
- NC HMIS has incorporated continuous quality improvement training designed to help agency
 administrators use the information collected in the HMIS to stabilize and improve project
 processes, measure outcomes, report to funders, and be more competitive in funding requests.

B. Privacy and Security Plan:

All records entered into and downloaded from the HMIS are required to be kept in a confidential and secure manner.

Oversight:

- 1. All Agency Administrators with support of agency leadership must¹:
 - a. Ensure that all staff using the system complete annual privacy update training. Training must be provided by NC HMIS Certified Trainers and based on the NC HMIS Privacy/Security Training curricula.
 - b. Conduct a quarterly review of their provider page visibility, ensuring that it properly reflects any signed Sharing QSOBAAs.
 - c. Modify their adapted Release of Information, and script used to explain privacy to all clients, for any privacy changes made. These documents should also be audited quarterly to ensure they are compliant with current sharing agreements.

¹ In lieu of revised Technical Standards, in 2015 the requirement for a privacy officer was removed. However, the function of data security has been assigned to the Agency Administrator. Reflecting Participation Agreement language, the quarterly review of Provider Visibility has been expressly added to this document.

- d. Ensure user accounts are removed from the HMIS when a staff member leaves the organization, or when changes to a staff member's job responsibilities eliminate their need to access the system.
- e. Report any security or privacy incidents to the CoC's HMIS Local System Administrator. The System Administrator must investigate the incident and run the applicable audit reports. If the System Administrator determines that a breach has occurred and/or the staff member involved violated privacy or security guidelines, the System Administrator must report the issue immediately to the NC HMIS Project Director and CoC Chair. The Local System Administrator must provide a written description of the breach and a summary of his or her findings to the NC HMIS Project Director and CoC Chair. A Corrective Action Plan will be implemented by the agency and the CoC. Components of the plan must include at minimum supervision and retraining. It may also include removal of HMIS license, client notification if a breach has occurred, and any appropriate legal action.
- 2. Criminal background checks must be completed on all Local System Administrators by the Local Lead Agency. All agencies should be aware of the risks associated with any person given access to the system and limit access as necessary. System access levels should be used to support this activity.
- 3. The Local HMIS Lead Agency will conduct routine audits of participating agencies to ensure compliance with the Operating Policies and Procedures. The audit will include a mix of system and on-site reviews. The Local HMIS Lead Agency will document the inspection and any recommendations made, as well as schedule follow-up activities to identify any changes made to document compliance with the Operating Policies and Procedures.

Privacy:

- 1. Any agency that is subject to the Violence Against Women Act restrictions on entering data into an HMIS are not permitted to participate in the NC HMIS project. These providers will maintain a comparable database to respond to grant contracts and reporting requirements.
- 2. All agencies are required to have the **HUD Public Notice** posted and visible to clients in locations where information is collected.
- 3. All Agencies must have a **Privacy Notice**. They may adopt the NC HMIS sample notice or integrate NC HMIS language into their existing notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
 - a. The purpose for collection of client information.
 - b. A brief description of policies and procedures governing privacy including protections for vulnerable populations.
 - c. Data collection, use and purpose limitations. The uses of data must include de-identified data.
 - d. The client right to copy/inspect/correct their record. Agencies may establish reasonable norms for the time and cost related to producing any copy from the record. The agency may say "no" to a request to correct information, but the agency must inform the client of its reasons in writing within 60 days of the request.²
 - e. The client complaint procedure.

² Language was added to clarify the HIPAA rule.

- f. Notice to the consumer that the Privacy Notice may be updated over time and applies to all client information held by the Agency.
- 4. All Notices must be posted on the Agency's website.
- 5. All Agencies are required to have a **Privacy Policy**. Agencies may elect to use the Sample Privacy Policy provided by the NC HMIS project. All Privacy Policies must include:
 - a. Procedures defined in the Agency's Privacy Notice.
 - Protections afforded those with increased privacy risks such as protections for victims of domestic violence, dating violence, sexual assault, and stalking. Protections include at minimum:
 - i. Closing of the profile search screen so that only the serving agency may see the record.
 - ii. The right to refuse sharing if the agency has established an external sharing plan.
 - iii. The right to be entered as an unnamed record, where identifying information is not recorded in the system and the record is located through a randomly generated number (Note: This interface does allow for unduplication by looking at key demographic identifiers in the system.)
 - iv. The right to have a record marked as inactive.
 - v. The right to remove their client record from the system.
 - c. Security of hard copy files: Agencies may create a paper record by printing the assessment screens located within NC HMIS. These records must be kept in accordance with the procedures that govern all hard copy information (see below).
 - d. Client Information storage and disposal: Users may not store information from the system on personal portable storage devices. The Agency will retain the client record for a period of seven years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
 - e. Remote Access and Usage: The Agency must establish a policy that governs use of the system when access is approved from remote locations. The policy must address:
 - i. The strict control of the use of portable storage devices with client identifying information.
 - ii. The environments where use is approved. These environments cannot be open to public access and all paper and/or electronic records that include client identified information must be secured in locked spaces or be password controlled.
 - iii. All browsers used to connect to the system must be secure. If accessing through a wireless network, that network must be encrypted and secured. No user is allowed to access the database from a public or non-secured private network such as an airport, hotel, library or internet café.
 - iv. Access via a cellular network using 4G LTE or similar access is permitted if the connection is protected and encrypted. This permits users to access NC HMIS from cell phones, tablet devices or personal hotspots. If broadcasting a hotspot signal, the device must have a passcode or other security measures to restrict general access.
 - v. All computers accessing the system are owned by the agency.
- 6. Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.
 - a. Client files must be locked in a drawer/file cabinet.

- b. Offices that contain files must be locked when not occupied.
- c. Files cannot be left visible to unauthorized individuals.
- 7. The agency must provide a **Privacy Script** to all staff charged with explaining privacy rights to clients in order to standardize the privacy presentation. The script must:
 - a. Be developed with agency leadership to reflect the agency's sharing agreements and the level of risk associated with the type of data the agency collects and shares.
 - b. The script should be appropriate to the general education/literacy level of the agency's clients.
 - c. A copy of the script should be available to clients as they complete the intake interview.
 - d. All agency staff responsible for client interaction must be trained in use of the Privacy Script.
- 8. Agencies that plan to share information through the system must sign a **Sharing QSOBAA** (Qualified Services Organization Business Associates Agreement).
 - a. The Sharing QSOBAA prescribes the re-release of information shared under the terms of the agreement.
 - b. The Sharing QSOBAA specifies what is shared with whom.
 - c. Agencies may share different portions of a client record with different partners, and may sign multiple Sharing QSOBAAs to define a layered sharing practice.
 - d. The signatories on the Sharing QSOBAA must be representatives who have been authorized to sign such an agreement by the senior agency's leadership and/or the Agency Board of Directors.
 - e. All members of a Sharing QSOBAA must be informed that by sharing, they are creating a common electronic record that can impact data reflected in their reports. Members of the sharing group must agree to communicate and negotiate data conflicts.
 - f. No agency may be added to the agreement without the approval of all other participating agencies.
 - i. Documentation of that approval must be available for review and may include such items as meeting minutes, email response or other written documentation.
 - ii. Agency approval of additions or changes to a Sharing QSOBAA must be approved by a staff member with authorization to make such decisions on behalf of their agency.
 - g. When a new member is added to the Sharing QSOBAA, the related Visibility Group must be end-dated and a new Visibility Group must be begun. A new member may not be added to an existing External Visibility Group.
- 9. Agencies must have appropriate **Release(s) of Information** that are consistent with the type of data the agency plans to share.
 - a. The agency must have adopted the appropriate NC HMIS Basic Release of Information that is applicable to their sharing practice in order to share basic demographic and transactional information.³
 - b. If the agency integrates the NC HMIS Release into their existing releases, the release must include the following components:
 - i. A brief description of NC HMIS including a summary of the HUD Public Notice.

³ Beyond light touch projects that do not collect or share protected data elements, all projects are encouraged to engage their CoC to discuss and implement the 2016 Reciprocal Release of Confidential Information. This release includes a privacy discussion and can be completed one time to include all sharing partners for the specified time limit and purpose.

- ii. A specific description of the Client Profile Search Screen and an opportunity for the client to request that the screen be closed.
- iii. A listing of the Agency's sharing partners (if any) and a description of what is shared. These sections must reflect items negotiated in the agency's Sharing QSOBAA.
- iv. A defined term of the Agreement⁴.
- v. Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.
- vi. If an agency is subject to stricter privacy laws (ex. 42 CFR Part 2), that only permit external sharing between a subset of their provider pages, all provider pages within that agency that will be sharing must be listed on any Sharing QSOBAAs to which the agency is a party.
- vii. For agencies subject to 42 CFR Part 2, both internal and external sharing will done in with the law.
- c. A HIPAA compliant **Authorization to Release Confidential Information** is also required if the planned sharing includes any of the following:
 - i. Case notes/progress notes
 - ii. Information or referral for health, mental health, HIV/AIDS, substance use disorders, or domestic violence.
 - iii. To streamline paper, the basic HMIS Release may be adapted to include the language necessary for a HIPAA compliant release if sharing practice is likely to include the items above in ii.⁵
- 10. An **electronic ROI** is required to enable sharing of any particular client's information between any provider pages on the system.
 - a. Agencies should establish **Internal Sharing** or sharing only between their agency's provider pages, by creating visibility group(s) that include all of the agency's provider pages where sharing is planned and allowed by law.
 - i. Internal Sharing does not require a signed Client Release of Information unless otherwise specified by law. (However, an electronic release must still be entered into the system to permit Internal Sharing.)
 - ii. Unless otherwise specified by law, when new provider pages are added to the Agency tree, they may be included in the existing internal visibility group. The information available to that provider page will include all information covered by the visibility group from the beginning date of the Group sharing will be retroactive.
 - b. Agencies may elect to share information with other agencies, a practice known as **External Sharing**, by negotiating a Sharing QSOBAA (see 8 above).
 - A signed and dated Client Release of Information must be stored in the Client Record (paper or scanned onto the system) for all electronic ROIs that release data between different agencies.

⁴ The change reflects changes in the HIPAA rule that allow for Releases the cover a term – rather than a specific date. The date in the electronic ROI will reflect the specific date defined by the term. The term should not be arbitrary but reflect the anticipated term of the agencies planned coordinating activities.

⁵ Recognizes existing practice by participating CoCs.

- ii. Retroactive Sharing, or sharing historic information between two or more agencies without client consent is not permitted on the system. To prevent retroactive sharing, a new visibility group must be constructed whenever a new sharing partner is added to the agency's existing sharing plan/Sharing QSOBAA.
- c. MCAH has defined a procedure for pulling a client's housing history across the entire database to verify a client's eligibility for specific housing options. This procedure requires that:
 - i. Consent for obtaining the client's housing history is written into the Outreach Sharing Plan section of the agency's Release of Information, and that the client has agreed to permit this activity by initialing this section.
 - ii. An electronic copy of the signed Release of Information including the client authorization to release the housing history has been attached to the client record on the system.
- 11. The Agency must have a procedure to provide privacy notices to clients that are visually or hearing impaired or do not speak English as a primary language. For example:
 - a. Provisions for Braille or audio
 - b. Available in multiple languages
 - c. Available in large print

12. Agencies are required to maintain a culture that supports privacy.

- a. Staff must not discuss client information in the presence of others without a need to know.
- b. Staff must eliminate unique client identifiers before releasing data to the public.
- c. The Agency must configure workspaces for intake that supports the privacy of client interaction and data entry.
- d. User accounts and passwords cannot be shared between users, or visible for others to see.
- e. Project staff must be educated to not save reports with client identifying data on portable media. Agencies must be able to provide evidence of this training through written training procedures or meeting minutes.
- f. Staff must be trained regarding use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
 - i. By-name housing lists may not be printed with client identifying information without obtaining written client consent.

Data Security:

- 1. All licensed Users of the System must be assigned **Access Levels** that are consistent with their job responsibilities and their business "need to know".
- 2. All computers must have **network threat protection software with automatic updates**.
 - a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure that:
 - i. The threat protection software is up-to-date.
 - ii. That various system updates are automatic, unless a specific, documented reason exists to maintain an older version of the software.
 - iii. Operating System updates are run regularly.
- 3. All computers must be protected by a firewall.

- a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure that:
 - i. For single computers, the software and versions are current.
 - ii. For networked computers, the firewall firmware is current.
- 4. Physical access to computers that connect to the HMIS must be controlled.
 - a. All workstations must be in secured locations (locked offices).
 - b. Workstations must be logged off when not manned.
 - c. All workstations must be password protected.
 - d. All HMIS Users are prohibited from using a computer that is available to the public.
- 5. A **Plan for Remote Access** must exist if staff will be using the NC HMIS System outside of the office such as working from home. Concerns addressed in this plan should include the privacy surrounding off-site access.
 - a. The computer and environment of entry must meet all the standards defined above.
 - b. Downloads from the computer may not include client identifying information.
 - c. Staff must use an agency-owned computer.

Remember that your information security is never better than the trustworthiness of the staff you license to use the system. The data at risk is your own and that of your sharing partners. If an accidental or purposeful breach occurs, you are required to notify MCAH. A system audit of which users have touched a client record can be completed by a System Administrator.

IV. DATA BACKUP AND DISASTER RECOVERY PLAN:

The HMIS is a critically important tool in responding to catastrophic events. The NC HMIS data is housed in a secure server bank in Shreveport, Louisiana with nightly off-site backup. In case of a significant system failure at the main data center, NC HMIS can be brought back online within approximately four hours.⁶

A. Backup Details for NC HMIS

See "Bowman Systems Securing Client Data" for a detailed description of data security and Bowman's Disaster Response Plan

- 1. The NC HMIS Project maintains the highest level disaster recovery service by contracting with Bowman Systems for Premium Disaster Recovery that includes:
 - a. Off site, out-of-state backup on a different Internet provider, and a separate electrical grid.
 - b. Regular backups of the application server and regular alignment with the current version of the live NC HMIS site.
 - c. Near-instantaneous backups of the NC HMIS database (information is backed up within 5 minutes of entry.)
 - d. Additional nightly off site replication for protection in case of a primary data center failure.

⁶ MCAH will update the disaster plan from time to time based on best practice recommendations, lessons learned from actual disasters, and other conditions that may change on the ground.

e. Priority level response that ensures downtime will not exceed 4 hours.

B. NC HMIS Project Disaster Recovery Plan:

In the event of a major system failure:

- 1. The NC HMIS Project Director or designee will notify all participating CoCs and Local System Administrators should a disaster occur at Bowman Systems which affects the functionality and availability of ServicePoint. When appropriate, MCAH will notify Local System Administrators/CoC Leadership of the planned recovery activities and related time lines.
- 2. Local/assigned System Administrators are responsible for notifying their local agencies and users.
 - a. If a failure occurs after normal business hours, NC HMIS staff will report the system failure to Bowman Systems using their emergency contact line. An email will also be sent to local System Administrators no later than one hour following identification of the failure.
- 3. The NC HMIS Project Director or designated staff will notify Bowman Systems if additional database services are required.

C. Local HMIS Lead Agencies:

Local HMIS Lead Agencies within CoCs have an obligation to secure and backup key information necessary for the administration and functioning of the NC HMIS Project within their own jurisdiction.

- 1. NC HMIS Lead Agencies are required to back-up their internal data system nightly.
- Data back-ups must include a solution for maintaining at least one copy of key internal data off-site for participating agency internal data systems. This location must be secure with controlled access.
- 3. Local HMIS Lead Agencies must have a disaster recovery plan documented which outlines the policies and procedures for the CoC in case of a major system disaster.

a. Agency Emergency Protocols must include:

- i. Emergency contact information including the names/organizations and numbers of local responders and key internal organization staff, designated representatives of the CoCs, the local HMIS Lead Agency, and the NC HMIS Project Director.
- ii. Delegation of key responsibilities. The plan should outline which persons will be responsible for notification and the timeline of notification.
- 4. In the event of a local disaster:
 - a. NC HMIS in collaboration with the local Lead Agencies will also provide information to local responders as required by law and within best practice guidelines.
- 5. NC HMIS in collaboration with the local Lead Agencies will also provide access to organizations charged with crisis response within the privacy guidelines of the system and as allowed by law.

V. SYSTEM ADMINISTRATION:

The position of the Local System Administrator/System Administrator I is key to the success of the CoC. This individual is responsible for overseeing the operation of the NC HMIS project in either a local CoC or a local Planning Body/Jurisdiction. This position will be referred to in this section as a Local System Administrator. The following describes the typical list of responsibilities for a Local System Administrator within a local CoC.

A. Training Requirements for a Local System Administrator:

- 1. All trainings required for standard users on the system.
- 2. Provider Page Training and Workflow Training for all workflows used in their CoC.
- 3. Reports Training (Local System Administrators are tasked with supporting data quality as well as monitoring outcomes and other performance issues).
- 4. System Administrator Training This training usually takes place several weeks after a new Local System Administrator has been in their position.
- 5. Continuous Quality Improvement Training
- 6. All System Administrators are required to read and understand the HUD Data Standards that underpin the rules of the HMIS.
- 7. HUD Initiative Training (AHAR, PIT, APR, etc.)

B. Meetings Local System Administrators Are Required to Participate In:

- 1. Regular CoC Meetings and/or workgroups as determined by the CoC.
- 2. The CoC Reports Committee or meetings where data use and release is discussed.
- 3. The Monthly System Administrator Call-In (2nd Tuesday of every Month at 10 am).
- 4. Regular Agency Administrator/User Meetings within the CoC

C. Local System Administrator Responsibilities:

1. Help Desk and Local Technical Support

- a. The Local System Administrator provides front-line technical support/technical assistance for users and agencies within the CoCs they support. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their CoCs. Where applicable, the Local System Administrator may train Agency Administrators to do fundamental system support activities, minimizing the burden for support on the Local System Administrator.
- b. The Local System Administrator builds relationships within the agencies they serve, working to understand the business practices of these agencies, and assisting them with mapping these business practices onto the system. The HMIS lead staff will be available, on request, to provide advanced technical support if requested by the Local System Administrator/Local CoC.

2. User and Provider Page Setup

Local System Administrators will set up new users in NC HMIS, or delegate the task to their Agency Administrators. In the case of delegating this task, they will train Agency Administrators on proper setup of user accounts.

- b. Local System Administrators will supervise license allocation for users and agencies within the CoC they serve. When necessary or requested, the Local System Administrator will purchase additional licenses directly for the CoC.
- c. The Local System Administrator will work in partnership with agencies and Agency Administrators in the CoC they serve to ensure that agency provider pages are set up correctly per the HUD Data Standards.
- d. The Local System Administrator will work directly with Agency Administrators and agencies, through a collaborative process to ensure proper visibility is established for the provider pages in the CoC they serve. The agency, at all times will be directly involved in the visibility process, and will sign off on any visibility changes made.

3. Communication

- a. The Local System Administrator will host regular User/Agency Administrator meetings for users of the system in the CoC they serve. These meetings will cover important news on changes in the system, items of local interest within the CoC, and issues identified by the Local System Administrator within the CoC.
- b. The Local System Administrator will share any key news items of local impact, interest, or relevance to the users and Agency Administrators in the CoC they serve.

4. Training

- The Local System Administrator will inform Agency Administrators and local users of required and recommended system trainings that are available through the NCHMIS training website.
- b. The Local System Administrator will provide localized training to CoC users and agencies for issues or items of importance related to the local community. These may include local PIT/HIC training, guidance on local data cleanup, or specific guidance on proper workflow and system usage that are identified through an audit process.
- c. The Local System Administrator will provide training for local users on initiatives identified and agreed upon between the Local System Administrator and the local CoC.

5. **HUD Projects and Activities** (Including AHAR, PIT/HIC, HMIS APR, SPMs, HUD NOFA):

- a. The Local System Administrator will work directly with CoC leadership to complete CoC wide HUD activities such as the AHAR, PIT/HIC, System Performance Measures and the CoC HUD NOFA submission. The Local System Administrator will also assist the CoC with work surrounding state and local funding initiatives which require data from the HMIS.
- b. The Local System Administrator will assist with completing the HMIS APR for the CoC they serve in.
- c. The Local System Administrator will provide support/technical assistance for agencies completing the CoC APR within their jurisdiction. This includes providing technical assistance with problem solving data quality issues, reporting issues, etc.

6. Local CoC Reporting

- a. The Local System Administrator will be responsible for providing reports to the CoC it serves as the HMIS Lead for, regarding requests made by the local CoC for data. These include, but are not limited to:
 - i. CoC wide demographics, performance outcomes, and data quality reports that are used for informational and evaluation purposes
 - ii. Final reports on submissions made to HUD for various HUD mandated activities such as the AHAR, PIT/HIC, System Performance Measures and the HMIS APR
 - iii. General requests for data of interest to the local CoC
 - iv. Any additional reporting requirements initiated by HUD that are required of the local CoC.
 - b. The Local System Administrator will train local Agency Administrators and users on how to run reports at the agency level for the purpose of monitoring data quality and outcomes on a regular basis in the agencies that it serves.
 - c. The Local System Administrator will be responsible for generating reports on activities and expenditures to the local CoC which he or she serves, as directed by the CoC.

7. CoC/Agency/Project Auditing and Monitoring

- a. The Local System Administrator will work with the local CoC to establish local HMIS policies and procedures using the system-wide Policies and Procedures document as a frame. The Local System Administrator will work with local CoC leadership and Agency Leadership/Administrators to update this document as needed.
- b. The Local System Administrator, collaborating with the Agency Administrators in the CoC which they serve, will audit agencies and projects to ensure compliance. Audit activities may include, but not be limited to:
 - i. Ensuring the agency has all required contracts, agreements and policies in place for participation on the HMIS.
 - ii. Verifying system users have completed all required training for system participation.
 - iii. Ensuring provider pages are correctly setup per HUD Standards Guidance.
 - iv. Ensuring agencies are following appropriate data entry protocol per the funding sources from which they receive funding.
 - v. Monitoring implementation of privacy, to ensure client rights are being protected.
 - vi. Regularly monitoring data quality, completeness and outcomes to ensure projects are maintaining a high level of compliance with HUD and CoC requirements.

(Note: Completion of these tasks are the responsibility of both the HMIS Lead (the Local System Administrator) and the agencies which participate on the system in the local CoC. The Local System Administrator can create a policy under which local agencies are responsible for monitoring themselves, and instruct them on application of that policy. The Local System Administrator can then assist agencies with implementing the policy locally to ensure compliance. The HMIS Lead has released a series of tools to help local HMIS Leads with the process of developing compliance tools.)

VI. DATA QUALITY PLAN AND WORKFLOWS:

A. Provider Page Set-Up:

- 1. Provider Pages are appropriately named per the NC HMIS naming standards **Agency Name – Location (CoC Name) Project Name Project Funding Descriptors.**
 - For example: The Salvation Army Guilford CoC Emergency Shelter Project ESG. Identification of funding stream is critical to completing required reporting to funding organization.
- 2. Inactive Provider Pages must be properly identified with "XXX Closed" followed by the year of the last project exit >Provider Page Name. For example, XXXClosed2016. For a detailed description of closing inactive provider pages, see the MCAH Procedure for Closing Inactive HMIS Provider Pages.
 - All clients in inactive/closed provider pages must be closed. Audit and clean-up of inactive pages includes closing all open services and incomes and exiting all unexited clients.
- 3. The primary provider contact information must be current and reflect where the services are being delivered.
- 4. HUD Data Standards must be fully completed on all provider pages:
 - a. CoC code must be correctly set. If a project stops functioning in the CoC, the appropriate end date must be added to the CoC Code Entry.
 - b. Project type codes must be correctly set.
 - c. If a project is an Emergency Shelter, the Method for Tracking Emergency Shelter
 Utilization field must be correctly set. If a project is not an Emergency Shelter, this field should be left null or "-Select-."
 - d. Geocodes must be set correctly.
 - e. The Continuum Project field must be properly completed.
 - f. If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type must be correctly filled out.
 - g. Bed and Unit Inventories must be set for applicable residential projects. Bed and Unit Inventories for all projects should be reviewed at least annually, and updated as needed.
 - h. Federal Partner Funding Source values should be selected for projects funded by one of the Federal Partners. Federal Partner Funding Sources are to be updated at least annually. If a project is not funded by a Federal Partner Funding Source, the option selected should be "NA."
 - i. Assessments with the appropriate 3.917 Living Situation question must be assigned based on Program Type
 - i. Emergency Shelter, Street Outreach or Safe Haven projects should use 3.917a assessment.
 - ii. All other project types should use the 3.917b assessment.

B. Data Quality Plan:

- 1. Agencies must require documentation at intake of the homeless status of consumers according to the reporting and eligibility guidelines issued by HUD. The "order of priority" for obtaining evidence of homeless status are (1) third party documentation, (2) worker observations, and (3) certification from the person. Lack of third party documentation may not be used to refuse emergency shelter, outreach or domestic violence services. Local CoCs may designate the local HARA's to establish the homeless designation and maintain related documentation.
- 2. 100% of the clients must be entered into NC HMIS within 15 days of data collection. If the information is not entered on the same day it is collected, the agency must assure that the date associated with the information is the date on which the data was collected by:
 - Entering data into the system using the Enter Data As function if needed.
 - b. Entering the entry/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or
 - c. Backdating the information into the system⁷
- 3. All staff are required to be trained on the definition of Homelessness.
 - a. NC HMIS provides a homeless definition crosswalk and a 3.917 flowchart to support agency level training.
 - b. There must be congruity between the following NC HMIS case record responses, based on the applicable homeless definition. Elements to HUD Data Standard Element 3.917a or 3.917b must be properly completed.
- 4. The agency has a process to ensure the First and Last Names are spelled properly and that the DOB and social security numbers are accurate.
 - a. Identification (ID) should be requested at intake to support proper spelling of the client's name, as well as, the recording of the DOB.
 - b. If no ID is available, staff should request the legal spelling of the person's name. **Staff** should not assume they know the spelling of the name.
 - c. Projects that serve the chronic and higher risk populations are encouraged to use the scan card process within ServicePoint to improve un-duplication and to improve the efficiency of recording services.
 - d. Data for clients with significant privacy needs may be entered under the "unnamed record" feature of the system. However, while identifiers are not stored using this feature, great care should be taken in creating the unnamed algorithm by carefully entering the first and last name and the DOB. Names and ServicePoint ID number crosswalks (that are required to find the record again) must be maintained off-line in a secure location.
- 5. Income and non-cash benefits must be updated at least annually and at exit, or at the frequency specified by program requirements.
 - a. Annual Reviews will be completed in the 30 days prior to the anniversary of the client's entry into services.
 - b. For PH projects with long stays, at the annual review, incomes that are over two years old must be updated by closing the existing income and entering a new income record (even

⁷ Clarification of existing policy.

- if the income has not changed). This assures that the income has been confirmed and will pull properly into reports.
- c. For all other projects, any income(s) no longer available to the client should be closed on the day before intake (if data is shared from another provider), annual review and exit. If the income is over two years old, please follow the procedure defined above. 8
- 6. Agencies must have an organized exit process that includes:
 - Educating clients and staff on the importance of planning and communicating regarding discharge destination and outcomes. This must be evidenced through staff meeting minutes or other training logs and records.
 - b. Discharge Destinations must be properly mapped to the HUD Destination Categories.
 - i. NC HMIS provides a Destination Definition document to support proper completion of exits. All new staff must have training on this document.
 - ii. Projects must have defined processes for collecting this information from as many households as possible.⁹
 - c. There is a procedure for communicating exit information to the person responsible for data entry if not entering real time.
- 7. Agency Administrators/staff regularly run data quality reports.
 - a. Report frequency should reflect the volume of data entered into the System. Frequency for funded projects will be governed by Grant Agreements, HUD reporting cycles, and local CoC Standards. However, higher volume projects such as shelters and services only projects must review and correct data at least monthly. Lower volume projects such as Transitional and Permanent Housing must run following all intakes and exits and quarterly to monitor the recording of services and other required data elements including annual updates of income and employment.¹⁰
 - b. The project entry and exit dates should be recorded for all participants upon project entry and exit. Entry dates should record the first day of service or project entry. A new project entry date is required for each period/episode of service. Exit dates should record the last day of residence before the participant left the shelter/housing project or the last day a service was provided.
 - c. Data quality screening and correction activities must confirm all required data is complete, and should include:
 - Correction of missing or inaccurate information in (red) Universal Data Element Fields.
 - ii. Completion of the Relationship to Household assessment questions.
 - iii. Completion of the 3.917 Living Situation series of questions.
 - iv. Completion of the 3.16 Client Location question.
 - v. Completion of the Domestic Violence questions.

⁸ Reflecting the 2015 data quality review of client income, staff are being asked to close any incomes that are more than two years old and to enter a new income with the income review process and to prevent the further accumulation of open old incomes to add closing of the income to the routine discharge processes.

⁹ Data indicates that some providers have regressed in completing discharge destination in the last year and accurately completing this field is vitally important to success. Beyond data entry issues, projects must define processes that collect this information from as many households as possible.

¹⁰ Additional detail was added for low volume environments that are required to annually update income and employment.

- vi. Completion of the HUD Verifications for all Income, Non Cash Benefits, Health Insurance and Disability sub-assessments.
- vii. Completion of the Residential move-in-date for all PH: RRH projects.
- viii. Completion of all of the project specific data elements, as required by the various funding sources supporting the project.
- d. Providers must audit unexited clients in the system by using the Length of Stay and unexited Client Data Quality Reports.
- 8. CoCs and Agencies are required to review Outcome Performance Reports/System Performance Measures reports defined by HUD and other funding organizations. Measures are based on Project Type. The CoC Lead Agency, in collaboration with the CoC Reports Committee or other designated CQI Committee, establishes local benchmark targets for performance improvement on shared measures.
- 9. Agencies are expected to participate in the CoC's Continuous Quality Improvement Plan. See CQI materials designed to support Data Quality through Continuous Quality Improvement.

C. Workflow Requirements:

- 1. Provider Page Configuration settings must use the assessments that are appropriate for the funding stream.
- 2. Users performing data entry must use the latest copies of the workflow guidance documents.
- 3. If using paper, the intake data collection forms must align correctly with the workflow.
- 4. 100% of clients must be entered into the system no later than 15 days from the intake date.
- 5. Agencies must actively monitor project participation and client exits. Clients must be exited within 30 days of last contact, unless project guidelines specify otherwise.
- 6. All required project information must be collected.
 - a. All HMIS participants are required to enter at minimum the Universal Data Elements.
 - b. Projects that serve clients over time are required to complete additional updates as defined by the funding stream. If the Agency is not reporting to a funding stream, they are encouraged to use the Michigan Update form.

VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

A. Electronic Data Exchanges:

- 1. Agencies electing to either import or export data from the NC HMIS must assure:
 - a. Data Import The quality of the data being loaded onto the System meets all the data quality standards listed in this policy including timeliness, completeness, and accuracy. In all cases, the importing organization must be able to successfully generate all required reports including but not limited to the CoC APR, the ESG CAPER, or other required reports as specified by the funder.
 - Data Export Agencies exporting data from NC HMIS must certify the privacy and security rights promised participants on the HMIS are met on the destination system. If the destination system operates under less restrictive rules, the client must be fully

- informed and approve the transfer during the intake process. The agency must have the ability to restrict transfers to those clients that approve the exchange.
- 2. MSHDA/MCAH or your local CoC may elect to participate in de-identified research data sets to support research and planning.
 - a. De-identification will involve the masking or removal of all identifying or potential identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.
 - b. Geographic analysis will be restricted to prevent any data pools that are small enough to inadvertently identify a client by other characteristics or combination of characteristics.
 - c. Projects used to match and/or remove identifying information will not allow a reidentification process to occur. If retention of identifying information is maintained by a "trusted party" to allow for updates of an otherwise de-identified data set, the organization/person charged with retaining that data set will certify that they meet medical/behavioral health security standards and that all identifiers are kept strictly confidential and separate from the de-identified data set.
 - d. CoCs will be provided a description of each study being implemented. Agencies or CoCs may opt out of the study through a written notice to MCAH or the study owner.
- 3. MSHDA/ MCAH or your local CoC may elect to participate in identified research data sets to support research and planning.
 - a. All identified research must be governed through an Institutional Research Board including requirements for client informed consent.
 - b. CoCs will be provided a description of each study being implemented. Agencies may opt out of the study through a written notice to MCAH or the study owner.

APPENDIX A: DOCUMENT CHECKLIST FOR NC HMIS AGENCIES¹¹

All agencies that participate on the NC HMIS project are required to keep either a physical or electronic binder containing each of the following fully executed documents.

racts, Agreements, Policies and Procedures
Fully Executed MCAH Memorandum of Understanding: (Only the HMIS and/or CoC Lead Agency is required to maintain this document.) HMIS Policies and Procedures Document for the CoC: (Only the HMIS and/or CoC Lead Agency are required to maintain this document. It must have been formally approved by the CoC as evidenced by CoC meeting minutes.) Administrative QSOBAA: Fully signed and executed Participation Agreement: Fully signed and executed Sharing QSOBAAs: (Only necessary if the agency has engaged in external sharing). Document should be fully signed and executed. If any changes have been made to a Sharing QSOBAA written documentation and approval of those changes by all parties must be included also. Confidentiality Policy: (As approved by Agency's Board of Directors) Grievance Policy: (As approved by Agency's Board of Directors)
IMIS User Documentation
User Agreement and Code of Ethics Document: Fully initialed and signed. A User Agreement and Code of Ethics document must be on file for all users currently licensed on NC HMIS. It is recommended that the User Agreement and Code of Ethics documents for employees no longer at the agency be kept with their separated employee file User Training Documentation/Certification: Documentation of all NC HMIS trainings completed by active users are to be kept in the NC HMIS binder. These trainings must be certified by either MCAH, a certified MCAH trainer, other identified statewide trainers or CoC identified trainers for CoC initiatives. Evidence of training include training completion certificates, successfully passed training quizzes, training logs, etc.
ncy Privacy Documents
 HUD Posted Public Notice: HUD Public Notices should be posted in locations where clients are seen. Agency Privacy Notice: Agencies can adopt the sample MCAH Notice or customize the notice to address agency needs. Agency Privacy Policy: Agencies can adopt the sample MCAH Policy or customize the policy to address agency needs.

¹¹ The previous Appendix A, has been removed due to a full revamping of the MCAH training protocol and documentation storage functionality on our website. MCAH will be releasing an updated version of this document as a real time tool during the HUD FY 2016.

Current Agency Privacy Script: Developed and approved by agency leadership. The policy
should be based on a current version of the CoC or Agency Release of Information.
Current Agency Release of Information: Must specify all sharing partners and the sharing
outreach plan, as applicable.

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

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	2963	3054	2991
Emergency Shelter Total	1682	1,682	1,680
Safe Haven Total	0	0	0
Transitional Housing Total	446	420	343
Total Sheltered Count	2128	2102	2023
Total Unsheltered Count	835	952	968

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	348	382	485
Sheltered Count of Chronically Homeless Persons	165	127	227
Unsheltered Count of Chronically Homeless Persons	183	255	258

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

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	342	347	301
Sheltered Count of Homeless Households with Children	266	282	236
Unsheltered Count of Homeless Households with Children	76	65	65

Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	242	136	176	156
Sheltered Count of Homeless Veterans	150	82	105	100
Unsheltered Count of Homeless Veterans	92	54	71	56

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

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	2526	832	1145	67.59%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	584	36	316	57.66%
Rapid Re-Housing (RRH) Beds	757	193	557	98.76%
Permanent Supportive Housing (PSH) Beds	1820	0	1618	88.90%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	5,687	1,061	3636	78.60%

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

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	219	1533	1668

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

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	89	116	173

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	410	467	757

FY2017 - Performance Measurement Module (Sys PM)

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

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2017 DATA: If you provided revised FY2017 data, the original FY2017 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)			4	Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	5693		5674	77		61	-16	32		32	0
1.2 Persons in ES, SH, and TH	6200		6157	90		77	-13	35		37	2

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added 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.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

	Universe (Persons)			4	Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	5725		5715	111		150	39	41		59	18
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	6247		6218	124		164	40	47		63	16

FY2017 - 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.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Exited to a Housing D	Persons who a Permanent Destination (2 s Prior)	Returns to	Homelessr han 6 Mont								Number of Returns in 2 Years	
	Revised FY 2016	FY 2017	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO		48		3	6%		4	8%		3	6%	10	21%
Exit was from ES		1431		145	10%		101	7%		76	5%	322	23%
Exit was from TH		374		10	3%		7	2%		9	2%	26	7%
Exit was from SH		0		0			0			0		0	
Exit was from PH		1047		18	2%		20	2%		32	3%	70	7%
TOTAL Returns to Homelessness		2900		176	6%		132	5%		120	4%	428	15%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2017 - 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 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2963	3054	91
Emergency Shelter Total	1682	1682	0
Safe Haven Total	0	0	0
Transitional Housing Total	446	420	-26
Total Sheltered Count	2128	2102	-26
Unsheltered Count	835	952	117

Metric 3.2 - Change in Annual Counts

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	6322		6258	-64
Emergency Shelter Total	5800		5748	-52
Safe Haven Total	0		0	0
Transitional Housing Total	576		616	40

FY2017 - 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	708		638	-70
Number of adults with increased earned income	34		33	-1
Percentage of adults who increased earned income	5%		5%	0%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	708		638	-70
Number of adults with increased non-employment cash income	129		126	-3
Percentage of adults who increased non-employment cash income	18%		20%	2%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	708		638	-70
Number of adults with increased total income	155		146	-9
Percentage of adults who increased total income	22%		23%	1%

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	279		261	-18
Number of adults who exited with increased earned income	36		41	5
Percentage of adults who increased earned income	13%		16%	3%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	279		261	-18
Number of adults who exited with increased non-employment cash income	47		47	0
Percentage of adults who increased non-employment cash income	17%		18%	1%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	279		261	-18
Number of adults who exited with increased total income	79		83	4
Percentage of adults who increased total income	28%		32%	4%

FY2017 - 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	5571		5624	53
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.	1121		1192	71
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)	4450		4432	-18

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	7138		6853	-285
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.	1347		1397	50
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.)	5791		5456	-335

FY2017 - 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 FY2017 (Oct 1, 2016 - Sept 30, 2017) 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	309		95	-214
Of persons above, those who exited to temporary & some institutional destinations	36		16	-20
Of the persons above, those who exited to permanent housing destinations	50		21	-29
% Successful exits	28%		39%	11%

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

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	6389		6254	-135
Of the persons above, those who exited to permanent housing destinations	2772		2709	-63
% Successful exits	43%		43%	0%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	1661		1640	-21
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1610		1618	8
% Successful exits/retention	97%		99%	2%

FY2017 - SysPM Data Quality

NC-503 - North Carolina Balance of State CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

FY2017 - SysPM Data Quality

		All E	S, SH			All TH All PSH, OPH			All RRH				All Street Outreach							
	2013- 2014	2014- 2015	2015- 2016	2016- 2017	2013- 2014	2014- 2015	2015- 2016	2016- 2017	2013- 2014	2014- 2015	2015- 2016	2016- 2017	2013- 2014	2014- 2015	2015- 2016	2016- 2017	2013- 2014	2014- 2015	2015- 2016	2016- 2017
1. Number of non- DV Beds on HIC	1699	1701	1784	1763	826	773	556	553	1388	1490	1659	1731	229	211	396	317				
2. Number of HMIS Beds	1108	1113	1134	1152	540	509	296	308	1319	1394	1510	1566	216	211	396	317				
3. HMIS Participation Rate from HIC (%)	65.21	65.43	63.57	65.34	65.38	65.85	53.24	55.70	95.03	93.56	91.02	90.47	94.32	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	5674	5392	5683	5751	651	662	566	608	1645	1698	1811	1788	1147	1187	2133	2295	2	70	61	20
5. Total Leavers (HMIS)	4776	4531	4879	4982	399	456	375	416	257	250	255	182	759	775	1377	1481	0	12	45	20
6. Destination of Don't Know, Refused, or Missing (HMIS)	2015	2113	2041	1715	38	53	64	71	7	8	3	0	54	56	71	38	0	7	14	6
7. Destination Error Rate (%)	42.19	46.63	41.83	34.42	9.52	11.62	17.07	17.07	2.72	3.20	1.18	0.00	7.11	7.23	5.16	2.57		58.33	31.11	30.00

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

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/31/2018	

Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/30/2018	No
2018 HIC Count Submittal Date	4/30/2018	No
2017 System PM Submittal Date	5/31/2018	Yes



North Carolina Balance of State Continuum of Care

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NC Balance of State Continuum of Care Standards Permanent Supportive Housing

OVERVIEW

The NC Balance of State Continuum of Care has developed these program standards to provide specific guidelines for how programs can operate to have the best chance of ending homelessness. These guidelines create consistency across the Balance of State, protect our clients by putting their needs first, and provide a baseline for holding all CoC programs to a specific standard of care.

The Department of Housing and Urban Development (HUD) requires every Continuum of Care to evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program and report to HUD (24 CFR 578.7(a)7). In consultation with recipients of ESG program funds within the geographic area, CoCs must establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individual and families for housing and services.

In consultation with recipients of ESG and CoC program funds within the geographic area, CoCs must establish and consistently follow written standards for providing CoC assistance. At a minimum, these standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility and determining the process for prioritizing eligible households in emergency shelter, transitional housing, rapid rehousing, and permanent supportive housing programs (24 CFR 578.7(a)(9)).
- For permanent supportive housing programs, program standards to define policies and procedures for prioritization of eligible households.
- Policies and procedures for coordination among emergency shelters, transitional housing programs, essential service providers, homelessness prevention programs, rapid rehousing programs, and permanent supportive housing programs.
- Definitions for participation in the CoC's Homeless Management Information System (or comparable database for domestic violence or victims' service programs).

The Balance of State Continuum of Care developed the following Permanent Supportive Housing program standards to ensure:

Program accountability to individuals and families experiencing homelessness,
 specifically populations at greater risk or with the longest histories of homelessness

- Program compliance with the Department of Housing and Urban Development and the Department of Veteran Affairs
- Service consistency within programs
- Adequate program staff competence and training, specific to the target population served

EXPECTATIONS

All program grantees using Department of Housing and Urban Development Continuum of Care and the Department of Veteran's Affairs VA Supportive Housing (VASH) funding must adhere to these performance standards. Programs funded through the Continuum of Care will be monitored by the Balance of State Continuum of Care to ensure compliance. The BoS CoC recommends that permanent supportive housing programs funded through other funding sources also follow these standards. These performance standards attempt to provide a high standard of care that places community and client needs first. Based on proven best practices, this high standard of care is necessary to achieve our goal of ending homelessness in the BoS CoC.

PERMANENT SUPPORTIVE HOUSING

Permanent supportive housing programs provide safe, stable homes through long-term rental assistance, paired with long-term intensive case management services, to highly vulnerable individuals and families with complex issues who are otherwise at risk of serious health and safety consequences from being homeless. This model seeks to provide a stable housing option and the necessary supportive services for individuals and families who would not succeed in other permanent housing settings. Permanent supportive housing is designed for persons with disabilities, including severe mental health, physical health, HIV/AIDS, and/or substance abuse disorders, especially targeting individuals and families meeting the Department of Housing and Urban Development's definition of chronic homelessness. Types of permanent supportive housing include HUD CoC Permanent Supportive Housing, HUD-VASH, and other programs that combine services and rental assistance in the community specifically to house this population.

Successful permanent supportive housing programs use the national best practice called Housing First, the model in which programs house all persons immediately without preconditions such as sobriety, income, or behavioral requirements and pair supportive services matched to the needs of the household. Long-term studies demonstrate that individuals and families experiencing homelessness, even chronic homelessness, can move into a home with case management, follow a standard lease, and successfully remain in housing over a long period of time. Permanent supportive housing programs with preconditions for entry and overly burdensome program rules cause this high-need population to regularly fail in housing or drive programs to target lower-need individuals who do not need permanent supportive housing programs to successfully remain housed.



¹ https://www.gpo.gov/fdsys/granule/CFR-2013-title24-vol3/CFR-2013-title24-vol3-part578/content-detail.html

² http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448313/pdf/0940651.pdf

Permanent supportive housing programs should participate in their Regional Committee's coordinated assessment process, including the local prioritization of individuals for housing. In the BoS CoC, each community utilizes the Prevention and Diversion screening tool and the Individual and Family VI-SPDAT Prescreen Tools to set priorities and housing triage methods, while permanent housing programs use the Case Management Tool for more developed housing placement purposes and for intensive case management over time. Communities use the VI-SPDAT to prioritize individuals and families experiencing homelessness based on an acuity score that indicates the type of housing intervention best suited to their ongoing needs. Permanent supportive housing programs are intended to serve the individuals and families with the longest time homeless and the highest needs.

DEFINITIONS

Acuity: When using the VI-SPDAT prescreens, acuity means the presence of a presenting issue based on the prescreening score. Acuity on the prescreening tool is expressed as a number with the higher score representing more complex, co-occurring issues likely to impact overall stability in permanent housing. When using the Case Management Tool acuity refers to the severity of the presenting issue and the ongoing goals in addressing these issues.

Case Management Tool: A standardized tool for case management to track outcomes in the coordinated assessment process. Housing programs administer this tool at program entry, housing entry, and every six months thereafter until program discharge. Upon discharge from the program, housing case managers administer the tool one final time 12 months later, when possible, to ensure the household continues to make progress.

Chronically Homeless: (1) an individual with a disability as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)) who: (i) lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) had been homeless and living as described in (i) continuously for at least 12 months or on at least 4 occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating occasions included at least 7 consecutive nights of not living as described in (i). Stays in institutional care facilities for fewer than 90 days will not constitute a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the care facility; (2) an individual who has been residing in an institutional care facility, including jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) a family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in (1) or 2) of this definition, including a family whose composition had fluctuated while the head of household has been homeless. (24 CFR 578.3)

Comparable Database: HUD-funded providers of housing and services (recipients of ESG and /or CoC funding) who cannot enter information by law into HMIS (victim service providers as defined under the Violence Against Women and Department of Justice Reauthorization Act of 2005) must operate a database comparable to HMIS. According to HUD, "a comparable database . . . collects client-level data over time and generates unduplicated

aggregate reports based on the data." The recipient or subrecipient of CoC and ESG funds may use a portion of those funds to establish and operate a comparable database that complies with HUD's HMIS requirements. (24 CFR 578.57)

Coordinated Assessment: "A centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals across a geographic area. The . . . system covers the geographic area (designated by the CoC), is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool" (24 CFR 578.3). CoCs have ultimate responsibility to implement coordinated assessment in their geographic area.

Developmental Disability: As defined in section 102 of the Developmental Disabilities
Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002): (1) A severe, chronic disability of an individual that (i) is attributable to a mental or physical impairment or combination of mental and physical impairments; (ii) is manifested before the individual attains age 22; (iii) is likely to continue indefinitely; (iv) results in substantial functional limitations in three or more of the following major life activities: (a) self-care; (b) receptive and expressive language; (c) learning; (d) mobility; (e) self-direction; (f) capacity for independent living; (g) economic self-sufficiency; (v) reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated. (2) an individual from birth to age 9, inclusive, who has a substantial developmental disability or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria in (1)(i) through (v) of the definition of "developmental disability" in this definition if the individual, without services or supports, has a high probability of meeting these criteria later in life. (24 CFR 578.3)

Disabling Condition: According to HUD: (1) a condition that: (i) is expected to be of indefinite duration; (ii) substantially impedes the individual's ability to live independently; (iii) could be improved by providing more suitable housing conditions; and (iv) is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; or a developmental disability, as defined above; or the disease of Acquired Immunodeficiency Syndrome (AIDS) or any conditions arising from AIDS, including infection with the Human Immunodeficiency Virus (HIV). (24 CFR 583.5)

Diversion: Diversion is a strategy to prevent homelessness for individuals seeking shelter or other homeless assistance by helping them identify immediate alternate housing arrangements, and if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion practices and programs help reduce the number of people becoming homeless and the demand for shelter beds.

Family: A family includes, but is not limited to the following, regardless of actual or perceived sexual orientation, gender identity, or marital status: (1) a single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or (2) a group of persons residing together, and such group includes, but is not limited to: (i) a family with or without children (a child who is temporarily away from the home

because of placement in foster care is considered a member of the family); (ii) an elderly family; (iii) a near-elderly family; (iv) a disabled family; (v) a displaced family; and (vi) the remaining member of a tenant family. (24 CFR 5.403)

Homeless:

Category 1: an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; (ii) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals); or (iii) an individual who exits an institution where he/she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

Category 2: an individual or family who will immediately lose their primary nighttime residence, provided that: (i) the primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; (ii) no subsequent residence has been identified; and (iii) the individual or family lacks the resources or support networks (e.g. family, friends, faith-based or other social networks) needed to obtain other permanent housing; or

Category 4: any individual or family who: (i) is fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or family member, including a child, that has either taken place within the individual's or family's primary nighttime residence; (ii) had no other residence; and (iii) lacks the resources or support networks (e.g. family, friends, and faith-based or other social networks) to obtain other permanent housing. (24 CFR 578.3)

Housing First: A national best practice model that quickly and successfully connects individuals and families experiencing homelessness to permanent housing without preconditions such as sobriety, treatment compliance, and service and/or income requirements. Programs offer supportive services to maximize housing stability to prevent returns to homelessness rather than meeting arbitrary benchmarks prior to permanent housing entry.³

Prevention and Diversion Screening Tool: A tool used to reduce entries into the homeless service system by determining a household's needs upon initial presentation to shelter or other emergency response organization. This screening tool gives programs a chance to divert households by assisting them to identify other permanent housing options and, if needed, providing access to mediation and financial assistance to remain in housing.

Rapid Rehousing: A national best practice model designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve long-term

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³ http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448313/pdf/0940651.pdf

stability. Like Housing First, rapid rehousing assistance does not require adherence to preconditions such as employment, income, absence of criminal record, or sobriety. Financial assistance and housing stabilization services match the specific needs of the household. The core components of rapid rehousing are housing identification/relocation, short- and/or medium-term rental and other financial assistance, and case management and housing stabilization services. (24 CFR 576.2)

Transitional Housing: Temporary housing for participants who have signed a lease or occupancy agreement with the purpose of transitioning participants into permanent housing within 24 months.

VI-SPDAT (Vulnerability Index-Service Prioritization Decision Assistance Tool): An evidence-based tool used by all regions in the Balance of State to determine initial acuity and set prioritization and intervention for permanent housing placement.

PERSONNEL

STANDARD: Programs shall adequately staff services with qualified personnel to ensure quality of service delivery, effective program administration, and the safety of program participants.

Benchmarks

- The organization selects employees and/or volunteers with adequate and appropriate knowledge, experience, and stability for working with individuals and families experiencing homelessness and/or other issues that place individuals and/or families at risk of homelessness.
- The organization provides time for all employees and/or volunteers to attend webinars and/or trainings on program requirements, compliance, and best practices.
- The organization trains all employees and/or volunteers on program policies and procedures, available local resources, and specific skill areas relevant to assisting clients in the program.
- All paid and volunteer staff participate in ongoing internal and/or external training on the Prevention and Diversion Screening Tool, the individual and family VI-SPDAT screening tool, and the Case Management Tool.
- For programs using the Homeless Management Information System (HMIS), all end users
 must abide by the NC HMIS End User and Participation Agreements, including adherence to
 the strict privacy and confidentiality policies.
- Staff supervisors of casework, counseling, and/or case management services have, at a
 minimum, a bachelor's degree in a human service-related field and/or experience working
 with individuals and families experiencing homelessness and/or other issues that place
 individuals and/or families at risk of homelessness.
- Staff supervising overall program operations have, at a minimum, a bachelor's degree in a human service-related field and/or demonstrated ability and experience that qualifies them to assume such responsibility.
- All program staff have written job descriptions that address tasks staff must perform and the minimum qualifications for the position.
- Case managers provide case management with the designated Case Management Tool on a frequent basis (every six months minimum) for all clients.

 Organizations should share and train all program staff on the NC Balance of State Permanent Supportive Housing Written Standards.

PRIORITY FOR TENANTS WHO NEED EMERGENCY TRANSFERS UNDER VAWA 2013

STANDARD: Tenants eligible for emergency transfers under the NC BoS CoC's emergency transfer policy and VAWA statute and regulations have first priority for open permanent supportive housing units, if they also meet all eligibility requirements and relevant prioritization requirements for the PSH project. To access PSH beds dedicated to chronic homelessness, tenants eligible for emergency transfers must also be chronically homeless, unless there is no other option for an emergency transfer in the community and the tenant is otherwise eligible for PSH. Tenants documented as chronically homeless before entering a permanent housing project retain chronic homeless status for the purposes of eligibility for an emergency transfer under VAWA 2013.

ORDER OF PRIORITY FOR CoC-FUNDED DEDICATED OR PRIORITIZED CHRONICALLY HOMELESS BEDS

STANDARD: Programs receiving CoC-funded permanent supportive housing which have dedicated or prioritized their beds to serve individuals and families experiencing chronic homelessness must follow the order of priority in accordance with the Order of Priority section in Notice CPD-16-11⁴ when selecting participants for housing. Grantees must exercise due diligence when conducting outreach and assessment to ensure the program serves people in the order of priority as adopted by the Balance of State Continuum of Care.

Benchmarks

- First Priority: Chronically homeless individuals and families as defined in 24 CFR 578.3 with the longest histories of homelessness AND the most severe service needs (as found through the acuity score on the VI-SPDAT with information from community stakeholders).
 - The chronically homeless individual or head of household of a family has
 experienced homelessness, living in a place not meant for human habitation, a safe
 haven, or in an emergency shelter for at least 12 months either continuously or on
 at least four separate occasions in the last 3 years, where the cumulative total length
 of the four occasions equals at least 12 months; and
 - The chronically homeless individual or head of household of a family has severe service needs as assessed through the VI-SPDAT. This person has a history of high utilization of crisis services, including, but not limited to, hospital emergency departments, jail, or psychiatric facilities; or significant health and behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.
- Second Priority: Chronically homeless individuals or families with the longest history of homelessness that meet the following:
 - The chronically homeless individual or head of household of a family has experienced homelessness, living in a place not meant for human habitation, a safe

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⁴ https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf

- haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
- The chronically homeless individual or head of household of a family has not been identified to meet the severe service needs described in priority one.
- Third Priority: Chronically homeless individuals or families with the most severe service needs.
 - The chronically homeless individual or head of household of a family has
 experienced homelessness, living in a place not meant for human habitation, a safe
 haven, or in an emergency shelter on at least four separate occasions in the last 3
 years, where the cumulative total length of the four occasions equals at least 12
 months but less than others identified in the community needing permanent
 housing; and
 - The chronically homeless individual or head of household of a family has severe service needs as assessed through the VI-SPDAT. This person has a history of high utilization of crisis services, including, but not limited to, hospital emergency departments, jail, or psychiatric facilities; or significant health and behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.
- Fourth Priority: All other chronically homeless individuals or families.
 - The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the cumulative total of the four separate occasions is less than 12 months; and
 - The program has not identified the chronically homeless individual or head of household of a family, who meets all of the criteria of a chronically homeless person or family, as having severe service needs.

ORDER OF PRIORITY FOR CoC-FUNDED NON-DEDICATED OR NON-PRIORITIZED CHRONICALLY HOMELESS BEDS

STANDARD: Programs receiving CoC-funded permanent supportive housing that do not dedicate or prioritize their beds for individuals and families experiencing chronic homelessness must first follow the order of priority as mentioned in the section above: Order of Priority for CoC-Funded Dedicated or Prioritized Chronically Homeless Beds. However, if the community does not have any chronically homeless individuals or families or someone meeting the priority listing above cannot be identified within 30 days, programs will prioritize their beds in accordance with the Order of Priority section in Notice CPD-16-11⁵ for non-dedicated or non-prioritized beds when selecting participants for housing.

Benchmarks

• First Priority: Priority listing under section: Order of Priority for CoC-Funded Dedicated or Prioritized Chronically Homeless Beds.

⁵ https://www.hudexchange.info/resources/documents/notice-cpd-16-11-prioritizing-persons-experiencing-chronic-homelessness-and-other-vulnerable-homeless-persons-in-psh.pdf



- Second Priority: Homeless individuals and families with a disability with long periods of episodic homelessness and severe service needs.
 - An individual or family that is eligible for CoC Program-funded PSH who has
 experienced fewer than four occasions where they have been living or residing in a
 place not meant for human habitation, a safe haven, or in an emergency shelter but
 where the cumulative time homeless is at least 12 months and has been identified
 as having severe service needs.
- Third Priority: Homeless individuals and families with a disability with severe service needs.
 - An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.
- Fourth Priority: Homeless individuals and families with a disability coming from places not meant for human habitation, safe havens, or emergency shelters without severe service needs.
 - An individual or family is eligible for CoC Program-funded PSH who is residing in a
 place not meant for human habitation, a safe haven, or an emergency shelter where
 the individual or family has not been identified as having severe service needs. The
 length of time in which households have been homeless should be considered when
 prioritizing households that meet this order of priority, but there is not a minimum
 length of time required.
- Fifth Priority: Homeless individuals and families with a disability coming from transitional housing.
 - An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

CLIENT INTAKE PROCESS

STANDARD: Programs will actively participate in their community's coordinated assessment system by only taking referrals from the coordinated assessment system for their program. The program will limit entry requirements to ensure that the program serves the most vulnerable individuals and families needing assistance. The program will ensure active client participation and informed consent.

Benchmarks

- All adult program participants must meet the following program eligibility requirements:
 - Literally homeless or fleeing domestic violence (see definitions above for Category 1 and Category 4 of the Homeless Definition). Some programs have stricter



participant guidelines and should see their specific program and application information to determine eligibility.

- Programs may require participants to meet only these additional program eligibility requirements if they have targeted specific populations under their grant applications:
 - Chronic homelessness (for CoC-funded PSH that requires chronic homelessness and programs that have committed to prioritize turnover beds to people experiencing chronic homelessness).
 - o Homeless veterans (for HUD-VASH programs).
 - Residency requirements (abide by the language of the lease).
- Programs cannot disqualify an individual or family because of prior evictions, poorrental history, criminal history, or credit history.
- Programs focus on engaging participants by explaining available services and encouraging each adult household member to participate in said services, but programs do not make service usage a requirement or the denial of services a reason for disqualification or eviction.
- Programs cannot disqualify an individual or family from program entry for lack of income or employment status.
- Programs can turn away individuals and families experiencing homelessness from program entry for only the following reasons:
 - Household makeup (provided it does not violate HUD's Fair Housing and Equal Opportunity requirements): singles-only programs can disqualify households with children; families-only programs can disqualify single individuals
 - All program beds are full.
 - If the housing has in residence at least one family member with a child under the age of 18, the program may exclude registered sex offenders and person with a criminal record that includes violent crime from the program so long as the child resides in the same housing facility (24 CFR 578.93)
- Programs shall use the standard order of priority for documenting evidence to determine homeless status and chronically homeless status per the program's eligibility requirements.
 Grantees must document in the client file that the agency attempted to obtain the documentation in the preferred order. That order should be as follows:
 - Third-party documentation (including HMIS)
 - o Intake worker observations through outreach and visual assessment
 - Self-certification of the person receiving services
 - CoC programs should also assess participant eligibility based on eligibility criteria established by the NOFA for the year of the award.
- Programs must provide evidence of a diagnosis of one or more of the following conditions (for the CoC program, one adult OR child in the family would qualify): substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from a traumatic brain injury, or chronic physical illness or disability. The documentation must include:
 - Written verification of the condition from a professional licensed by the state to diagnose and treat the condition; or
 - o Written verification from the Social Security Administration; or
 - Copies of a disability check (e.g. Social Security Disability Insurance check or Veteran Disability compensation); or

- Intake staff (or referral staff) observation confirmed by written verification of the condition from a professional licensed by the state to diagnose and treat the condition that is confirmed no later than 45 days after the application for assistance and accompanied with one of the types of evidence above; or
- Other documentation approved by HUD or the VA.
- Programs will maintain release of information, case notes, and all pertinent demographic
 and identifying data in HMIS as allowable by program type. Paper files should be
 maintained in a locked cabinet behind a locked door with access reserved for case workers
 and administrators who need said information.

PERMANENT SUPPORTIVE HOUSING

STANDARD: Programs will provide safe, affordable permanent housing that meets participants' needs in accordance with the client intake practices and within CoC established guidelines for permanent supportive housing programs. Programs will pair permanent housing with intensive case management services to participants to ensure long-term housing stability.

Benchmarks

- Programs will meet the key elements of permanent supportive housing published by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration.⁶
- Programs consider the needs of the household in terms of location, cost, number of bedrooms, handicap access, ongoing service needs and other pertinent information when moving a household into housing. Programs will assess potential housing for compliance with program standards for habitability, lead-based paint, and rent reasonableness prior to the individual or family signing a lease.
- Programs provide assistance to the participant in locating and procuring housing.
- For rental assistance or tenant-based rental assistance grants, program participants must sign a lease in their name for a one-year period. For leasing assistance grants, agencies must master lease a unit and then have a sub-lease with the program participant for a one-year period. All participant leases and sub-leases must be standard leases that would apply to any other person leasing said unit and automatically renewable upon expiration for a minimum term of one month. Participant sub-leases with grantees must confer all of the legal rights and protections of the lease between the agency and the landlord.
- HUD CoC grantees will adhere to the responsibilities of grant management outlined by the BoS CoC.⁷
- For CoC-funded permanent supportive housing programs, HUD does not require programs to impose occupancy charges on participants as a condition of residing in the housing (CFR 578.77). However, if programs do require occupancy charges, they must impose them on all participants of the program and these charges cannot exceed the highest of:
 - o 30% of the household's monthly adjusted gross income;



⁶ See SAMHSA's Key Elements of PSH: http://store.samhsa.gov/shin/content/SMA10-4510/SMA10-4510-06-BuildingYourProgram-PSH.pdf

⁷See the signature form with responsibilities: http://www.ncceh.org/files/6274/

- o 10% of the household's monthly income; or
- If the household receives payments for welfare assistance from a public agency wherein part of the payment is for housing costs, the portion of the payment designated for housing costs.
- For CoC programs, PSH assistance must be provided without a designated length of stay.
- For HUD-VASH permanent supportive housing programs, participants must follow rent payment guidelines of the Housing Choice Voucher program.

CASE MANAGEMENT SERVICES

STANDARD: Programs shall provide access to intensive case management services by trained staff to each individual and/or family in the program. Programs should note acceptance or refusal of all services offered in thorough case notes.

Benchmarks (Standard Available Services)

- Programs will meet the key elements of permanent supportive housing published by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration.⁸
- Program staff or other programs connected to the permanent housing program through formal relationship will provide regular and consistent case management to clients based on the individuals' or families' specific needs. This case management should optimally happen at the participants' home whenever possible, or at a minimum, in a convenient place for the participant. Case management includes:
 - Assessing, planning, coordinating, implementing, and evaluating the services delivered to participants.
 - Assisting participants to maintain their permanent housing placement in a safe manner and understand how to get along with fellow residents or neighbors.
 - Helping participants to create strong support networks and participate in the community, as they desire.
 - Using the Case Management Tool for ongoing case management and measurement of acuity over time, determining changes needed to better serve participants.
- Program staff or other programs connected to the permanent housing program through formal relationship will provide basic life skills, including housekeeping, grocery shopping, menu planning and food preparation, consumer education, transportation, and obtaining vital documents (social security cards, birth certificates, school records).
- Program staff or other programs connected to the permanent housing program through formal relationship will assist participants in accessing cash and non-cash income through employment, mainstream benefits, childcare assistance, health insurance, and other sources.

⁸ See SAMHSA's Key Elements of PSH: http://store.samhsa.gov/shin/content/SMA10-4510/SMA10-4510-06-BuildingYourProgram-PSH.pdf



- Program staff or other programs connected to the permanent housing program through formal relationship will provide individualized budgeting and money management services to clients as needed.
- Program staff or other program connected to the permanent housing program through formal relationship will provide ongoing assistance with food, clothing, and transportation.
- Programs must assess service needs annually.

Benchmarks (Optional but recommended services, often from other providers)

- Representative payee services.
- Relationship-building and decision-making skills.
- Education services such as GED preparation, post-secondary training, and vocational education.
- Employment services, including career counseling, job preparation, resume-building, dress and maintenance.
- Behavioral health services such as relapse prevention, crisis intervention, medication monitoring and/or dispensing, outpatient therapy and treatment.
- Physical health services such as routine physicals, health assessments, and family planning.
- Legal services related to civil (rent arrears, familylaw, uncollected benefits) and criminal (warrants, minor infractions) matters.
- For CoC PSH, in addition to the services mentioned such as one-time moving costs and case management, other eligible supportive service costs include childcare, food, housing search and counseling, outreach services, transportation, and one-time utility deposit.

TERMINATION

STANDARDS: Termination should be limited to only the most severe cases. Programs will exercise sound judgment and examine all extenuating circumstances when determining if violations warrant program termination. BoS recommends programs work with other community service providers to develop a board to hear client grievances.

Benchmarks

- Programs will meet the key elements of permanent supportive housing published by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration.⁹
- While violation of a participant's lease or sublease may be cause for termination, programs should develop a termination of services policy giving participants multiple housing chances or work to move participants to a higher-level permanent supportive housing intervention, when possible (i.e. programs will move a participant two times before terminating him/her from services). Programs should only terminate services when clients pose a safety risk to staff or other residents of their community.
 - Programs' goal should be to avoid eviction by working with the landlord and participant to form an agreement allowing participants to move prior to a legal eviction, when possible.

⁹ See SAMHSA's Key Elements of PSH: http://store.samhsa.gov/shin/content/SMA10-4510/SMA10-4510-06-BuildingYourProgram-PSH.pdf



- To terminate assistance to a program participant, the agency must follow the provisions described in 24 CFR 578.91 of the HEARTH Continuum of Care Interim Rule as follows:
 - The grantee may terminate assistance to program participants who violate program requirements or conditions of occupancy. Termination under this section does not preclude the program from providing further assistance at a later date to the same individual or family.
 - To terminate assistance to program participants, the grantee must provide a formal process, recognizing the rights of the individuals receiving assistance under the due process of law. This process, at a minimum, must consist of:
 - Providing program participants with a written copy of program rules and the termination process before the participant begins to receive assistance with a copy signed by the participant in the file;
 - Written notice to program participants containing a clear statement of the reasons for termination.
 - A review of the decision, in which the program participant has the opportunity to present written or oral objections before a person other than the person who made or approved the termination decision; and
 - Prompt written notice of the final decision to the program participant.
- Programs should not immediately terminate participants who enter an institution (medical, mental health, or crisis). HUD CoC PSH grants allow grantees to maintain open units for institutionalized individuals and families for up to 90 days.

EXITING AND FOLLOW-UP SERVICES

STANDARD: Programs must ensure a continuity of services to all clients exiting their programs, including those individuals and families terminated from the program. Agencies can provide these services directly or through referrals to other agencies.

Benchmarks

- Programs prioritize the development of exit plans for each participant to ensure continued permanent housing stability and connection to community resources, as desired.
- Programs routinely check in with PSH participants to identify those households whose acuity scores are low enough to maintain permanent housing stability in market rate or subsidized housing outside the permanent supportive housing program.
- Programs develop a plan, in conjunction with the participating household, for effective, timely exit of individuals and families whose acuity scores are low enough to maintain permanent housing stability in market rate or subsidized housing outside the permanent supportive housing program.
- Programs should attempt to follow up with participants through verbal or written contactat least once 6 months after the client exits the program. A program may provide follow-up services to include identification of additional needs and referral to other agency and community services in order to prevent future episodes of homelessness.
- For HUD CoC PSH grants, programs may provide services to formerly homeless individuals and families for up to six months after their exit from the program.

CLIENT AND PROGRAM FILES



STANDARD: Programs will keep all program participant files up-to-date and confidential to ensure effective delivery and tracking of services.

Benchmarks

- Client and program files should, at a minimum, contain all information and forms required by HUD (24 CFR 576.500), and the VA, service plans, case notes, referral lists, and service activity logs, including services provided directly by the permanent supportive housing program and indirectly by other community service providers. Programs should have:
 - Documentation of homeless status, chronic homelessness status (where applicable), and disabling condition.
 - Determination of ineligibility, if applicable, which shows the reason for this determination.
 - o Initial and annual income evaluation, per program rules.
 - Program participant records.
 - Documentation of using the community's coordinated assessment system.
 - Compliance with shelter and housing standards.
 - Services and assistance provided.
 - Expenditures and match.
 - Conflict of interest/code of conduct policies.
 - o Homeless participation requirement.
 - Faith-based activity requirement, if applicable.
 - Other Federal requirements, if applicable.
 - Confidentiality procedures.
- All client information should be entered in the NC HMIS in accordance with data quality, timeliness, and additional requirements found in the agency and user participation agreements. At a minimum, programs must record the date the client enters and exits the program, HUD required data elements, and an update of client's information as changes occur.
- Programs must maintain a release of information form for clients to use to indicate consent in sharing information with other parties. This cannot be a general release but one that indicates sharing information with specific parties for specific reasons.
- Programs must maintain the security and privacy of written client files and shall not disclose
 any client-level information without written permission of the client as appropriate, except
 to program staff and other agencies as required by law. Clients must give informed consent
 to release any client identifying data to be utilized for research, teaching, and public
 interpretation.
- All records pertaining to CoC funds must be retained for the greater of 5 years or the
 participant records must be retained for 5 years after the expenditure of all funds from the
 grant under which the program participant was served. Agencies may substitute original
 written files with microfilm, photocopies, or similar methods. Records pertaining to other
 funding sources must adhere to those record retention requirements.

EVALUATION AND PLANNING

STANDARD: Permanent supportive housing programs will work with the community to conduct ongoing planning and evaluation to ensure programs continue to meet community needs for individuals and families experiencing homelessness.

Benchmarks

- Agencies maintain written goals and objectives for their services to meet outcomes required by the HUD CoC and VA programs or other funding sources.
- Programs review case files of clients to determine if existing services meet their needs. As appropriate, programs revise goals, objectives, and activities based on their evaluation.
- Programs conduct, at a minimum, an annual evaluation of their goals, objectives, and activities, making adjustments to the program as needed to meet the needs of the community.
- Programs regularly review project performance data in HMIS to ensure reliability of data. Programs should review this information, at a minimum, quarterly.





North Carolina Balance of State Continuum of Care

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NC-503 Racial and Ethnic Disparities Analysis

Summary

The NC BoS CoC conducted an initial analysis of racial and ethnic disparities among people experiencing homelessness and receiving homeless services in the CoC. The CoC found that people who are Black or African American seem to experience homeless at disproportionately high rates compared to the share of people who are Black or African American in the population in the CoC's geographic area. The NC BoS CoC's permanent housing programs may help to address this disparity by serving people who are Black or African American at higher rates than Whites. Among people who identify as Hispanic or Latino, the picture is quite different: they seem to experience homelessness and access homeless services at lower rates than the share of the population that identifies as Hispanic/Latino.

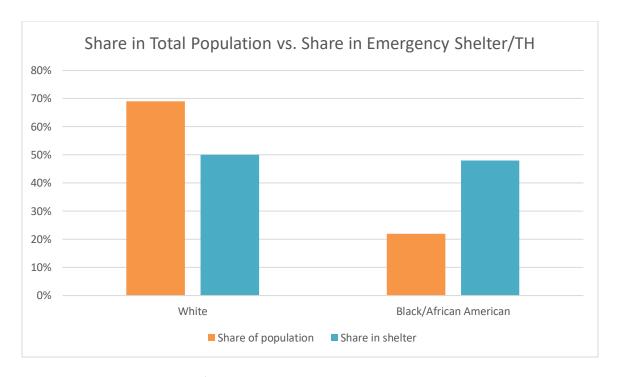
This analysis is a first step in analyzing how people of different races and ethnicities experience homelessness and are served by the NC BoS CoC. The NC BoS CoC represents 79 out of the 100 counties in North Carolina. Each county is unique in population size, geography, racial composition, and socioeconomic composition. To create a complete picture of how people of different races are disproportionately affected by homelessness and served by the homeless service system, the CoC must take into account the variance between regions and counties. This analysis presents CoC-wide data to set a baseline for analysis. The CoC will coduct more local analysis in the future.

The NC BoS CoC plans to conduct additional analysis by county and region by November 2018. By the end of 2018 the NC BoS CoC plans to also conduct thorough analysis of housing outcomes by race.

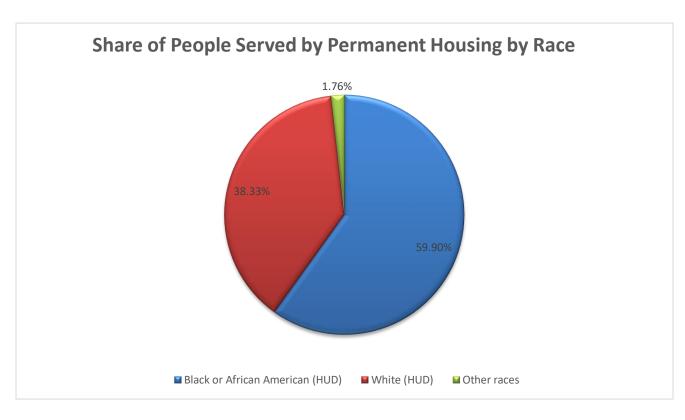
Racial Disparities Assessment

According to 5-year American Community Survey estimates from the U.S. Census Bureau, 69% of people in the geographic area covered by the NC BoS CoC identify as White and 22% identify as Black or African American. About 9% identify as Hispanic or Latino. People of all other races together make up less than 2% of the population.

In the NC BoS CoC, people identifying as Black or African American seem to be disproportionately affected by homelessness. Half of the people served by emergency shelters or transitional housing in the last three years in the NC BoS CoC identify as White, while 48% identify as Black or African American (see chart). People identifying as other races represent 1% or less of those experiencing homelessness so it is difficult to conclude whether or not people of other races are disproportionately affected by homelessness in the NC BoS CoC.

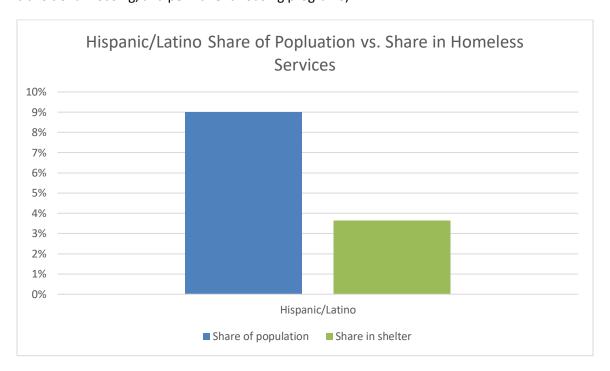


Permanent housing programs (rapid rehousing, permanent supportive housing, or other permanent housing) serve people identifying as Black of African American at even higher rates. Among those served by permanent housing in the NC BoS CoC between 2015 and 2018, 60% identified as Black of African American, and 38% identified as White (see chart).



In contrast, people who identify as Hispanic or Latino seem to be served by the NC BoS CoC at disproportionately low rates. About 9% of the population in the NC BoS CoC's geographic area identifies as Hispanic or Latino, but under 4% of the people in emergency shelters or transitional

housing identify as Hispanic/Latino. Permanent housing programs serve people identifying as Hispanic/Latino at about the same rates as shelter programs. The chart below shows the share of people who identify as Hispanic or Latino in the total population and in all homeless programs (shelter, transitional housing, and permanent housing programs):



Conclusions and Next Steps:

These data begin to paint a picture of how people of different races and ethnicities are disproportionately affected by homelessness and how the NC BoS CoC serves the people in its geographic area. Although these data are an important first step, the NC BoS CoC needs to conduct a similar analysis on the regional and county. Counties in the NC BoS CoC vary widely in their racial and ethnic makeup, so it is difficult to draw conclusions about racial disparities across the whole CoC. The NC BoS CoC counties are extremely diverse in their economies, housing stock, and other factors that may drive homeless rates. The CoC includes small urban centers, suburbs and exurbs, tourism hubs, tribal areas, and rural farming areas. Each of these have different racial and ethnic make up and different factors that affect homelessness and homeless services. NC BoS CoC will analyze racial disparities of homelessness by county to try account for this variation.

The NC BoS CoC will also conduct analysis on housing outcomes by race, including exits to permanent housing, returns to homelessness, and length of project participation. The data in this initial analysis seem to show that NC BoS CoC service providers are helping to address disproportionate rates of homelessness among African Americans by providing them with permanent housing at higher rates than Whites. Yet Whites could be resolving their homelessness faster or more permanently through other means than the CoC's permanent housing projects. The NC BoS CoC will examine whether people of different races have more difficulty finding housing and whether people of different races return to homelessness at different rates. We will also examine negative exits from housing programs (when clients are terminated from a program or evicted, for instance) to ensure that programs are not just enrolling people of color at high rates, but are also serving them successfully.



Finally, the CoC plans to conduct additional analysis on how people identifying as Hispanic/Latino experience homelessness and are served by CoC programs. It is possible that data on ethnicity are not being collected well by service providers, especially if service providers are not able to ask HMIS questions in Spanish. It could also be possible that this group is unable to access CoC services due to language or other barriers.

