

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 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 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:

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1A-1. CoC Name and Number: VA-521 - Virginia Balance of State CoC

1A-2. Collaborative Applicant Name: Commonwealth of Virginia-Virginia Department of Housing and Community Development

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Commonwealth of VA subgrant to Homeward

1B. Continuum of Care (CoC) Engagement

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1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

- 1. participated in CoC meetings;**
- 2. voted, including selecting CoC Board members; and**
- 3. participated in the CoC’s coordinated entry system.**

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	No	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	Yes
Local Jail(s)	Yes	No	Yes
Hospital(s)	Yes	No	Yes
EMS/Crisis Response Team(s)	No	No	Yes
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	No	Yes
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Not Applicable	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

Youth Advocates	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	No	Yes
CoC Funded Victim Service Providers	Not Applicable	No	No
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	No	No	Yes
LGBT Service Organizations	Not Applicable	No	No
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	No	Yes
Other:(limit 50 characters)			
Virginia Career Works	Yes	No	Yes

1B-1a. CoC’s Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.

Applicants must describe how the CoC:

- 1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;**
- 2. communicates information during public meetings or other forums the CoC uses to solicit public information;**
- 3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and**
- 4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF.**
(limit 2,000 characters)

1. The Balance of State (BoS) is comprised of 12 local planning groups (LPG) and 5 committees, which are open to the public. Additionally, each LPG has a governing board and committees that are public and accessible to stakeholders. BoS membership includes a broad array of stakeholders with knowledge and interest in preventing and ending homelessness. These include local government officials, planning district commissions, private funders, advocates including the Virginia Sexual and Domestic Violence Action Alliance, school divisions, police departments, faith community, PHAs, VA hospitals, CSBs (mental health agencies), homeless service providers CAP agencies, state department of veteran services, and the state department of behavior health and developmental services.

2. The BoS CoC provides information and solicits information in multiple ways. Each LPG has a board and committees designed to address local homeless needs. Information flows back and forth through this structure via LPG

representation on the BoS steering committee (CoC governing board), which meets bi-monthly. Additionally, information is gathered during input sessions where the CA travels across the state to formally gather input from all LPGs in the BoS.

3. All information gathered during CoC meetings or input sessions are taken into consideration and used to improve the BoS CoC. For example, input sessions led to statewide change to help ensure all LPGs worked within a systems model. State appropriations, ESG, and CoC funding has been coordinated to ensure each LPG has a homeless crisis response system ensuring all geographies in the BoS have access to services. This has been especially important to the rural areas of the BoS.

4. All information is communicated on the BoS website or the CA website (DHCD) and is accessible as PDFs.

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 the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;**
 - 4. how often the CoC solicits new members; and**
 - 5. 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 majority of solicitation for new members is conducted at the LPG level. Membership of the BoS encompasses the total membership of each LPG. LPGs have membership committees that conduct regular outreach to local and regional government entities, faith communities, private businesses, etc.
2. LPGs send out email invitations, website notifications, and direct face-to-face invites to those groups who are “missing” from the membership. BoS members reach out to local resource councils, meet one-on-one with identified stakeholders, develop and distribute brochures, and hold educational events where guest speakers share information on the local planning efforts to create a system where homelessness is rare, brief, and non-recurring.
3. All information is communicated via the BoS website, LPGs websites and via emails. PDFs and other accessible formats are published.
4. Invitations are formally sent annually, but most successful invites occur when the LPG members are doing outreach to those stakeholders who are missing from membership. For example in FY18, through the BoS efforts in BFZ, a new faith-based provider got involved and has become a champion for Housing First. In addition to reducing barriers to their TH program, they are working to get their TH and warming shelter beds in HMIS.
5. As a BoS standard and a requirement of ESG and state funding (administered by DHCD), any program funded by federal or state dollars must have a person experiencing or formerly experiencing homelessness participating on the board of directors or other equivalent policy-making entity. In the past year, specific outreach has been done with PSH residents and youth. The BoS now has a youth action board where all current members have lived experience.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.

Applicants must describe:

- 1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;**
- 2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;**
- 3. the date(s) the CoC publicly announced it was open to proposal;**
- 4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and**
- 5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.
(limit 2,000 characters)**

1. As approved in the BoS system level procedures, the CA requested proposals for projects after registration and prior to the release of the NOFA. This is done through a pre-application. Any agencies that are active participants in their LPG/BoS are eligible to apply for new funding. The pre-application is emailed to lead LPG agencies and BoS steering committee members who then disseminate it to all LPG stakeholders.

2. To determine if a project is first eligible to be ranked and tiered, the pre-application is used by the CA to ensure the new project is eligible, meets a community need, is Housing First, and is viable. After the pre-application is reviewed by the CA, the agency is provided feedback on any changes or concerns about the new project. The agency can then make a decision about submitting a final application to the ranking committee.

The BoS CoC convenes a panel of stakeholders (at least 5) including homeless service providers, state employees, advocates, housing authority representatives, local government representatives, and formally homeless representatives to review and assess funding requests for the HUD Continuum of Care Program. The panel, known as the Ranking Committee, is an independent body (no conflicts of interest) tasked in the CoC charter as the entity responsible for accepting requests and reviewing them for consistency with meeting the federal, state, and local goals and priorities for addressing homelessness.

3. This year, the pre-application was released and published on April 3, 2019, and was due to the CA on May 1, 2019. On Jul. 9, 2019 the BoS released the timeline and application addendum for the CoC competition, which was published on the BoS website on July 11. On Aug. 14, 2019, the application scoring criteria was published.

4. All information is communicated on the BoS webpage and via emails. PDFs and other accessible formats are published.

5. N/A

1C. Continuum of Care (CoC) Coordination

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1C-1. CoCs Coordination, Planning, and Operation of Projects.

Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.

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)	Not Applicable
Head Start Program	Yes
Funding Collaboratives	Yes
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)	

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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;**
- 2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and**
- 3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates.**
(limit 2,000 characters)

1. DHCD (BoS CA) is the state administrator of ESG for the BoS. Each of the 12 LPGs submit community-based applications for ESG, HOPWA, and state funding through the Virginia Homeless and Special Needs Housing (HSNH) funding. Funded projects must coordinate services with the BoS, use HMIS, participate in coordinated entry, adhere to housing first and BoS service standards, and report outcomes at a program and system level.

2. As both the CoC collaborative applicant and the state administrator of ESG funding DHCD works to ensure all funds are coordinated and used to meet the goal of ending homelessness. To measure the effectiveness of ESG funding, LPGs and ESG project grantees are required to report on both the system level and project level. DHCD requires the following reports and evaluations.

- Quarterly calls that address timely spending, technical assistance needs, current trends; and the use of data to address system or client needs.
- Bi-annual progress reports that include demographics served, capacity and utilization, exit destination, and length of financial assistance and case management.
- System outcomes report (DV, and both HMIS and Non-HMIS participants) that include demographics, length of time homeless, PIT count, length of stay, and exit destinations.

3. The BoS CoC program coordinator is part of the HSNH team that establishes system performance measures and project outcomes used for Con Plan development and CAPER reporting. Each year when DHCD updates State's Con Plan, two-hour input sessions are held across the state to coordinate with each independent Con Plan jurisdiction.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Yes to both

Applicants must indicate whether the CoC provided 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. Yes

Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.

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 protocols for coordinated entry and the CoC’s emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and**
- 2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality. (limit 2,000 characters)**

1. Per approved BoS coordinated entry policies and procedures “If safety is a concern due to fleeing, or attempting to flee domestic violence, or a victim of trafficking the coordinated entry staff will assist the person in developing a temporary safety plan and provide immediate referral to the local domestic violence agency.”

When a survivor seeks housing assistance, an assessment for diversion is conducted to include a question as to the person’s safety. If current safety is an issue, the CE staff assist the survivor in developing a safety plan (local DV providers train CE annually on safety planning) that is in place until the survivor connects with local DV staff. Each LPG has DV providers funded by DOJ, HHS, ESG, and/or state funding.

Once a survivor is in a safe location he/she is screened using the VI-SPDAT. Based on the most appropriate and available intervention, survivors are prioritized for housing. Eight of the 12 LPGs have a DV provider administering ESG/state rapid re-housing funds and all survivors have access to rapid re-housing should that be the most appropriate intervention.

2. The BoS implements a client centered approach that ensures the needs such as access to money, legal issues, and/or trauma are addressed. Client confidentiality policies ensure VAWA is adhered to and all identifying information is removed for case conferencing.

The CA also participates on the state level DV Action Team, Sexual Assault & DV Advisory Council, and the DV State and Local Partners meetings. DOJ and HHS participate in the Gov. Coordinating Council on Homelessness. A representative from the Virginia DV Action Alliance is a member of the BoS Steering Committee.

1C-3a. Training–Best Practices in Serving DV Survivors.

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:

- 1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and**
- 2. Coordinated Entry staff that addresses safety and best practices (e.g.,**

Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence. (limit 2,000 characters)

1. Training encompasses the assessment process; safety planning; victim-centered, trauma informed care; and crisis intervention. The CA identified domestic violence providers in each LPG that are responsible for conducting the training annually. Per CoC CE policies and procedures, "a LPG domestic violence service provider must provide safety planning training all coordinated entry staff annually. This training must be documented and maintained by the board of each LPG." In the coming year, with the Virginia DV Action Alliance being on the Steering Committee, these trainings will be standardized.
2. The CE committee will continue to evaluate the process and the domestic violence representatives will guide any needed changes in the training or protocols. Additionally with this application, the Virginia DV Action Alliance is applying for a DV Bonus CE-SSO project. If awarded, funds will make a significant improvement in training and standardization of CE resources for survivors.

1C-3b. Domestic Violence–Community Need Data.

Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

The BoS is able to gather and query data from the VA Data (comparable database administered by the Virginia Sexual and Domestic Violence Action Alliance) via DHCD’s centralized administration and management system (CAMS). In FY19, 706 households’ accessed DV shelters through LPGs. Four hundred and eight (408) of those exited to PH during the FY, including 130 that were housed using RR-H assistance. This is a an unfortunate increase of 24% in survivors seeking shelter and a 26% decrease in the availability of RR-H resources for those seeking PH. However, the overall PH rate for survivors did increase by 13% from FY18. The BoS has adopted a housing focused ES approach to include those who are survivors of DV.

Identified in the FY19 needs assessment of comparable HMIS data and the PIT count (DV increase of 61% from FY18), was a significant increase in survivor’s seeking shelter and needs for permanent housing resources. Based on this assessment, it has been determined that increasing access to and training for CE as well as expanding services to include DV TH/RR-H are ways to ensure survivors have easy access to safety and permanent solutions.

***1C-4. PHAs within CoC. Attachments Required.**

Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC’s geographic area.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 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
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			supportive services, e.g., Moving On
Virginia Housing Development Authority	2.00%	Yes-HCV	Yes-HCV
Danville Redevelopment and Housing Authority	2.00%	Yes-Both	No

1C-4a. PHAs’ Written Policies on Homeless Admission Preferences.

Applicants must:

1. provide the steps the CoC has taken, with the two largest PHAs within the CoC’s geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or

2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

Unfortunately neither of the two PHAs track homeless entries into their services. However, based on estimates at least 1-2% of all entries are homeless at the time they sign leases for housing.

1. The BoS CoC has 22 PHAs. Each of the 12 BoS LPGs work to differing degrees with their PHAs depending on capacity and cooperation. The largest provider of the HCV is the Virginia Housing and Development Authority (VHDA), the administrator of HCVs for 13 HCV agencies. Currently, 31% of the agencies adopted a homeless preference and 46% have adopted and elderly or disabled preference (often used to assist homeless households).

Through the continued work of the BoS CoC and locally, in 2017, the Danville PHA expanded their waiting list preferences to included families identified by the Danville Public Schools as eligible under the McKinney-Vento Act, and U.S. Military veterans.

The BoS Steering Committee has recruited PHA members and currently has two representatives from HUD direct voucher administrators and two from VHDA voucher agencies. At the local level, over 50% of the direct administrators or voucher agencies participate as LPG members.

2. N/A

1C-4b. Moving On Strategy with Affordable Housing Providers.

Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

Yes

If “Yes” is selected above, describe the type of provider, for example, multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs. (limit 1,000 characters)

Move-on strategies are being developed with PHA where LPG's have PSH in their catchment area. On Aug. 6, Virginia Housing Development Authority conducted an outreach meeting with all CoC's (including the BoS) and PHAs across the state to help plan for the new mainstream voucher NOFA. This outreach meeting is part of Virginia's statewide effort to encourage the following priorities for mainstream vouchers - Move-on from PSH, SMI, and ID/DD

populations.

1C-5. Protecting Against Discrimination.

Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing. (limit 2,000 characters)

BoS system level procedures updated and approved Feb. 2018, requires that all projects in the BoS CoC comply with Fair Housing and Civil Rights Laws, Americans with Disabilities Act, Affirmatively Furthering Fair Housing, and Equal Access and Prohibited Inquiries.

Bi-annually, during implementation webinars (startup of HSNH funding) the BoS CA provides training to all LPG leads, ESG and state funded projects on the for-mentioned anti-discrimination requirements. These requirements are also monitored by the CA. In addition to having these requirements, each LPG must have a grievance policy where all households have the option to file grievances orally or in writing (to ensure accessibility). All concerns and grievances must be resolved promptly and fairly, in the most informed and appropriate manner. All BoS partners must be able to inform individuals of the state process for filing a fair housing grievance: <http://www.dpor.virginia.gov/FairHousing/>

***1C-5a. Anti-Discrimination Policy and Training.**

Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:

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 address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

***1C-6. Criminalization of Homelessness.**

Applicants must select all that apply that describe the strategies the CoC implemented to prevent the criminalization of homelessness in the CoC’s geographic area.

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>

4. Implemented communitywide plans:	<input checked="" type="checkbox"/>
5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1C-7. Centralized or Coordinated Assessment System. Attachment Required.

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 for homelessness assistance in the absence of special outreach; and**
- 3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)**

1. Per the CoC CE P&Ps, each LPG (collectively covering all 73 counties in the BoS) has either a centralized or multiple coordinated access points to ensure persons from across the geography are able to access the homeless system. Each LPG has one published phone number where persons can access services.

2. The BoS Coordinated Entry’s standardized procedures:

- Allow easy access to housing assistance, assessment that is standard and consistent, and connections with services that best meet needs;
- Ensure clarity, transparency, consistency, and accountability;
- Ensure clients gain access to the most appropriate type of service intervention available to meet their immediate and long-term housing needs;
- Standardize data collection methods using HMIS (where applicable) to ensure client data is secure, authorized, protected, and shared according to all applicable laws and standards.

• Ensure those who are the most vulnerable and have the highest barriers are prioritized especially, those who connect to CE by direct street outreach.

3. The BoS CoC uses two assessment tools for prioritization of services.

Prevention assessment: The BoS created a prevention prioritization tool that includes both homeless vulnerability and housing barriers. Once a household’s housing crisis is triaged and it is determined that the household is at imminent risk of homeless (14 days or less), then the coordinated entry staff will conduct the prevention prioritization assessment. Based on eligibility and assessment score prevention providers are guided on service needs of households.

The BoS CoC uses the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT) as the common standardized assessment tool for those who are literally homeless. This assessment is conducted no more than 3 to 5 days after the household has been referred to shelter or once an outreach

worker is able to establish rapport with an unsheltered or un-engaged household.

1D. Continuum of Care (CoC) Discharge Planning

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1D-1. 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1E. Local CoC Competition

Instructions

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***1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.**

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Did not reject or reduce any project
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

1E-2. Project Review and Ranking–Objective Criteria.

Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.

Applicants must describe:

- 1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and**
 - 2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.**
- (limit 2,000 characters)**

1. System level policies and procedures require all BoS projects use a Housing First model, prioritize based on vulnerability (using VI-SPDAT and HUD’s order of priority), and ensure there are not barriers to project entry. All projects serve clients with zero income, active substance use, mental or physical illnesses, criminal histories, non-traditional family compositions, etc. For example the ranking committee uses the HUD project rating and ranking tool and RR-H projects are scored based on a criteria of serving at least 50% of participants with zero income at entry and 50% entering directly from a place not meant for human habitation. While PSH criteria include 80% of participants with zero income at entry, 75% with more than one disability, and 75% entering the project from a place not meant for human habitation.

2. To ensure those with the most severe needs and vulnerabilities are served by CoC funded projects, the ranking committee evaluates projects on the percentage of persons served with disabling conditions, percentage of persons served directly from a place not meant for human habitation, and the percentage of persons served with zero income at entry. Additionally, PSH projects are evaluated on dedicating 100% of units to chronically homeless and all PH projects are evaluated on low-barrier and housing first fidelity, as well as following the BoS project standards. The ranking comm. then tiered projects according to the highest performance, application quality, and those serving the most vulnerable.

1E-4. Public Postings–CoC Consolidated Application. Attachment Required.

Applicants must:

- 1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or**
- 2. check 6 if the CoC did not make public the review and ranking process; and**
- 3. indicate how the CoC made public the CoC Consolidated Application—including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected—which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or**
- 4. check 6 if the CoC did not make public the CoC Consolidated Application.**

Public Posting of Objective Review and Ranking Process

Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings

1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

1E-5. Reallocation between FY 2015 and FY 2018.

Applicants must report the percentage of the CoC’s ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.

Reallocation: 0%

1E-5a. Reallocation–CoC Review of Performance of Existing Projects.

Applicants must:

- 1. describe the CoC written process for reallocation;**
 - 2. indicate whether the CoC approved the reallocation process;**
 - 3. describe how the CoC communicated to all applicants the reallocation process;**
 - 4. describe how the CoC identified projects that were low performing or for which there is less need; and**
 - 5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.**
- (limit 2,000 characters)**

The CoC did not reallocate any projects.

DV Bonus

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notice>

Warning! The CoC Application score could be affected if information is incomplete on this formlet.

1F-1 DV Bonus Projects.

Applicants must indicate whether the CoC is requesting DV Bonus projects which are included on the CoC Priority Listing: Yes

1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.

1. PH-RRH	<input type="checkbox"/>
2. Joint TH/RRH	<input checked="" type="checkbox"/>
3. SSO Coordinated Entry	<input checked="" type="checkbox"/>

*1F-2. Number of Domestic Violence Survivors in CoC's Geographic Area.

Applicants must report the number of DV survivors in the CoC's geographic area that:

Need Housing or Services	700.00
the CoC is Currently Serving	410.00

1F-2a. Local Need for DV Projects.

Applicants must describe:

- 1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and**
 - 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).**
- (limit 500 characters)**

Collectively, the BoS CoC is able to serve approximately 60% of the DV households that need PH. This is calculated from an upload of data collected in VADATA (a comparable database) into CAMS (DHCD's data repository), which can be queried for aggregate data.

Data source - VADATA, a comparable system.

1F-3. : SSO-CE Project–CoC including an SSO-CE project for DV Bonus funding in their CoC Priority Listing must provide information in the chart below about the project applicant and respond to Question 1F-3a.

DUNS Number	963276829
Applicant Name	Virginia Sexual and Domestic Violence Action Alliance

1F-3a. Addressing Coordinated Entry Inadequacy.

Applicants must describe how:

- 1. the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, or stalking; and**
 - 2. the proposed project addresses inadequacies identified in 1. above.**
- (limit 2,000 characters)**

1. The BoS CE system does not sufficiently address the needs of survivors. CE system has standards that are implemented in each of the 12 LPGs. The disparity in the capacity of the LPGs lends to disparities in the ability of the entire system to effectively serve survivors. One specific challenge is ensuring all CE points are trauma-informed for individuals who are survivors of DV, SA, and stalking. These clients face unique and specific barriers that impact the ability to navigate the current crisis response system.

It is important to have a system that works to eliminate the power and control dynamic in helping spaces to ensure survivors are safe to reduce the chances of returning to unsafe situations of abuse. Having a DV CE project that allows for training and monitoring all CE points and system processes is essential in creating a system that effectively, permanently houses survivors while supporting their unique barriers to stability.

2. The proposed project submitted by the Virginia Sexual and Domestic Violence Action Alliance (Action Alliance), has a network of 60 SA and DV agencies, their advocates, and other allied services across Virginia. The Action Alliance will provide training and technical assistance to professionals across the BoS. The Action Alliance will hire a full-time coordinating advocate who will provide quarterly trainings with each LPG on trauma-informed practices for survivors of DV, SA, and stalking. Additionally, trainings will focus on screening all individuals seeking services for violence, creating emergency plans, and making appropriate referrals to community services that address both housing

and DV service needs. The Action Alliance will also provide train the trainer models for each LPG, so on-going training and monitoring can occur locally. The goal of the DV CE project is to increase housing stability among high barrier clients while providing trauma-informed services at every interaction.

1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.

Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing—using the list feature below.

Applicant Name	DUNS Number
Virginia Sexual a...	963276829
Family Crisis Sup...	613784446

1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

DUNS Number:	963276829
Applicant Name:	Virginia Sexual and Domestic Violence Action Alliance
Rate of Housing Placement of DV Survivors--Percentage:	85.00%
Rate of Housing Retention of DV Survivors--Percentage:	98.00%

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)**

1. The rate of housing placements was calculated by dividing the number of households who exited to permanent housing (HUD defined PH) by the number of households who entered both sub-grantee's current shelter projects. Then, retention was calculated from the number of households who remained in PH 3 months after obtaining permanent housing and did not re-enter a sub-grantee's current shelter projects.

2. Data source: VADATA (a comparable database)

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)

It is important to ensure clients are addressing their safety and feeling supported in order to move into PH. Most often, the abuser has created fears that must be addressed alongside the search for housing. Examples include: The threat of an abuser taking children from the survivor. The safety of the children is the survivor's most urgent priority. To address and support this, transportation to the courthouse and guidance is provided to file necessary paperwork, referrals to legal aid to assist with custody hearings, and working hand-in-hand with social services to provide the safety of children and guardian. Other situations occur with criminal histories or bad credit that can often halt housing applications and job searches. Case managers work with agencies such as probation, mental health, and social services to assist in overcoming barriers of past situations often resulting from the abusers control. There is a strong connection with Virginia Job Commission, which is offering budgeting classes for individuals that are working to become independent and more financial stable - especially in rebuilding credit.

Staff are trained on available resources to survivors in both the mental and physical health capacity. The available rehab facilities, urgent care facilities, and mobile health vans are given to each person and staff assist in setting up

appointments. Often times, drugs and alcohol are present due to self-medicating from trauma. Celebrate recovery and AA/NA are effective tools and meetings used when rehab is not a viable option. Transportation is available after someone is permanently housed to solidify their continued treatment. Child care options for a parent or guardian are often available for above meetings or appointments. Social services is a strong partner and resource to assist in childcare as well as health department's Healthy Families program.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:

- 1. ensured the safety of DV survivors experiencing homelessness by:**
 - (a) training staff on safety planning;**
 - (b) adjusting intake space to better ensure a private conversation;**
 - (c) conducting separate interviews/intake with each member of a couple;**
 - (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
 - (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
 - (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**
 - 2. measured its ability to ensure the safety of DV survivors the project served.**
- (limit 2,000 characters)**

1.a) Staff attend training throughout the year from the Office of Violence Against Women and the Virginia Sexual and Domestic Violence Action Alliance, which offers training on trauma informed care, safety planning, and best practices.

b) Intakes are completed in private offices. Intake areas include space for children, emergency supplies and refreshments.

c) Clients are treated as individuals, including youth. Adults are provided with individualized services to best to meet identified needs. With the appropriate consent, children are provided with support, counseling, and recreational activities.

d) Survivors identify what they consider safest regarding rental assistance or scattered site TH. Staff work to provide options, resources, and information to assist.

e) All facilities are maintained with security cameras, lighting and deadbolts. Facilities have outdoor lighting and an alarm system. There are also several "panic" buttons throughout and when activated, contact the police for an immediate response.

f) ESCADV's shelter is in a confidential location. Residents sign a confidentiality agreement. At Avalon, scattered site TH units dedicated to survivors are not advertised and their location is not disclosed to the public or to partners. Staff works diligently to minimize disclosure of the confidential campus location.

2. Avalon Center has serviced survivors more than 30 years. As such, staff recognize that in some instances TH on-site is not the safest option for some victims. In those cases, scattered-site TH and rental assistance are better options to maintain confidentiality.

ESCADV utilizes Documenting Our Work surveys to measure its ability to ensure the safety of DV survivors served. In FY19, 100% strongly agreed or agreed with the following statements, "Staff made me feel welcome", "Staff

treated me with respect”, and “Staff respected by backgrounds and beliefs.”
93% indicated that they know more ways to plan for their safety.

1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:

- 1. project applicant’s experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and**
- 2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**
 - (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;**
 - (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
 - (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
 - (d) placing emphasis on the participant’s strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
 - (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
 - (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
 - (g) offering support for parenting, e.g., parenting classes, childcare.**

(limit 4,000 characters)

1. Trauma-informed advocacy incorporates an awareness and understanding of the impact of trauma on survivors, survivors' friends and families, staff and communities. Trauma awareness takes into account trauma over time, trauma that is multi-layered and complex, and trauma that is compounded by intersectional oppression. Trauma-informed care emphasizes critical components of listening to experiences, and goals. It also includes providing information about trauma and healing, operating from and educating about a strength-based focus, empowering survivors, being culturally aware, and supporting self-determination.

Since 2016, voluntary services and the sanctuary model have been in place, which encourages the creation of shelter “norms” rather than instituting excessive rules.

2. a) Survivors receive information in an understandable format and empowered to make decisions on housing with their unique safety needs in mind. Providing survivors with as many options for housing as possible and prioritizing the client’s preferences ensure client choice.

b) Survivors are informed of their right to safety and self-determination as well as the agencies responsibility to provide services on a voluntary basis. Survivors are not required to participate in any service in order to receive housing support or placement and will not be terminated from the program for declining ongoing services.

c) All staff are trained in trauma-informed care. Survivors are provided information on trauma through one-on-one supportive counseling, house

- meetings, and group support sessions offered to all survivors.
- d) Participant's strengths are explored and built upon during development of the individual service plan. Advocates work to offer choices and opportunities that build upon their success and skills. Service plan empowers survivors and provides staff an opportunity to provide coaching and to arrange a professional service or volunteer to help survivors build upon existing skills.
- e) Program staff is required to complete training on cultural awareness as part of the on-boarding process. Ongoing training is provided at least twice each year with training that includes equal access, trauma informed care and inclusivity. Two bi-lingual/bi-cultural advocates are on staff, as well as having advocates and staff representing multiple race, ethnic, gender and orientation communities.
- f) Connection are provided through multiple programming options. These include support groups that address not only the topics of domestic and sexual violence, but also topics such as self-care, communication, values clarification, trauma, codependency, stress management and self-esteem.
- g) Survivors that utilize housing services are offered childcare services during groups and training activities. Parenting support is available to survivors that utilize housing services, including parenting classes sensitive to cultural backgrounds and the varying impacts trauma may have on youth. A children's advocate works directly with children impacted by domestic violence as well as providing support to parents.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- **Child Custody**
- **Legal Services**
- **Criminal History**
- **Bad Credit History**
- **Education**
- **Job Training**
- **Employment**
- **Physical/Mental Healthcare**
- **Drug and Alcohol Treatment**
- **Childcare**

(limit 2,000 characters)

Staff provide comprehensive advocacy and case management services designed to address the safety needs of survivors. Legal advocates work with survivors in need of support within the criminal justice system as well as provide information and referral, support and accompaniment, as survivors engage with law enforcement and the judicial system. This support helps ensure safety, obtainment of orders of protection, and access to legal counsel, information and referral. Professional volunteers and staff provide skills training on site to include: budgeting, employment search, and resume writing to increase job attainment. Partnerships with a local banking institution provides the opportunity for one-on-one coaching for survivors to rebuild their credit with professional

banking staff. Program staff partner with community resources to secure healthcare, drug/alcohol treatment and local 12 step groups, and childcare. Parenting, nutrition, and self-care courses including art, yoga and dog therapy are provided on-site.

1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

DUNS Number:	613784446
Applicant Name:	Family Crisis Support Services
Rate of Housing Placement of DV Survivors–Percentage:	36.00%
Rate of Housing Retention of DV Survivors–Percentage:	93.00%

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:

- 1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and**
- 2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)**

1. The rate of housing placement was calculated by looking at the previous two years of services to DV clients. $60/165 = 36\%$ housing placement. $56/60 = 93\%$ housing retention.

2. Data source: VADATA (a comparable database)

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)

It is important to ensure clients are addressing their safety and feeling supported in order to move into PH. Most often, the abuser has created fears that must be addressed alongside the search for housing. Examples include: The threat of an abuser taking children from the survivor. The safety of the children is the survivor's most urgent priority. To address and support this, transportation to the courthouse and guidance is provided to file necessary paperwork, referrals to legal aid to assist with custody hearings, and working hand-in-hand with social services to provide the safety of children and guardian. Other situations occur with criminal histories or bad credit that can often halt housing applications and job searches. Case managers work with agencies such as probation, mental health, and social services to assist in overcoming barriers of past situations often resulting from the abuser's control. There is a strong connection with Virginia Job Commission, which is offering budgeting classes for individuals that are working to become independent and more

financially stable - especially in rebuilding credit. Staff are trained on available resources to survivors in both the mental and physical health capacity. The available rehab facilities, urgent care facilities, and mobile health vans are given to each person and staff assist in setting up appointments. Often times, drugs and alcohol are present due to self-medicating from trauma. Celebrate recovery and AA/NA are effective tools and meetings used when rehab is not a viable option. Transportation is available after someone is permanently housed to solidify their continued treatment. Child care options for a parent or guardian are often available for above meetings or appointments. Social services is a strong partner and resource to assist in childcare as well as health department's Healthy Families program.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:

- 1. ensured the safety of DV survivors experiencing homelessness by:**
 - (a) training staff on safety planning;**
 - (b) adjusting intake space to better ensure a private conversation;**
 - (c) conducting separate interviews/intake with each member of a couple;**
 - (d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
 - (e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
 - (f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**
 - 2. measured its ability to ensure the safety of DV survivors the project served.**
- (limit 2,000 characters)**

1. a) Staff is required to complete 75 basic hours of training before working direct hours with domestic violence/sexual assault clients. Safety planning and conducting role play scenarios are a part of training.
 - b) Intakes are conducted in a private room with soundproof foam wall panels.
 - c) If there is a situation of family violence and more than one person is coming to shelter, each person over the age of 18 receives their own individual intake.
 - d) Staff are familiar with the public housing units in the service area and requirements and supports each can provide. For example, there are only three units that allow pets without a doctor's note. When working with clients, staff about immediate housing concerns, and needs. This is important when filling out housing applications to ensure clients are placed in a unit they consider safe.
 - e) Staff check on the congregate living spaces once a week for any basic needs that require attention. This includes window and door security; ensuring lights are in working order, including closets and hallways; the safety and sturdiness of ramps and stair rails; and safety and security of the playground and parking.
 - f) Upon entry, it is expressed to each individual that confidentiality is of upmost importance. There are no signs to indicate location of the shelter and no indicators the office space is at the same location.
- 2 Documenting Our Work surveys measure the ability to ensure the safety of DV survivors served. Questions include: "Staff made me feel welcome", "Staff treated me with respect", and "Staff respected my backgrounds and beliefs," and "I have increased knowledge on safety planning."

1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:

- 1. project applicant’s experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and**
 - 2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**
 - (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;**
 - (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**
 - (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
 - (d) placing emphasis on the participant’s strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
 - (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
 - (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
 - (g) offering support for parenting, e.g., parenting classes, childcare.**
- (limit 4,000 characters)**

1. The trauma informed first approach is the only method currently taught to any staff. This approach is practiced in all trainings. Staff undergo initial Family Crisis Support Services training in this field of study, and often go to Action Alliance trainings, or Legal Aid DV Conference workshops to learn more in regard to the trauma informed first approach.

2.a) Survivors are given the choice of living in transitional housing if the need warrants or, they may choose to access rapid re-housing. Staff work with clients to complete applications for housing units the client desires and that meet safety needs. Staff work closely with the housing authority and private landlords to match persons with the best housing option for their wants and needs.

b) Staff conduct both one-on-one supportive counseling in addition to support groups to address both mental and physical trauma. Many hands-on activities are conducted that deal with learning what trauma is and how to overcome the barriers of said trauma. Referrals are also made to licensed counselors, therapists, and psychiatrists depending on the person's needs and choices.

c) Upon entry to shelter –staff begin helping clients identify strengths. Service plans are focused on building upon strengths to overcome the barriers to the survivor’s stability. A goal list is created and a journal is given to clients so they may keep track of progress.

d) Services are provided in a non-discriminatory, non-judgmental and inclusive agency manner. Our values are publicly posted and we go over this with clients so they are aware “all are welcome.” Services are provided regardless of sexual orientation, race, socioeconomic status, or religion and work to ensure survivors feel they are in a safe space free of judgement or prejudice.

e) Staff work together to make sure any resource a client may need is sought after. Area resources offer all NA/AA information, grief support counseling, churches and religious organizations, LGBTQ organizations and groups, as well

as college and work opportunities.

f) Transportation is provided while at the shelter, TH, and for clients accessing RR-H. This service continues for those who participate in aftercare case management.

g) Resources are set up for clients that include parenting services, classes, and childcare.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- **Child Custody**
- **Legal Services**
- **Criminal History**
- **Bad Credit History**
- **Education**
- **Job Training**
- **Employment**
- **Physical/Mental Healthcare**
- **Drug and Alcohol Treatment**
- **Childcare**

(limit 2,000 characters)

Staff provide comprehensive advocacy and case management services designed to address the safety needs of survivors. Legal advocates work with survivors in need of support within the criminal justice system as well as provide information and referral, support and accompaniment, as survivors engage with law enforcement and the judicial system. This support helps ensure safety, obtainment of orders of protection, and access to legal counsel, information and referral. Professional volunteers and staff provide skills training on site to include: budgeting, employment search, and resume writing to increase job attainment. Partnerships with a local banking institution provides the opportunity for one-on-one coaching for survivors to rebuild their credit with professional banking staff. Program staff partner with community resources to secure healthcare, drug/alcohol treatment and local 12 step groups, and childcare. Parenting, nutrition, and self-care courses including art, yoga and dog therapy are provided on-site.

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

Warning! The CoC Application score could be affected if information is incomplete on this formlet.

2A-1. HMIS Vendor Identification. Wellsky

Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.

2A-2. Bed Coverage Rate Using HIC and HMIS Data.

Using 2019 HIC and HMIS data, applicants must report by project type:

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	586	239	211	60.81%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	177	24	0	0.00%
Rapid Re-Housing (RRH) beds	406	23	383	100.00%
Permanent Supportive Housing (PSH) beds	102	0	77	75.49%
Other Permanent Housing (OPH) beds	9	0	9	100.00%

2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.

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

**1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.
(limit 2,000 characters)**

1. The BoS CoC is using three main steps to address HMIS participation: leveraging participation for required reporting, technical assistance for new participants, and development of a cloud-based statewide HMIS warehouse.
2. DHCD (CA) requires system level reports annually to include all HMIS and non-HMIS participants. This report provides data used to rate performance of each LPG's crisis system and impacts state funding decisions including ESG. This requirement is being used by LPGs as leverage to get new HMIS participants on board.
There are two TH projects that do not use HMIS and are not funded with any state or federal funds. However, one of these providers does have a service contract with a RR-H (ESG sub-grantee). Although they do use HMIS for RR-H, the CA in coordination with DHCD as the ESG admin., may no longer allow this service contract to continue if the agency does not re-participate with HMIS for the TH project. As state level and federal reporting requirements are such that HMIS participation is required.
DHCD (CA) is moving a pilot homeless data integration project to a state-wide initiative. As this project matures, the dashboards available to the state, BoS, LPGs, and individuals agencies are expected to bring on new HMIS participants. These dashboards will allow for project level and system level data to be instantaneously accessed providing near real-time data; drill-downs to client level data; and eventually, integration with other systems of care.

***2A-3. Longitudinal System Analysis (LSA) Submission.**

Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0. Yes

***2A-4. HIC HDX Submission Date.**

**Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).
(mm/dd/yyyy)** 04/30/2019

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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Resources:

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2B-1. PIT Count Date. 01/23/2019

Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data–HDX Submission Date. 04/30/2019

Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

2B-3. Sheltered PIT Count–Change in Implementation.

Applicants must describe:

1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and

2. how the changes affected the CoC’s sheltered PIT count results; or
3. state “Not Applicable” if there were no changes.

(limit 2,000 characters)

1. The BoS made a substantial change in how surveys were conducted and how data entry occurred. For the first time, surveys were all conducted using Google Forms. Logic was used to ensure applicable questions were asked to each interviewee. For example, the age of a client triggered a list of questions specific to youth between the age of 18-24. Additionally, LPGs were able to ask questions specific to their regions and their priorities.

The greatest impact to this method is the improvement of data quality.

Previously, hard copy surveys (aprox. 800) were sent to the CoC Coordinator for manual data entry. This most likely caused data entry issues and

judgements that may or may not have been correct.
2. This change has resulted in increased data quality as the data entry occurred as the surveys were conducted and not by a 3rd party reading hand writing and copied documents. Additionally, the BoS now has a comprehensive set of data that can be analyzed in multiple ways.

***2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.**

Applicants must select whether the CoC added or removed 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 2019 sheltered PIT count. No

2B-5. Unsheltered PIT Count–Changes in Implementation.

Applicants must describe:
1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
2. how the changes affected the CoC’s unsheltered PIT count results; or
3. state “Not Applicable” if there were no changes.
(limit 2,000 characters)

Same as 2B-3
1. The BoS made a substantial change in how surveys were conducted and how data entry occurred. For the first time, surveys were all conducted using Google Forms. Logic was used to ensure applicable questions were asked to each interviewee. For example, the age of a client triggered a list of questions specific to youth between the age of 18-24. Additionally, LPGs were able to ask questions specific to their regions and their priorities. The greatest impact to this method is the improvement of data quality. Previously, hard copy surveys (aprox. 800) were sent to the CoC Coordinator for manual data entry. This most likely caused data entry issues and judgements that may or may not have been correct.
2. This change has resulted in increased data quality as the data entry occurred as the surveys were conducted and not by a 3rd party reading hand writing and copied documents. Additionally, the BoS now has a comprehensive set of data that can be analyzed in multiple ways.

***2B-6. PIT Count–Identifying Youth Experiencing Homelessness.**

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count. Yes

2B-6a. PIT Count–Involving Youth in Implementation.

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:

- 1. plan the 2019 PIT count;**
 - 2. select locations where youth experiencing homelessness are most likely to be identified; and**
 - 3. involve youth in counting during the 2019 PIT count.**
- (limit 2,000 characters)**

The BoS took the first step in working to use the PIT count to benefit youth. Although, the 2019 PIT count did not have specific outreach or youth led planning, it was the first time specific youth applicable questions were recorded in a CoC level data set. Questions regarding foster care, criminal justice, education level, and supports received were reported for the entire BoS CoC.

2B-7. PIT Count–Improvements to Implementation.

Applicants must describe the CoC’s actions implemented in its 2019 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. A significant way the count of chronic homelessness was collected was with the use of Google Forms. This application allowed data to be entered directly by the surveyor and allowed for logic to be used in the survey to calculate chronic homelessness.
2. Except for the new surveying methodology, there were no other improvements to identify families with children experiencing homelessness.
3. Over the past year, the BoS has improved relationships with the multiple VA hospitals. The improved collaborations have helped to ensure the BoS is aware of all veterans who are homeless known by the VA. This collaboration allowed for more VA support during the PIT. In addition, the improved data collection method (Google Forms) helped to ensure data quality.

3A. Continuum of Care (CoC) System Performance

Instructions

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*3A-1. First Time Homeless as Reported in HDX.

Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	1,970
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3A-1a. First Time Homeless Risk Factors.

Applicants must:

1. describe the process the CoC developed to identify 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)

First time homeless decreased by 114 persons.

1) The BoS reviews shelter data to determine the characteristics of persons who become homeless. With this data, the BoS has identified 21 characteristics or barriers that may make households more vulnerable to homelessness. Of these 21, four were identified that may yield the greatest vulnerabilities: unaccompanied youth under 18, a single adult with 4+ children, a head of household who has experienced homelessness in the past 3 years, and household income below 15% AMI.

2) The BoS has been working diligently to use prevention funds to divert

households from homelessness as opposed to eviction prevention. This way, limited prevention resources can be targeted to those most likely to become homeless. In addition to targeting, the BoS is also working to use mediation with landlords and families/friends to lengthen or stabilize housing for persons seeking services.

3) Each of the 12 LPGs has one org that oversees prevention services. The BoS CoC Coordinator at DHCD works with each LPG to ensure they are reviewing data and using state prevention funds in accordance with BoS system level procedures.

***3A-2. Length of Time Homeless as Reported in HDX.**

Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	39
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3A-2a. Strategy to Reduce Length of Time Homeless.

Applicants must:

- 1. describe the CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;**
 - 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and**
 - 3. provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the length of time individuals and families remain homeless.**
- (limit 2,000 characters)**

The length of time homeless remains consistent at 39 days down one day from 2017.

1.) The BoS first strategy is to optimize coordinated entry and when possible divert households from homelessness by mediating with landlords, family and friends, or identify alternative mainstream services. If diversion is not possible, the emergency shelters have received training on low-barrier (safety expectations) procedures. This helps to ensure that households with the greatest needs are able to access shelter and then obtain the housing resources needed. Using the VI-SPDAT and HUD’s level of prioritization, households are identified for increased level of resources.

2) BoS took part in a three month Effective Emergency Shelter Learning Community clinic facilitated by NAEH. This learning series provided emergency shelters with a tool that evaluates shelter inflow, outflow, and length of stay. The BoS HMIS administrator created a report for this tool which helps identify those households staying the longest and enables shelters to evaluate the following on a monthly basis: total unique households served; total households entering shelter; total households exiting shelter; total household exiting to a permanent destination; average length of shelter stays for all households exiting to any destination; the average length of shelter stays in days for all households exiting to a permanent destination; and the average length of shelter stays for

all stayer households. This tool along with assessment scores are being used to target resources to those who need them most.

3) The BoS CoC Coordinator at DHCD works with each LPG to ensure they are reviewing data and using state prevention funds in accordance with BoS system level procedures.

***3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.**

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	61%
2. Report 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 as reported in HDX.	96%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

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;**
 - 2. provide the organization name or position title responsible for overseeing 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;**
 - 3. 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; and**
 - 4. provide the organization name or position title responsible for overseeing 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)**

1&3) The BoS strategy is to implement housing focused emergency shelter, rapid exits to housing, and access to RRH when needed. Since the spring of 2017, the emergency shelters in the BoS have been working to reduce barriers and implement the key components the NAEH has identified for an effective shelter to include: housing first approach, immediate and easy access, housing-focused services, rapid exits to permanent housing, and evaluation to performance improvement. LPGs have formed Landlord Committees with the goal of bringing together property owners and housing specialists/counselors from homeless service organizations across the geographies. These committees seek to engage property owners in conversations to determine how homeless service providers can best meet property owner needs while increasing their acceptance of households of families with high barriers into

permanent housing.

2&4. Each of the 12 LPGs have their own landlord engagement committees. The BoS CoC Coordinator at DHCD works with each LPG to ensure they are reviewing data and funds in accordance with BoS system level procedures.

***3A-4. Returns to Homelessness as Reported in HDX.**

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	6%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	3%

3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.

Applicants must:

- 1. describe the strategy the CoC has implemented to identify 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 responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families return to homelessness. (limit 2,000 characters)**

1. The BoS uses CE and shelter data to analyze those who are entering and re-entering the homeless services system. As of July 2018, each BoS LPG CE project set up in HMIS, which helps identify those who are re-entering the homeless response system more timely.
2. Via the CoC system level procedures, the BoS is targeting prevention funds that each LPG has via the HSNH funding to those most likely to become homeless and not on eviction prevention. This system prioritizes those who have previously been homeless as well as those with extremely high barriers to obtaining housing (large households, youth, multiple episodes of homelessness, income under 15% AMI). By targeting those with previous episodes to homeless especially within the past 3 years, LPGs are able to often prevent re-entries into homelessness.
3. The BoS CA oversees system level data and facilitates the CE and services committee, which addresses system processes such as targeting and prioritizing.

***3A-5. Cash Income Changes as Reported in HDX.**

Applicants must:

		Percentage
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1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	5%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	32%

3A-5a. Increasing Employment Income.

Applicants must:

- 1. describe the CoC's strategy to increase employment income;**
 - 2. describe the CoC's strategy to increase access to employment;**
 - 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
 - 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.**
- (limit 2,000 characters)**

1. LPGs across the BoS have developed strategic relationships with regional workforce development boards. The strategy of these partnerships is establishing a collaborative approach to meet the needs of job seekers(who have experienced homelessness or unstable housing) secure meaningful employment, competitive wages, and career advancement through an integrated workforce support structure.

2. The partnership has one stop and affiliate centers that provide job search, resume wringing, application assistance; veteran services; unemployment insurance; Adult, Youth & Dislocated Worker Program; job fairs; job postings; vocation rehab; adult education programs; senior community service employment program; and Job Corp.

The partnership targets the recruitment of special populations (which overlap with those served in the homeless services system) to include: individuals with disabilities, low-income, basic skills deficient, and/or English language learners.

3. The partnership works with traditional mainstream partners including Goodwill Industries, Adult Education and Community Colleges, Virginia Employment Commission, Department of Aging and Rehabilitative Services, Virginia Department of Labor and Industry (Apprenticeships), K-12 Career and Technical Education, Department of Social Services, Job Corp, Community Action Agencies, and Department of Juvenile Justice. Additional non-traditional partners include chambers of commerce, Virginia Economic Development Partnership, Virginia Department of Small Business, Small Business Development Centers, United Way, and local Colleges and Universities.

4. The BoS CA oversees system level partnerships and facilitates the services committee, which addresses system processes. These partnerships are beginning at the local level and being replicated across the BoS.

3A-5b. Increasing Non-employment Cash Income.

Applicants must:

- 1. describe the CoC's strategy to increase non-employment cash income;**
- 2. describe the CoC's strategy to increase access to non-employment cash sources;**

3. provide the organization name or position title that is responsible for overseeing the CoC’s strategy to increase non-employment cash income.

1. Along with the partnership created to increase employment income, the BoS is working on a strategy to increase access to non-employment income. To improve access, the BoS ensures case managers work to reduce barriers through outreach, providing transportation, and understanding the rules and regulations around possible benefits. Additionally, the LPGs have SOAR trained staff who work to ensure those eligible for disability benefits are able to have applications approved.
2. To increase access, the BoS is engaged at multiple levels of the system. For example, the BoS is represented on the Gov. Coordinating Council on Homelessness (GCCH), which is chaired by the Secretary of Commerce and Trade and the Secretary of Health and Human Resources. This committee advises and guides state policies around systems that impact the homeless population. The only way for the population to increase non-employment income is through gaining access. This committee addresses areas of access including: public transportation, funding for outreach, co-locating facilities, providing multilingual services, and improving communications between homeless service providers and benefit workers. This work is being done from the top down as well as the bottom up. So, LPGs also have service committees that work to implement improved policies and guidance to ensure those who are in need and qualify receive their benefits.
3. The BoS CA oversees system level partnerships and facilitates the services committee, which addresses system processes. These partnerships are beginning at the local level and being replicated across the BoS.

3A-5c. Increasing Employment. Attachment Required.

Applicants must describe how the CoC:

1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and

2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.

(limit 2,000 characters)

1. The BoS is part of an MOU designed to define the parameters with which education, workforce, economic development, and other partner programs to create a seamless, customer-focused system that aligns services delivery across the board. The partnership includes increased opportunities for those who are experiencing homelessness to access basic career services, individualized career services, and training services.
2. The partnership’s training services including occupational skills training through Individual Training Accounts; adult education and literacy activities including English language acquisition; on the job training, incumbent working training, cooperative education, training by the private sector, skill upgrade and retraining, entrepreneurial training, customized training with a commitment by an employer, and other training as determined by governing rules.

3A-5d. Promoting Employment, Volunteerism, and Community Service.

Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC’s geographic area:

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	<input type="checkbox"/>
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	<input type="checkbox"/>
3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	<input type="checkbox"/>
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	<input type="checkbox"/>
5. The CoC works with organizations to create volunteer opportunities for program participants.	<input type="checkbox"/>
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	<input type="checkbox"/>
7. Provider organizations within the CoC have incentives for employment.	<input type="checkbox"/>
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	<input type="checkbox"/>

3A-6. System Performance Measures 05/28/2019
Data–HDX Submission Date

Applicants must enter the date the CoCs submitted its FY 2018 System Performance Measures data in HDX. (mm/dd/yyyy)

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

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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3B-1. Prioritizing Households with Children.

Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of previous homeless episodes	<input checked="" type="checkbox"/>
3. Unsheltered homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad credit or rental history	<input type="checkbox"/>
6. Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-1a. Rapid Rehousing of Families with Children.

Applicants must:

1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;

2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once

assistance ends; and
3. provide the organization name or position title responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of them becoming homeless. (limit 2,000 characters)

- 1) DHCD (CA) requires all state funded projects (including ES) be low-barrier and housing focused. This requirement went into effect 2018-19 grant year after a series of trainings the previous year by the NAEH on Effective Emergency Shelters. Over the course of the 2018-19 grant year and into the current renewal year, DHCD (CA) has monitored projects and where barriers were present for project entry (ES, RR-H or PSH), changes are required for continued funding. Additionally, TA assistance has been provided to help address the philosophical and organizational changes that need to be made to ensure those most in need are served and that housing is the first priority (with the exception of safety). The BoS motto is that if you aren’t talking about how “X” affects PH, you are having the wrong conversation.
- 2) The BoS ensures every family is assessed at intake or point of contact for diversion, crisis housing, and PH barriers with a goal of PH in 30 days. Then, each family is scored using the VI-SPDAT to ensure those with the greatest vulnerability and those who have been homeless the longest receive RRH or PSH first. Currently, all persons in the BoS are housed, on average, in 39 days, a 5% decrease from FY17. Through state and ESG funding, ES have housing focused CM that work with families to obtain housing regardless of their prioritization for RRH or PSH services. If a family needs the additional assistance, RRH or PSH, then these projects provide housing search and landlord recruitment to help families obtain permanent housing as quickly as possible.
3. The BoS CoC program coordinator at DHCD (CA) oversees system level data and facilitates the services committee, which addresses system processes.

3B-1b. 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 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 any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	<input checked="" type="checkbox"/>
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	<input type="checkbox"/>
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input checked="" type="checkbox"/>
4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.	<input checked="" type="checkbox"/>

3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.

Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:

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

3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.

Applicants must check all that apply that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
2. Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
3. Unsheltered Homelessness	<input checked="" type="checkbox"/>
4. Criminal History	<input checked="" type="checkbox"/>
5. Bad Credit or Rental History	<input type="checkbox"/>

3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.

Applicants must describe how the CoC increased availability of housing and services for:

- 1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and**
 - 2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.**
- (limit 3,000 characters)**

1. and 2. The BoS has taken strategic steps to address youth homelessness. Through the Petersburg City and Schools Partnership, one agency that has been focusing on youth homelessness for the past two years that will help other

agencies and LPGs assess and implement new techniques to address youth who are homeless. This agency has been working in the Petersburg City High School to stabilize housing for youth and their families who are homeless (any definition), and chronically absent from school. The goal of the pilot project funded by the Virginia Housing Trust Fund is to stabilize housing to increase attendance thus enabling graduation. With the success of this project, and need for a more coordinated effort, the BoS applied for the Youth Homeless Demonstration Grant. Although the BoS was not chosen, the coordination and creation of a Youth Action Board (YAB) has already had significant impact. The Youth Action Board meets twice a month and has been working to develop an understanding of the housing crisis response system and known best practices. The YAB, comprised of five youth, four of whom have lived experience, is facilitated by KeKe Cody, an outreach specialist for Commonwealth Catholic Charities. The focus of the YAB is planning and coordinating a Youth PIT count, connecting with youth-serving organizations, and informing BoS policies with youth-affirming and positive youth development principles.

The work of the Youth Action Board and the City and Schools Partnership has resulted in the following opportunities to address youth homelessness and instability:

The YAB will attend and be on the Youth Voice panel at the Virginia Governor's Housing Conference in Nov. 2019.

\$35,000 from the Cameron Foundation for a consultant to address barriers to shelter

\$20,000 from Virginia Housing Development Authority to develop a strategic plan to include ending youth homelessness

\$75,000 from the United Way of Richmond and Petersburg for a youth outreach specialist, YAB stipends, survival kits and staffing support for a community outreach specialist.

3B-1d.1. Youth Experiencing Homelessness—Measuring Effectiveness of Housing and Services Strategies.

Applicants must:

- 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. 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 both strategies in question 3B-1d.; and**
- 3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)**

Success is defined through the development of resources and support systems to engage youth who are at-risk or experiencing homelessness. Central to building an effective community based response to youth homelessness in Petersburg, is gathering the data. Expected outcomes include: a minimum total of youth who will be provided safe and permanent housing within 30 days of program intake; the number of youth who maintained stable housing within 12 months of program intake; the number of participating youth eligible for benefits who applied for or received funding; the number of homeless youth who maintain a workable household budget that will ensure stable housing; and the number of youth who report feelings of hopefulness concerning their futures.

Based on the outcomes identified in the USICH, the BoS believes measuring the identified out comes will provide data and benchmarks to determine if the BoS has effectively ended youth homelessness.

3B-1e. Collaboration–Education Services.

Applicants must describe:

- 1. the formal partnerships with:**
 - a. youth education providers;**
 - b. McKinney-Vento LEA or SEA; and**
 - c. school districts; and**

- 2. how the CoC collaborates with:**
 - a. youth education providers;**
 - b. McKinney-Vento Local LEA or SEA; and**
 - c. school districts.**

(limit 2,000 characters)

1.The BoS has representation on the Governor’s Children’s Cabinet that is dedicated to the education, health, safety, and welfare of children and youth. One of the Cabinet’s initiatives is focused on a BoS LPG. Through a formal initiative facilitated by the United Way, state and local government, education, legal, and nonprofit have developed a project funded by the Virginia Housing Trust Fund to stabilize housing for homeless students, who are chronically absent from school. The goal is to stabilize housing to increase attendance enabling an increase in graduation rates. Additionally, a BoS Steering Committee member with lived experience sits on the HOPE (McKinney-Vento SEA) Advisory Board.

2.The BoS LPGs have collaborative partnerships with Head Start, Early HeadStart, Healthy Start, Birth to 3 programs, and community colleges and universities at the local level. These collaborations help ensure families and children receive assistance or are able to access opportunities through MOUs or Cooperative Agreements. Additionally, the CA sits on the Governor’s Coordinating Council on Homelessness Youth Committee that provides overall guidance on issues related to student and youth homelessness. Each LPG collaborates with their school district’s homeless youth liaison. The McKinney Vento state coordinator serves on the GCCH and the youth committee of the council. DHCD (CA) provides annual training on the homeless services system to the VA Association of Federal Education Program Administrators. The annual training provided to the VA Association of Federal Education Program Administrators is recorded and published for all faculty and staff in each school district.

3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.

**Applicants must describe 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 BoS CoC adopted the following procedure for services offered to families: case managers verbally and in writing must notify parents of their child's rights to access and receive educational services including enrolling in school without required documentation, remaining in their home school with transportation provided, and free lunch.

3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.

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

3B-2. Active List of Veterans Experiencing Homelessness.

Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC. Yes

3B-2a. VA Coordination–Ending Veterans Homelessness.

Applicants must indicate whether the CoC is actively working with the U.S. Department of Veterans Affairs (VA) and VA-funded programs to achieve the benchmarks and criteria for ending veteran homelessness. Yes

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach. Yes

3B-3. Racial Disparity Assessment. Attachment Required.

Applicants must:

- 1. select all that apply to indicate the findings from the CoC’s Racial Disparity Assessment; or**
- 2. select 7 if the CoC did not conduct a Racial Disparity Assessment.**

1. People of different races or ethnicities are more likely to receive homeless assistance.	<input type="checkbox"/>
2. People of different races or ethnicities are less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	<input checked="" type="checkbox"/>
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
7. The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

3B-3a. Addressing Racial Disparities.

Applicants must select all that apply to indicate the CoC’s strategy to address any racial disparities identified in its Racial Disparities Assessment:

1. The CoC is ensuring that staff at the project level are representative of the persons accessing homeless services in the CoC.	<input checked="" type="checkbox"/>
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	<input type="checkbox"/>
3. The CoC has identified strategies to reduce disparities in their homeless system.	<input type="checkbox"/>
4. The CoC has implemented strategies to reduce disparities in their homeless system.	<input type="checkbox"/>
5. The CoC has identified resources available to reduce disparities in their homeless system.	<input type="checkbox"/>
6: The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notice>

Warning! The CoC Application score could be affected if information is incomplete on this formlet.

4A-1. Healthcare—Enrollment/Effective Utilization

Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and 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 systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;**
- 2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;**
- 3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in**

health insurance;
4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and
5. 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. VA has one application, CommonHelp, where a household can apply for all benefits (assistance with food, childcare, heating/cooling bills, healthcare and cash assistance). Homeless service staff are knowledgeable in assisting households in applying for and follow up on mainstream benefits. In addition to financial support, staff are able to make “warm” referrals to CSBs, food banks, SA and MH providers, and other community services.
2. LPGs have mainstream service staff as part of their membership who regularly report up-dates on eligibility, referral processes, timelines, new services or contacts, and other vital information. If a service is identified, where staff need additional information, specific training is provided to the LPG membership.
3. Virginia has now expanded Medicaid. With the expansion came a PR campaign to ensure citizens and social service professionals are educated on applying, eligibility criteria, and coverage benefits. This information has been provided to all homeless service providers in the BoS. Insurance/Medicaid coverage is documented in HMIS. If a client does not have Medicaid and likely qualifies, case managers work to ensure clients get access to coverage ASAP.
4. Homeless services providers in the BoS work off the expectation that many supports are necessary to ensure clients’ housing stability. To meet this expectation, case managers work with mainstream resource providers in the local communities. Collaboratively, assistance is provided to help clients use their the benefits. Additionally, as part of the Medicaid expansion – Cover Virginia (coverva.org) provides information on benefits and other helpful information (in multiple languages) to guide citizens and service providers in using the benefit.
5. Each LPG has a service coordination committee that helps coordination with mainstream resources and the CA serves on H2 workgroup of Governor’s Coordinating Council on Homelessness.

4A-2. Lowering Barriers to Entry Data:

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 has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	14
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	14
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

4A-3. Street Outreach.

Applicants must:

- 1. describe the CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;**
- 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 BoS is extremely rural and as such, street outreach is not conducted through traditional SO programs. The LPGs continually work with law enforcement, hospitals, EMTs, and other community resources to identify persons who are unsheltered or unengaged. If an unsheltered/unengaged person becomes known to a LPG, it is the responsibility of the coordinated entry staff to conduct outreach (establish a relationship, conduct assessment, make referrals, offer services, and follow up). Once located, persons who are unsheltered are followed up with regularly until permanent housing is obtained or until they enroll in a homeless service program.

2. To the extent possible, outreach is conducted across the 100% of the LPGs to identify homeless persons who are not accessing services. Beginning July 2018, three LPGs received new outreach funds totaling \$47,000. These funds along with PATH funding in two other LPGs will assist with formalizing outreach in five of the 12 LPGs.

3. In areas where there is not a formal outreach project, outreach is conducted when law enforcement, hospitals, EMTs, and other community resources to identify persons who are unsheltered. Areas with more formal outreach projects conduct outreach at least monthly by PATH or outreach workers. In addition, all LPGs conduct outreach during the annual PIT count.

4. The BoS’s SO is designed to effectively engage and build trusting relationships with those who are least likely to access services. Most importantly are partnerships with other resources including law enforcement, EMTs, hospitals, and businesses where unsheltered households may obtain survival goods. Additionally, the BoS has worked to lower barriers so that those who are in active addiction, have pets, in relationships, or who have previously had bad experiences with providers be re-engaged and encouraged to re-access services. For those who ES is not an option, both RR-H and PSH options are available without accessing shelter.

4A-4. RRH Beds as Reported in 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 2018 and 2019.

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	401	406	5

4A-5. Rehabilitation/Construction Costs–New Projects. No

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.

4A-6. Projects Serving Homeless under Other Federal Statutes. No

Applicants must indicate whether the CoC is 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
_ FY 2019 CoC Competition Report (HDX Report)	Yes	HDX Competition R...	09/20/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners’ Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Homeless Pref...	09/20/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	CE System	09/20/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	Notification of a...	09/24/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	Notification - no...	09/24/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	CoC announcement ...	09/24/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	Competition Posting	09/26/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes	Public Posting	09/25/2019
3A. Written Agreement with Local Education or Training Organization.	No		
3A. Written Agreement with State or Local Workforce Development Board.	No	Workforce MOU	09/20/2019
3B-3. Summary of Racial Disparity Assessment.	Yes	Racial Disparity ...	09/20/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No	MOU with HMIS Admin.	09/20/2019
Other	No	MOU CoC and CA DHCD	09/20/2019

Other	No		
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Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Homeless Preferences

Attachment Details

Document Description: CE System

Attachment Details

Document Description: Notification of accepted projects

Attachment Details

Document Description: Notification - none rejected

Attachment Details

Document Description: CoC announcement and timeline

Attachment Details

Document Description: Competition Posting

Attachment Details

Document Description: Public Posting

Attachment Details

Document Description:

Attachment Details

Document Description: Workforce MOU

Attachment Details

Document Description: Racial Disparity Analysis

Attachment Details

Document Description:

Attachment Details

Document Description: MOU with HMIS Admin.

Attachment Details

Document Description: MOU CoC and CA DHCD

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/16/2019
1B. Engagement	09/26/2019
1C. Coordination	09/26/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/25/2019
1F. DV Bonus	09/26/2019
2A. HMIS Implementation	09/24/2019
2B. PIT Count	09/24/2019
3A. System Performance	09/25/2019
3B. Performance and Strategic Planning	09/24/2019
4A. Mainstream Benefits and Additional Policies	09/24/2019
4B. Attachments	09/26/2019

FY2019 CoC Application	Page 58	10/02/2019
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Submission Summary

No Input Required

2019 HDX Competition Report

PIT Count Data for VA-521 - Virginia Balance of State CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	654	722	718	761
Emergency Shelter Total	392	439	442	531
Safe Haven Total	0	0	0	0
Transitional Housing Total	106	124	111	106
Total Sheltered Count	498	563	553	637
Total Unsheltered Count	156	159	165	124

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	58	39	38	24
Sheltered Count of Chronically Homeless Persons	34	15	12	14
Unsheltered Count of Chronically Homeless Persons	24	24	26	10

2019 HDX Competition Report

PIT Count Data for VA-521 - Virginia Balance of State CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	85	102	98	118
Sheltered Count of Homeless Households with Children	77	94	86	112
Unsheltered Count of Homeless Households with Children	8	8	12	6

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	22	29	35	36	30
Sheltered Count of Homeless Veterans	13	24	26	28	19
Unsheltered Count of Homeless Veterans	9	5	9	8	11

2019 HDX Competition Report
HIC Data for VA-521 - Virginia Balance of State CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	586	239	211	60.81%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	177	24	0	0.00%
Rapid Re-Housing (RRH) Beds	406	23	383	100.00%
Permanent Supportive Housing (PSH) Beds	102	0	77	75.49%
Other Permanent Housing (OPH) Beds	9	0	9	100.00%
Total Beds	1,280	286	680	68.41%

2019 HDX Competition Report

HIC Data for VA-521 - Virginia Balance of State CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	30	21	45	36

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC	93	137	88	94

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC	351	511	401	406

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for VA-521 - Virginia Balance of State CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	1554	1305	41	39	-2	24	21	-3
1.2 Persons in ES, SH, and TH	1554	1307	41	39	-2	24	21	-3

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.

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1545	1303	100	118	18	40	39	-1
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1556	1303	101	118	17	40	39	-1

2019 HDX Competition Report

FY2018 - 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.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	7	0	0%	0	0%	0	0%	0	0%
Exit was from ES	571	64	11%	24	4%	34	6%	122	21%
Exit was from TH	0	0		0		0		0	
Exit was from SH	0	0		0		0		0	
Exit was from PH	657	7	1%	12	2%	28	4%	47	7%
TOTAL Returns to Homelessness	1235	71	6%	36	3%	62	5%	169	14%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report

FY2018 - 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 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	722	718	-4
Emergency Shelter Total	439	442	3
Safe Haven Total	0	0	0
Transitional Housing Total	124	111	-13
Total Sheltered Count	563	553	-10
Unsheltered Count	159	165	6

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	1587	1390	-197
Emergency Shelter Total	1579	1390	-189
Safe Haven Total	0	0	0
Transitional Housing Total	11	3	-8

2019 HDX Competition Report

FY2018 - 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 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	30	44	14
Number of adults with increased earned income	0	2	2
Percentage of adults who increased earned income	0%	5%	5%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	30	44	14
Number of adults with increased non-employment cash income	6	14	8
Percentage of adults who increased non-employment cash income	20%	32%	12%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	30	44	14
Number of adults with increased total income	6	14	8
Percentage of adults who increased total income	20%	32%	12%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	169	193	24
Number of adults who exited with increased earned income	13	17	4
Percentage of adults who increased earned income	8%	9%	1%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	169	193	24
Number of adults who exited with increased non-employment cash income	10	6	-4
Percentage of adults who increased non-employment cash income	6%	3%	-3%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	169	193	24
Number of adults who exited with increased total income	19	20	1
Percentage of adults who increased total income	11%	10%	-1%

2019 HDX Competition Report

FY2018 - 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 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1463	1359	-104
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.	283	193	-90
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)	1180	1166	-14

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	2451	2248	-203
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.	367	278	-89
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.)	2084	1970	-114

2019 HDX Competition Report

FY2018 - 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 FY2018 (Oct 1, 2017 - Sept 30, 2018) 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 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	15	97	82
Of persons above, those who exited to temporary & some institutional destinations	0	49	49
Of the persons above, those who exited to permanent housing destinations	4	26	22
% Successful exits	27%	77%	50%

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2243	2195	-48
Of the persons above, those who exited to permanent housing destinations	1298	1334	36
% Successful exits	58%	61%	3%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	61	67	6
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	55	64	9
% Successful exits/retention	90%	96%	6%

2019 HDX Competition Report FY2018 - SysPM Data Quality

VA-521 - Virginia 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 in 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.

2019 HDX Competition Report FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	432	378	369	359	108	146	151	138	55	30	38	50	278	351	480	373				
2. Number of HMIS Beds	262	226	263	240	0	0	7	0	37	30	35	49	234	351	480	373				
3. HMIS Participation Rate from HIC (%)	60.65	59.79	71.27	66.85	0.00	0.00	4.64	0.00	67.27	100.00	92.11	98.00	84.17	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1361	1398	1357	1368	2	11	8	3	45	45	45	87	1211	1117	1382	1481	4	15	0	39
5. Total Leavers (HMIS)	1225	1255	1221	1221	2	3	8	0	12	8	9	8	892	746	967	1079	2	11	0	38
6. Destination of Don't Know, Refused, or Missing (HMIS)	390	38	190	107	0	0	0	0	0	0	0	1	46	44	34	33	0	5	0	0
7. Destination Error Rate (%)	31.84	3.03	15.56	8.76	0.00	0.00	0.00		0.00	0.00	0.00	12.50	5.16	5.90	3.52	3.06	0.00	45.45		0.00

2019 HDX Competition Report

Submission and Count Dates for VA-521 - Virginia Balance of State CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/23/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/30/2019	Yes
2019 HIC Count Submittal Date	4/30/2019	Yes
2018 System PM Submittal Date	5/28/2019	Yes



Ukrop, Andriea <andriea.ukrop@dhcd.virginia.gov>

BoS Ranking - IMPORTANT

1 message

Ukrop, Andriea <andriea.ukrop@dhcd.virginia.gov>

Fri, Sep 6, 2019 at 9:42 AM

To: Kyle Sensabaugh <ksensabaugh@peopleinc.net>, Mary Beth Adkins <marybethadkins@comcast.net>, Andy Kegley <akegley@wythehope.org>, Casey Edmonds <cedmonds@nrcaa.org>, Jenny Biche <jkbiche@rrregion.org>, Kimberly Tucker <ktucker@sjvmall.net>, Lydia Campbell <lcampbell@vcsb.org>, Amanda Bower <abrowder@sjvmall.net>, Brandi Day <bday@peopleinc.net>, Angela Blount <ablount@vsdvalliance.org>
Cc: Carver Nichele lut57931 <nichele.carver@dhcd.virginia.gov>

Good Morning,

First, congratulations! All applications were accepted to be submitted in the full CoC application.

Second, I will be in touch with each organization either later today or Monday to go over any changes or edits that will be required in order to submit the final application. I will release the applications once I email or speak with you regarding the changes.

Third, there is an appeals process if you believe the ranking process was not done in a transparent manner. All appeals must be made by CoB Sept. 9th.

The ranking tool was provided for your use and as you saw, renewals were primarily based on performance (APRs were used to determine performance).

**** Appeals Process****2019 Balance of State Continuum of Care Funding Appeals Process**

- Applicants will receive a summary of the priority ranking on Sept. 6, 2019.
- Applicants that wish to appeal the ranking committee's decision must notify the Department of Housing and Community Development's CoC Program Coordinator (Andriea Ukrop, andriea.ukrop@dhcd.virginia.gov) in writing via email no later than close of business Sept. 9, 2019 with the following information
 - Agency name and contact information
 - Project name
 - Specific reason for appeal
- **Applicant should note that the Ranking Committee will not use the appeals process as an opportunity to reconsider funding decisions without a clear explanation of the project's grievance with the transparency of grant application process.**
- The Ranking Committee will review all appeals and make final decisions on Sept. 10, 2019 via email vote.
- Applicants will be notified in writing of the appeal outcome not later than Sept. 12, 2019.

I will be in touch soon.

Thank you all for your hard work!

Andriea

Andriea Ukrop
Data Integration Coordinator
804-371-7128

Department of Housing & Community Development

BoS HUD CoC Competition - Ranking and Tiering 2019

Tier 1 - \$895,002

Tier 2 - \$713,987

DV Bonus - \$361,001

	Organization	Project Name	Request	Project Type	New/Renewal
Tier 1	Dept. Housing and Comm. Development	HMIS 2019	\$141,301	HMIS	Renewal
	New River Community Action Agency	CoC BOS NRCA Application Renewal FY2019	\$158,956	PH-RRH	Renewal
	Valley Community Services Board	Valley PH-RRH	\$106,200	PH-RRH	New
	Valley Community Services Board	Valley PH-PSH	\$96,371	PH-PSH	New
	HOPE, Inc.	FY 19 HOPE RRH	\$71,859	PH-RRH	Renewal
	Hope, Inc.	FY 19 HOPE PSH	\$56,963	PH-PSH	Renewal
	People, Inc.	Foothills Housing Network PSH Renewal 2018	\$114,404	PH-PSH	Renewal
	St. Joseph's Villa	Villa FY19 HRC RRH Renewal	\$148,948	PH-RRH	Renewal
Tier 2	St. Joseph's Villa	Villa FY19 HRC RRH Renewal	\$173,460	PH-RRH	Renewal
	Family Crisis Support Services	FCSS New Application 2019	\$120,214	TH/RRH	New(DV Bonus)
	Dept. of Housing and Comm. Development	BoS Coordinated Entry FY2019	\$392,564	SSO-CE	New
	People, Inc.	Foothills Housing Network RR Renewal 2019	\$49,054	PH-RRH	Renewal
	People, Inc.	Bristol Permanent Supportive Housing FY19	\$27,038	PH-PSH	Renewal
	People, Inc.	Bristol Permanent Supportive Housing FY19 Expansion	\$20,460	PH-PSH	New/Expansion
	People, Inc.	Cumberland Plateau Rapid Rehousing 2019	\$51,411	PH-RRH	New
	DV and SA Action Alliance	Action Alliance DV SSO-CE	\$126,688	SSO-CE	New (DV Bonus)
	DV and SA Action Alliance	Action Alliance DV TH/RRH	\$114,099	TH/RRH	New (DV Bonus)



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**HMIS GOVERNANCE CHARTER
of the
Virginia Balance of State CoC**

A. PURPOSE

This document shall serve as (i) the governance charter for the oversight of the Homeless Management Information System ("HMIS") and (ii) the agreement between the Virginia BoS CoC and its designated HMIS Lead Agency.

B. RESPONSIBILITIES OF THE GREATER RICHMOND CONTINUUM OF CARE

The primary purpose of the Virginia BoS CoC is to carry out the responsibilities of a Continuum of Care as defined by Housing and Urban Development (HUD). The CoC Steering Committee designates a Homeless Management Information System (HMIS) and an eligible applicant to manage the HMIS to ensure compliance with relevant regulations and to maximize the availability of data to facilitate planning, performance measurement, and service coordination.

C. RESPONSIBILITIES OF THE HMIS LEAD AGENCY

The HMIS Lead Agency shall be responsible for oversight of all day-to-day operations including: technical infrastructure; planning, scheduling, and meeting HMIS project objectives; supervision of project staff, including reasonable divisions of labor; and hiring project staff.

In addition, staff are responsible for:

1. Managing the relationship with the HMIS vendor
2. Providing leadership for technical strategy planning and quality assurance
3. Providing business integration services to social service agencies
4. Working with and supporting HMIS staff in other CoCs
5. Assisting agencies and CoCs with HMIS funding requests
6. Implementing HMIS to Virginia service providers
7. Managing other project resources
8. Monitoring data quality and security
9. Serving as System Administrator
 - (a) Ensuring the HMIS database meets required levels of data integrity
 - (b) Managing the HMIS configuration and screen layouts
 - (c) Assisting users in generating required reports or helping them contract with other resources to create reports
 - (d) Monitoring data quality and security
10. Managing training activities
 - (a) Creating training materials
 - (b) Scheduling and conducting training classes
 - (c) One-on-one training as needed
 - (d) Providing End-user support
 - (e) Monitoring data quality and security
 - (f) Analyzing the HMIS problem log to evaluate the need for additional training.

D. RESPONSIBILITIES OF THE COCHMIS POLICIES COMMITTEE

The HMIS Committee will work with the HMIS Lead to:

1. Provide information and guidance to the Virginia BoS CoC and other CoCs as requested related to the implementation of HMIS and the designation of an HMIS Lead;
2. Ensure compliance with HUD's data standards;
3. Provide oversight to the funding and operations of HMIS as part of the CoC;
4. Maintain data quality;
5. Ensure that all HUD funded organizations are trained in and fully utilizing HMIS;
6. Provide input, oversight, and guidance on the development of HMIS policies and procedures;
7. Facilitate the coordination of data collection with agencies primarily serving survivors of sexual and domestic violence;
8. Oversee federal reporting of point-in-time count, Housing Inventory Count, Longitudinal Systems Assessment (LSA), and system performance measures; and,
9. Ensure compliance with HMIS system participation requirements.

E. RESPONSIBILITIES OF THE HMIS PARTICIPATING AGENCIES

HMIS Participating Agencies shall:

1. Designate an Agency Administrator to function as lead staff on HMIS matters and serve as primary point of contact;
2. Uphold Federal and State Confidentiality regulations that protect client records and privacy as referenced in 45 C.F.R. §§ 160 & 164, Health Insurance Portability and Accountability Act (HIPAA), and 42 C.F.R. § 2;
3. Maintain an Internet Connection and Onsite Computer Equipment as specified in the "Maintenance of Onsite Computer Equipment" section of the HMIS Policies and Procedures Manual;
4. Utilize the HMIS for legitimate business purposes only, and will use Client information only as permitted by this Agreement;
5. Consistently enter information into the HMIS and endeavor to keep information up to date;
6. Participate in evaluation efforts requested by Homeward to improve and refine the HMIS;
7. Not use the HMIS in a manner reasonably likely to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity;
8. Only share Client information in HMIS upon receipt of a verbal or written Release of Information from the Client;
9. Enter no less than the minimum data elements as outlined by HMIS Data and Technical Standards Final Notice for each Client entered;
10. Ensure that any person issued a user ID and password for the HMIS receive appropriate client confidentiality training and have signed a User Policy and Statement of Ethics;
11. Follow, comply with, and enforce the User Policy and Statement of Ethics and HMIS Policies and Procedures Manual;
12. If the Agency is also a HIPAA Covered Entity as defined at 45 C.F.R. § 160, the Agency requests Homeward as Business Associate to perform services with the condition that Homeward agrees to abide by the requirements set forth in the HIPAA Rules and Business Associate Provisions below. With regard to the use and/or disclosure of Protected Health Information (PHI), the Agency shall:
 - (a) Inform Homeward of any changes in the form of notice of privacy practices that the Covered Entity provides to individuals pursuant to 45 C.F.R. §164.520 and provide the Business Associate a copy of the notice currently in use, if any;

- (b) Inform Homeward of any changes in, or withdraw all of, the consent or authorization provided to the Covered Entity by individuals whose PHI may be used and/or disclosed by Business Associates under this Agreement pursuant to 45 C.F.R. §164.506 or §164.508; and
- (c) Notify Homeward, in writing and in a timely manner, of any restrictions on the use and/or disclosure of PHI agreed to by the Covered Entity as provided for in 45 C.F.R. §164.522.

F. DESIGNATIONS

Each year, the CoC Steering Committee reviews role in serving the CoC which includes serving as the collaborative applicant for HUD funding; providing HMIS access to CoC providers and overseeing data collection, reporting, and training and ensuring HUD requirements are met; coordinating the winter and summer point-in-time counts; and serving as a representative of the CoC around issues of homelessness.

G. DURATION

The duration of this charter shall last until terminated by either Party. This charter must be reviewed annually and updated as needed. This charter shall apply to any agency designated as the HMIS lead.

H. APPOINTMENT AND ACCEPTANCE

The Virginia Balance of State CoC hereby confirms the appointment of Homeward to act on its behalf as the designated HMIS Lead Agency.

Adopted by the steering committee of the Virginia Balance of State Continuum of Care;

Date: July 18, 2019

By: **Andria Ukrop**

Signature: 

Position: **CoC Program Coordinator**

Accepted by Homeward;

Date: 7/19/2019

By: **Kelly King Horne**

Signature: 

Position: **Executive Director**

**KEY PRACTICES and PRINCIPLES
BETWEEN the VIRGINIA BALNCE OF STATE CONTINUUM OF CARE
and it's COLLABORATIVE APPLICANT (DHCD)**

A. PURPOSE

The Virginia BoS Continuum of Care (CoC) seeks to prevent, reduce, and end homelessness through effective and coordinated community-wide efforts and services. The goals of the CoC are to

- Promote community-wide commitment to the goal of ending homelessness;
- Provide funding for efforts by nonprofit providers, States and local governments to rehouse homeless individuals and families rapidly while minimizing the trauma and dislocation caused to homeless individuals, families, and communities as a consequence of homelessness;
- Promote access to and effective use of mainstream programs by homeless individuals and families; and,
- Optimize stability among individuals and families experiencing homelessness.

B. RESPONSIBILITIES OF THE BALANCE OF STATE COC STEERING COMMITTEE

The CoC STEERING COMMITTEE serves as the primary governing body of the CoC. The duties and responsibilities of the Steering Committee are defined in the CoC charter, passed by the CoC membership. The CoC Steering Committee develops policies and procedures conforming to the U.S. Department of Housing and Urban Development (HUD) requirements detailed in 24 CFR part 578.1 and designate a CoC lead agency to serve as the Collaborative Applicant. The Collaborative Applicant supports year-round Continuum of Care operations and planning of homeless and homeless prevention housing and services. The CoC Steering Committee is the decision-making body on behalf of and in the best interest of the CoC. The Steering Committee may designate some of the duties and responsibilities outlined below and defined in governance charters, Steering Committee policies, or other approved and publicly available documents to relevant committees.

- a. Using expertise to providing overall direction and leadership of the process
- b. Making all formal decisions of the CoC
- c. Strategic planning and goal setting
- d. Approving the selection of the Monitoring and Selection Committee
- e. Aligning and coordinating CoC and other homeless assistance and mainstream resources

- f. Establishing priorities for and making decisions about the allocation of CoC resources
- g. Monitoring and evaluating both system wide and individual program performance on established goals
- h. Receiving reports and recommendations from sub-committees and ad-hoc task groups
- i. Guiding the annual CoC Collaborative Application
- j. Ensuring that all necessary activities (eg. point-time-count) are being implemented by LPGs
- k. Disseminating information to all members of the local planning groups
- l. Reviewing agendas and minutes from meetings

C. RESPONSIBILITIES OF COLLABORATIVE APPLICANT

The Collaborative Applicant is the eligible applicant designated by the CoC to collect and submit the CoC Registration, CoC Consolidated Application (which includes the CoC Application and CoC Priority Listing), and apply for CoC planning funds on behalf of the CoC during the Coe Program Competition. The CoC may assign additional responsibilities to the Collaborative Applicant so long as these responsibilities are documented in the CoC's governance charter.

1. Coordinate and facilitate collaboration among agencies to ensure successful planning and a collaborative homeless services system serving those experiencing or at risk of homelessness in LPGs.
2. Provide subject matter expertise and guidance, technical competency, and administrative support in CoC meetings of the Steering Committee, Committees, workgroups, and task forces.
3. Complete activities defined in the CoC Planning Grant, as approved by HUD.
4. Conduct an annual gaps analysis of the homeless needs and services available within the geographic area.
5. Plan for and conduct a point-in-time count of homeless persons within the CoC's geographic area that meets or exceeds HUD's requirements.
6. Facilitate data-driven decision-making through the production of reports required by state and federal partners including but not limited to:
 - a. Point In Time Count (PIT)
 - b. Housing Inventory Chart (HIC)
 - c. Longitudinal Systems Assessment (LSA)
7. Design, operate, and follow a collaborative process for the submission of an application in response to HUD's annual CoC Program Competition for funding.
8. Consult with State and local government ESG program recipients on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients.
9. Develop draft priorities for CoC funded projects, including but not limited to development and use of objective scoring criteria, and seeking CoC Steering Committee approval and public input

of those priorities.

10. Consult with relevant Committees, HUD- and VHSP --funded recipients and sub recipients, and members of the CoC to recommend performance targets.
11. Monitor and recognize performance and evaluate outcomes of HUD- and VHSP-funded projects.
12. Provide technical assistance to projects funded through a coordinated funding source (such as HUD or VHSP.)
13. Provide information required to complete the Consolidated Plan(s) within the CoC's geographic area.
14. Manage communications on behalf of the CoC and the CoC Steering Committee.
15. Maintain a website for the CoC and other community stakeholders.
16. Develop and maintain meaningful community and cross-sector partnerships that support the work of the CoC, the Collaborative Applicant will, among other things:
 - a. Support Steering Committee-approved resolutions to join state or national initiatives to end homelessness.
 - b. Work collaboratively with other community stakeholders and stakeholders from other service systems towards addressing gaps and ending homelessness throughout the Region.
17. If designated as the HMIS Lead and/or Coordinated Entry System Coordinator, ensure that these functions are integrated into the data-driven collaborative planning and service coordination of the CoC.

D. DESIGNATIONS

Each year, the CoC Steering Committee reviews role in serving the CoC which includes serving as the collaborative applicant for HUD funding; providing HMIS access to CoC providers and overseeing data collection, reporting, and training and ensuring HUD requirements are met; coordinating the winter point-in-time counts; and serving as a representative of the CoC around issues of homelessness.

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Adopted by the steering committee of the Virginia Balance of State Continuum of Care;

Date: *July 18, 2019*

By: Andriea Ukrop

Signature: 

Position: CoC Program Coordinator

Accepted by the Virginia Department of Housing and Community Development

Date: 7-19-19

By: Pam Kestner

Signature:



Position: DHCD, Deputy Director of Housing