

## Before Starting the CoC Application

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

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

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

1. The FY 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It  
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2024 CoC Program Competition on behalf of your CoC.  
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

### Answering Multi-Part Narrative Questions

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

### Attachments

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

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

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

## 1A. Continuum of Care (CoC) Identification

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

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

**1A-1. CoC Name and Number:** 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:** Homeward

## 1B. Coordination and Engagement–Inclusive Structure and Participation

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

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<b>1B-1.</b>	<b>Inclusive Structure and Participation–Participation in Coordinated Entry.</b>	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2023 to April 30, 2024:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

17.	Organizations led by and serving LGBTQ+ persons	Yes	No	No
18.	Organizations led by and serving people with disabilities	No	No	No
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	No	No	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	Yes
30.	State Sexual Assault Coalition	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

**By selecting "other" you must identify what "other" is.**

<b>1B-1a.</b>	<b>Experience Promoting Racial Equity.</b>	
	NOFO Section III.B.3.c.	

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

**(limit 2,500 characters)**

The Virginia Balance of State (VA BOS) CoC currently convenes a Racial Equity Subcommittee (subcmte) to discuss action steps for the short term goals listed below. Fiscal Year (FY) 2024 short term goals of the Racial Equity subcmte include: creating common language for the CoC, completing a strengths and weakness analysis around racial equity, creating a roadmap for Local Planning Group (LPG) leadership to address equity, education for the LPG communities (including outreach to other system partners), and defining the layers of analyzing data. Currently, the Racial Equity subcmte is working to create a survey to identify knowledge and understanding of racial disparities, and racial equity within the VA BOS CoC. Additionally, CoC Lead Agency staff with the help of the Racial Equity subcmte members are currently working to identify someone to provide a training dedicated to addressing inequities within the VA BOS CoC system. The CoC Program Administrator (Admin) completes a bi-annual analysis of racial disparities in the VA BOS CoC system, and this is completed on a system level and the LPG level. The VA BOS CoC is also a recipient of the YHDP grant, the target community of the YHDP grant is the Crater Area Coalition on Homelessness (CACH). The YHDP grant in the CACH region is utilized as an early intervention method and was targeted to the CACH region due to the over representation of youth experiencing homelessness, which includes but is not limited to LGBTQ+, parenting, and black and brown youth. FY 24 HMIS data showed that individuals who identify as Black, African American, or African are presenting for homeless services in the BoS CoC at two times the rate of how the population is represented in the LPG communities (41.9% represented in HMIS data, versus 17.6% represented in the community). FY 24 HMIS data also showed that approximately 4.0% of individuals experiencing homelessness in the BoS CoC identified as two or more races while representing 3.0% of the individuals living in the LPG communities. Additionally, FY 24 HMIS data showed that those who identified as American Indian, Alaskan Native, or Indigenous (0.44% represented in HMIS data, versus 0.39% represented in the community) and Native Hawaiian or Pacific Islander (0.12% represented in HMIS data, versus 0.09% represented in the community) are disproportionately represented in who is presenting for homeless services when compared to the population that is represented in the LPG communities.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
	1. communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;	
	2. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
	3. invited organizations serving culturally specific communities experiencing homelessness in your CoC's geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

1.The VA BOS CoC is comprised of 12 regionalized LPG and five committees (cmtes) that are public. Solicitation for new CoC members is conducted at the LPG level via postings on provider websites and in-person recruitment events. LPGs have membership cmtes that conduct outreach to local and regional govt. entities, faith communities, private businesses, etc. The CoC lead agency, the Virginia Dept. of Housing and Community Development (DHCD) leverages relationships with other state agencies to extend invites to join the CoC. The CoC facilitates bimonthly public virtual forums to create transparent communication with partners and members of the public who are interested in learning more about the VA BOS.

2.Information is communicated via the DHCD website, emails, PDFs, and other accessible platforms including but not limited to in-person meetings and virtual meetings. The CoC has recorded virtual meetings, which are available for providers. Recordings of meetings can include close caption options for individuals who need this resource. LPGs have boards and cmtes designed to address the needs of individuals experiencing homelessness. LPG boards and cmtes leverage accessibility tools, such as language lines and ADA accessible material to ensure information provided is accessible. Local providers coordinate with organizations and advocates who support individuals with disabilities to ensure information is accessible to this population.

3.LPGs hold partnerships with culturally specific organizations. The CoC has a subcmte that is dedicated to addressing Racial Equity and is responsible for developing strategies to outreach Community Based Organizations (CBO). Based on the TA provided by Collective InCite LLC (CI) that focused on Racial Equity and social justice to the entire CoC in FY 21, LPGs are currently implementing strategies to address equity that includes but is not limited to regular racial disparities evaluations and involving individuals with lived experience in decision making and recommendations. The Racial Equity subcmte is responsible for overseeing the CoC-wide action steps of addressing Equity. Action steps include but are not limited to, completing a strengths and weaknesses analysis around racial equity efforts, and creating a roadmap for equity. The Racial Equity subcmte is currently working on a survey to identify gaps in knowledge of racial disparities amongst the LPG providers.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1.CoC membership includes stakeholders with knowledge and interest in preventing and ending homelessness. Stakeholders include persons with lived experience, local govt. officials, planning district commissions, private funders, advocates including the Virginia Sexual and Domestic Violence Action Alliance (VSDVAA), school divisions, police departments, faith based communities, PHAs, VA hospitals, CSBs (mental health agencies), homeless service providers, CAP agencies, dept. of veteran services, and dept. of behavior health and developmental services (DBHDS). The CoC facilitates public bi-monthly forums to elicit feedback and answer questions. Each LPG holds bi-monthly in person or virtual meetings with community stakeholders to communicate initiatives and solicit feedback.

2.The CoC provides and solicits information in multiple ways. Information flows through LPG representation on the CoC steering cmtte (the main CoC governing board), which meets bi-monthly. During the months the steering cmtte does not meet, partners can engage in discussions regarding homelessness via the CoC's bi-monthly virtual forums and representation on CoC cmttes. The CoC PM participates in virtual sessions held with partners from across the state to gather input from all LPGs. CoC staff visit the LPGs annually to provide TA and solicit feedback regarding community needs. Additionally, DHCD conducts a CoC and LPG yearly meeting during the governors housing conference to solicit feedback regarding programs funded through the CoC as well as ESG.

3.Information is communicated via the DHCD website, emails, PDFs, and other accessible platforms including but not limited to in-person meetings and virtual meetings. Recordings of meetings can include close caption options for individuals who need this resource. LPG boards and cmttes leverage accessibility tools, such as language lines and ADA accessible material to ensure that information provided by the CoC is accessible. Local providers coordinate with organizations and advocates who support individuals with disabilities to ensure information is accessible to this population.

4. In an effort to access information about new approaches, the LPGs have put on individual partner meetings and local summits to highlight new approaches. In FY 23 one of the LPG communities held a two-day summit that brought together community partners to discuss improvements and new approaches to preventing and ending homelessness in the community.

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

(limit 2,500 characters)

1. Per the CoC policies and procedures, the Collaborative Applicant (CA) requested proposals for projects after registration and prior to the release of the NOFO via the CoC pre-application. On 06/10/2024 preapplication documents were emailed to LPG lead agencies and the CoC steering cmtte to disseminate to community stakeholders, including to organizations who have not previously received CoC funding. The pre-application was then published on the CoC website. On 06/14/2024 the CA facilitated an information session dedicated to outlining the pre-application process. LPG partners were then provided with a recording of the information session to refer to. CoC staff also held individual meetings with interested organizations to discuss project design and eligible activities.
2. The CA provides instructions on project application submission during the communication of the local competition. Instructions are included on the CoC application timeline provided to CoC Steering Cmte members to share with community partners and is published on the CoC website. Information regarding project submission was included in the information session held on 06/14/2024. Pre-applications for new projects that have not previously received CoC program funding were due to the CA by 07/08/2024.
3. During the release of the pre-application, the CA communicates project applicant eligibility with the CoC Steering Cmte and community partners. Agencies that are active participants in the LPG are eligible to apply for new funding. Projects are selected according to the CoC's ranking process outlined in the policies and procedures, which are on the CoC website. Applicants requesting funding for new projects must complete a preapplication submitted to DHCD that is posted on the website. Once projects are selected for submission to HUD, project applicants are notified and the project listing is posted on the CoC website.
4. Information is communicated via the DHCD website, emails, PDFs, and other accessible platforms including but not limited to in-person meetings and virtual meetings. Recordings of meetings can include close caption options for individuals who need this resource. LPG boards and cmtes leverage accessibility tools, such as language lines and ADA accessible material, to ensure that information provided by the CoC is accessible. Local providers coordinate with organizations and advocates who support individuals with disabilities to ensure that information is accessible.



# 1C. Coordination and Engagement

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

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	No
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	No
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	No
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Nonexistent
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

<b>1C-2.</b>	<b>CoC Consultation with ESG Program Recipients.</b>	
	NOFO Section V.B.1.b.	

In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

<b>1C-3.</b>	<b>Ensuring Families are not Separated.</b>	
	NOFO Section V.B.1.c.	

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

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

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

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

**(limit 2,500 characters)**

The CoC collaborates with education providers on both the state and local levels. DHCD collaborates with SEAs to improve the coordination between housing and education systems. The McKinney Vento SEA in Virginia, Project HOPE, deploys liaisons within LPG school systems to assist districts in connecting students experiencing homelessness with housing resources. Representatives from Project HOPE have played a crucial role in the implementation of the YHDP in the VA BOS. Most recently, representatives from Project HOPE participated in an in-person session of the VA BOS YHDP implementation to discuss the operations of the projects implemented by homeless services providers. Patricia Popp is the State Coordinator for Project Hope and serves on the YHDP Implementation Committee Lead Team. Additionally, through the LPG representatives on the steering committee, the CoC elicits and adopts feedback received from education partners. LPGs also coordinate with school districts to ensure that students experiencing homelessness are able to access education services. Coordination happens in real time with the McKinney Vento Coordinator to assist clients. Additionally, the VA BoS Program Admin and the Youth Homelessness Program Coordinator at DHCD put together the local McKinney Vento Coordinator contacts for the LPG communities together, to ensure that the LPG communities know who to contact. All partnerships with other education partners are maintained on the local level through LPG providers through memoranda of understanding (MOU). Additionally, through the local BOS YHDP project, there are community outreach workers that are dedicated to connecting directly with various school districts, in order to build quicker connections to students and youth that are experiencing homeless or at risk of experiencing homelessness. In the VA BOS CoC there are providers that have head start at their organizations, these organizations coordinate and make referrals to this program for households who need this service. In the YHDP target community there is a youth HUB where youth can go to make connections with providers, use the computer lab, and receive clothing.

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

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

**(limit 2,500 characters)**

The CoC adopted the following procedures 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 that include enrolling in school without required documentation, remaining in their school of origin with transportation provided, and free lunch. In addition to the CoC written procedures for services, LPGs are required to adopt procedures to inform individuals and families who become homeless of their eligibility for educational services. Additionally, DHCDs website lists available resources to assist with housing needs and inform households on local community resources.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

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

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

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

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

	Organizations	
1.	State Domestic Violence Coalitions	Yes
2.	State Sexual Assault Coalitions	Yes
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.	Local Domestic Violence and Sexual Assault Organizations	Yes

1C-5a.	<b>Collaborating with Federally Funded Programs and Victim Service Providers to Address Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.</b>	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:	
1.	update CoC-wide policies; and	
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.	

**(limit 2,500 characters)**

1. In order to update CoC-wide policies to address the needs of survivors, there is a seat for the state-wide sexual and domestic violence coalition, VSDVAA, on the main governing board of the CoC. VSDVAA is also represented on the Racial Equity Ad Hoc Cmte, CE subcmte, and additional victim service providers (VSP) are represented on the main governing board of the CoC and the CE subcmte. Members of the VSDVAA also participated in updating the main governing documents of the CoC to ensure that they were trauma informed and person centered. Additionally, the CoC elicits and adopts feedback around CoC-wide policies from other VSPs via the LPG's representative on the steering cmte and other subcmtes of the CoC. The VA BOS is currently in the process of finalizing the prioritization tool to replace the VI-SPDAT and the CE policies and procedures, VSDVAA staff and staff from a local VSP are participating in this process to ensure housing and services are trauma-informed and can meet the needs of survivors.

2. To ensure all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors the CoC staff and VSDVAA staff meet to discuss the collaboration between housing and VSPs in the VA BOS. If either the housing providers or the VSPs identify any immediate concerns regarding provision of services, the CoC PM and VSDVAA Housing & Advocacy Coordinator work to quickly address the concern. An example of this relationship was demonstrated when a local VSP was no longer able to provide services due to their limited capacity and closed their doors. The CoC program staff and VSDVAA staff collaborated with the local homeless services providers to support individuals who were experiencing violence in the community. To fill this gap left in the community one of the homeless service providers in the community became a dual agency serving households experiencing homelessness, and survivors. On 9/30/2024 with the support of the community, local, and state agencies the community agency opened the shelter for survivors and received the training for staff centered on safety planning, and trauma informed care. On 10/7/2024 staff from the VSDVAA provided a safety planning training for LPG staff and CE staff, there are also plans to have a certified trauma care trainer provide training at the next steering cmte meeting.

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

1.	safety planning protocols; and
2.	confidentiality protocols.

**(limit 2,500 characters)**

1. Safety planning is a part of a household's interaction with CE from the initial engagement with staff, throughout their participation in services. Safety planning can include but is not limited to accessing emergency shelter, and separate intake processes to identify safety needs. As per the CoC CE policies and procedures "If safety is a concern due to fleeing, or attempting to flee domestic violence, or a victim of trafficking the CE staff will assist the person in developing a temporary safety plan and provide immediate referral to the local domestic violence agency." As per the CoC CE policies and procedures, "A LPG domestic violence service provider must provide safety planning training to all CE staff. This training must be documented and maintained by the board of each LPG." Additional follow up to address the needs of the household are addressed with homeless service providers and the local VSP. The CoC is currently working on updating the CE policies and procedures to include an outline regarding warm hand offs to VSPs and follow up with the DV community service provider once the individual is connected to services. The CoC has partnered with the VSDVAA to provide safety planning training to all LPGs that comprise the CoC and their CE Staff on 10/7/2024.

2. The CoC implements client confidentiality policies that ensure VAWA is adhered to. Clients who receive services from DV providers in the CoC are entered into an HMIS comparable database, maintained by VSDVAA. Identifying client information is removed for case conferencing. DHCD collaborates with VSDVAA to evaluate CoC policies and procedures to ensure confidentiality is maintained for all clients. VSDVAA representatives are members of the CoC steering cmte, the CE cmte, and have also been represented on the Racial Equity ad hoc to ensure that client confidentiality is maintained in the delivery of services throughout the CoC. VSDVAA staff are members of the HMIS Policies Cmte, facilitated by the HMIS lead to ensure that confidentiality of survivors is maintained, and to improve methods for maintaining confidentiality. Additionally, the HMIS lead included the following in the Homeward Community Information System(HCIS) HMIS policies and procedures, "HCIS is required for agencies receiving federal and state funds targeted to serving people experiencing homelessness. Agencies and programs primarily serving survivors of sexual and domestic violence are prohibited from using HCIS".

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

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

	Project Staff	Coordinated Entry Staff
1. Training Occurs at least annually?	Yes	Yes
2. Incorporates Trauma Informed best practices?	Yes	Yes

3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

**&nbsp;nbsp;**

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

**(limit 2,500 characters)**

1. As per the CoC 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." The CoC is currently updating and standardizing the CE policies and procedures to include an outline regarding warm hand-offs to VSPs, and follow up with the DV community service provider once the survivor is connected to services.
2. Survivors initiate the request regarding an emergency transfer. The process for informing a household regarding an emergency transfer will be conducted in a verbal, one on one conversation. Additionally, a conversation will be had with the household and the agency that the household will be transferred to if safety is compromised.
3. If survivors contact LPG staff with a request for an emergency transfer, LPG staff will assess if the safety of the individual or family has been compromised. The initial step is to confirm if the individual or family is in a safe location. LPG staff will address survivors needs and ensure safety. The LPG staff will assess availability of open units to ensure another safe location is identified that meets the unique needs of the household.
4. The process to request an emergency transfer begins upon the initial contact with the client. When a survivor seeks housing assistance in the CoC, an assessment for diversion is conducted to include a question regarding the household's safety. If immediate safety is an issue, CE staff assist the household in developing a safety plan, which can include emergency shelter until the survivor connects with local DV staff. If an emergency transfer is not required, CE staff will continue to assess the household for the appropriate housing intervention. CE continues to assess for safety throughout their engagements until a referral is completed to the appropriate intervention. VSPs in the LPG communities that are funded through the DOJ are required to have at least one bed open at all times for survivors who are fleeing DV based off best practices and funding guidelines.

1C-5e.	Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

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

**(limit 2,500 characters)**

The VA BOS operates all housing interventions through a housing first lens, which ensures that all households including survivors of domestic violence, dating violence, sexual assault, or stalking have access to all housing and services that are available within the CoC's geographic area. The CoC's CE policies and procedures states that "if safety is a concern due to fleeing, or attempting to flee domestic violence, or a victim of trafficking the CE staff will assist the person in developing a temporary safety plan and provide immediate referral to the local domestic violence agency. The household will then be prioritized and served via shelter and permanent housing services to meet their safety needs." The HUD category 4 definition of homelessness is included in housing interventions outlined in the CoC's policies and procedures. Information regarding a survivor household is not included in HMIS, LPG providers coordinate directly with VSPs to ensure survivors are included on by-name lists and community case conferencing meetings utilizing a unique identifier to ensure that household needs are met while maintaining the confidentiality of the household. Advocates for survivors participate on the primary decision making body of the CoC to ensure any concerns regarding access for survivors is addressed and the CoC policies and procedures are updated accordingly. Additionally, if access to housing and services is identified as a barrier for survivors in any of the LPGs, via quarterly calls, or monthly check ins, the CoC lead agency staff will work with VSDVAA staff to address the concern immediately with the community providers and a tangible solution is identified by all parties. Case conferencing is also utilized by LPGS to address the needs of survivors on a weekly, bi-weekly, or monthly basis.

1C-5f.	Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures survivors receive safe housing and services by:

- |    |   |
|----|---|
| 1. | identifying barriers specific to survivors; and |
| 2. | working to remove those barriers.               |

**(limit 2,500 characters)**



1. The CoC solicits feedback from VSPs to identify systemic barriers in the CoC that may prevent survivors from accessing available services. VSPs provide feedback to the CoC regarding systemic barriers to access services through multiple structures. VSPs participate on the main governing board of the CoC and offer feedback during bi-monthly meetings and virtual forums. Additionally, VSPs participate in LPG boards and local cmtes to discuss individual community barriers that impact survivors. Survivors with lived experience participate in local efforts to identify systemic barriers in the CoC that may prevent survivors from accessing available services. There is a mutual barrier that exists between the VSPs and housing providers and it is a lack of education.

2. On August 22nd, 2024 in an effort to foster partnership one of the ESG Program Admins and the VA BoS Program Admin joined the VSDVAAs monthly state and local partners meeting to discuss housing resources available to survivors, and discuss barriers for survivors when accessing housing resources. Membership of the VSDVAAs monthly state and local partners meeting includes local domestic violence and sexual assault organizations, VA Dept. of Social Services, VA Dept. of Criminal Justice Services, VA Dept. of Health, and the VA Office of the Attorney General. Currently, staff from the VSDVAA sit on the CE subcmte of the VA BOS CoC to work to adress barriers for survivors when accessing the CE System in the VA BOS CoC. VSDVAA staff has been supporting the process of updating the standardized prioritization tool that the VA BoS CoC will utilize to replace the VI-SPDAT. Additionally, a member of the HSNH Unit and one of the LPG lead agencies sit on the Advisory Committee on Sexual and Domestic Violence to the Commonwealth to identify and work to remove barriers specific to survivors.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+--Anti-Discrimination Policy and Equal Access Trainings.	
	NOFO Section V.B.1.f.	

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy--Updating Policies--Assisting Providers--Evaluating Compliance--Addressing Noncompliance.	
	NOFO Section V.B.1.f.	

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

4. your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. CoC policies and procedures state the CoC will evaluate and update system level policies and procedures annually. Annual assessments include evaluations of the CoC wide anti-discrimination policy. CoC partners can include organizations that are dedicated to supporting those who identify as apart of the LGBTQ+ community participate in the process to evaluate the CoC level antidiscrimination policies as well as on the LPG level. The CoC engages organizations dedicated to serving members of the LGBTQ+ community during CoC decision making processes and when updating CoC policies and procedures to ensure services are trauma informed and meet the needs of members of the LGBTQ+ community. LPG providers coordinate with these organizations directly to ensure local efforts are trauma-informed and meet the needs of LGBTQ+ households, including youth experiencing homelessness who identify as LGBTQ+.
2. The CoC has conducted meetings with LPGs where CoC staff discussed LPG policies and procedures which included ensuring that LGBTQ+ households receive all services free from discrimination. Based on technical assistance that was provided by CI the CoC implements processes with the LPGs to evaluate community need and discuss the process for developing antidiscrimination policies. CoC staff conduct housing first trainings to ensure organizations are provided with information regarding antidiscrimination policies.
3. CoC staff participate in quarterly calls with state funding admins, during these calls CoC staff evaluate providers compliance with CoC policies and procedures including anti-discrimination policies. LPG leaders conduct monthly and bi-monthly governing board meetings with state funded and non-funded partners to identify challenges, barriers, and best practices in administering homeless services and includes community processes to maintain compliance with anti-discrimination policies.
4. If a CoC provider receiving state funds is not compliant with the antidiscrimination policy, CoC staff work with state funding admins to identify a corrective action plan. TA is provided to the CoC partner and follow up is required to ensure the partner is adhering to the corrective action plan. If a nonfunded CoC provider is not compliant with the CoC anti-discrimination policy, a corrective action plan is identified by LPG leaders and CoC staff. Noncompliance is taken into consideration as community partners apply for funding opportunities or request support letters.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area—New Admissions—General/Limited Preference—Moving On Strategy.	
	NOFO Section V.B.1.g.	

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Virginia Housing	2%	Yes-Both	Yes
Danville Redevelopment and Housing Authority	2%	Yes-Both	No

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

(limit 2,500 characters)

- The CoC has 22 PHAs. Each of the 12 LPGs work to differing degrees with their PHAs depending on capacity and cooperation. The largest provider of the HCV is Virginia Housing (VH), the administrator of HCVs for 13 PHA agencies. DHCD works actively with VH to improve the relationships between the PHAs and the LPGs to ensure coordination to best serve individuals experiencing homelessness. Currently, 100% of the agencies working with VH adopted a homeless preference. DHCD and LPGs worked directly with PHAs to increase their delivery of housing vouchers to individuals experiencing homelessness. Through the administration of EHVs, 41% (9) of the local PHAs adopted a formal policy to accept referrals from the CoC's CE system. LPGs are collaborating with PHAs to accept referrals from CE for the HCV programs as well. At the local level, over 50% of the direct administrators or voucher agencies participate as LPG members. DHCD will continue to explore collaboration opportunities, including preparing and submitting a joint application for funding for individuals and families experiencing homelessness, with the LPGs, VH, and the local PHAs.
- N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes

	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. NOFO Section V.B.1.g.	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	Yes
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
		No

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness. NOFO Section V.B.1.g.	
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1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		<b>Program Funding Source</b>
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). NOFO Section V.B.1.g.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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## 1D. Coordination and Engagement Cont'd

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

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

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems 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.

1.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	10
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition that have adopted the Housing First approach.	10
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

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

Describe in the field below:

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

**(limit 2,500 characters)**

1. The CoC is committed to the housing first approach. Applicants are required to describe how their projects implement housing first and allow entry for program participants regardless of income or lack thereof, substance use, history of victimization, criminal history, sexual orientation, family composition, mental health diagnoses etc. 12.5% and 12.2% of an applicants score is dependent on their ability to outline their capacity to adhere to the housing first approach.
2. Applicants are required to discuss the performance of both their HUD funded projects and their state funded projects. Ranking committee members evaluated applicants on capacity to adhere to the housing first approach in the following question: “Describe in detail how the organization implements a Housing First approach. Include specific examples of how the organization implements a Housing First approach such as organizational or programmatic policies, procedures, guidelines, etc. (e.g. a narrative description)”. Ranking committee members also evaluated applicants on how well their project addressed the following performance areas: Improving length of time homeless - 30 days; Improving exits to permanent housing - RRH/PSH projects meet the 80% threshold of households exiting to or retaining permanent housing to; Reducing returns to homelessness - 85% of households should not return to homelessness within the first year of being housed, and increasing or increased income.
3. The CoC checks in monthly with the LPG lead agencies to discuss housing first with each of the community providers. The CoC PM also monitors projects in collaboration with the ESG Admin to ensure that grantees are implementing a housing first approach. If concerns around housing first practices are raised in either a monitoring or a monthly check in with the LPG lead agency, the CoC PM collaborates with the lead agency to ensure organizations practices are aligned with housing first.
4. To improve the fidelity of housing first in the VA BOS CoC the CoC lead agency staff provide housing first trainings with non-funded partners who are not housing first. Housing first is a priority of ESG and the CoC. The CoC staff collaborates with the ESG admins to ensure that partners in the CoC are housing first. If there are concerns with a provider not implementing housing first, the ESG admins and CoC staff will address these concerns with the provider. Steps taken can include technical assistance, and findings.

1D-3.	Street Outreach—Data—Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	
	Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.	

**(limit 2,500 characters)**

The need for street outreach (SO) for individuals experiencing unsheltered homelessness varies in the LPGs. LPGs with significant need (identified via PIT count or through CE) implement formal SO. This includes canvassing street locations where households experiencing unsheltered homelessness are located, engaging households living in encampments, and engaging households in all other unsheltered settings identified by community partners. In LPG communities where formal SO is not readily available, LPG partners collaborate with emergency services and partners (i.e. public library staff, faith based organizations, law enforcement, and more) to assist in SO efforts. SO staff is responsible for coordinating SO to establish a relationship, conduct assessment, make referrals, offer services, and follow up until permanent housing is obtained or until clients enroll in a homeless service program. Currently, six of the CoC LPGs are receiving SO funding with two LPGs receiving additional funding for SO through federal PATH. To provide coverage for 100% of the CoC's geographic area, communities that do not receive SO funding leverage relationships with emergency services and community resources. The CoC plans to leverage SO best practices identified by CoC outreach providers to develop a guide for SO to replicate methods for other LPGs. The guide will incorporate CoC policies and procedures around SO along with specific SO methodologies that partners can implement in their communities. LPG partners will conduct SO at least weekly, if not daily depending on community need and staff availability. LPGs also determine timeframes to conduct outreach in collaboration with partners from emergency services with the assistance from emergency services. All LPGs conduct SO during the annual PIT count which can result in increased SO efforts in each community depending on the local need. SO in the CoC is designed to engage and build trusting relationships with those who are least likely to access services. Services are individualized to meet the needs of the household experiencing homelessness. SO engagements are focused on meeting the goal identified by the household, including connection to permanent housing resources. For example, if a household declines connection to services, CoC SO teams will continue to engage the household to ensure that they remain safe while experiencing unsheltered homelessness. Both RRH and PSH services continue to be offered to the household.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

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

	Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1.	Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	No	No
2.	Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	No	No

3.	<b>Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?</b>	No	No
4.	<b>Other:(limit 500 characters)</b>		
	DHCD partners with Virginia Housing Alliance (VHA), the statewide non-profit responsible for advocacy around the expansion of housing opportunities and ending homelessness in VA. VHA engages and educates legislators and policymakers around the experiences of homelessness and assesses laws and practices focused on the criminalization of homelessness. The CoC spoke with VHA regarding developing a map that identifies communities with laws and practices focused on criminalization of homelessness.	Yes	No

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

		HIC Longitudinal HMIS Data	2023	2024
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	433	235

1D-6.	<b>Mainstream Benefits–CoC Annual Training of Project Staff.</b>	
	NOFO Section V.B.1.m.	

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

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

1D-6a.	<b>Information and Training on Mainstream Benefits and Other Assistance.</b>	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

- works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and
- promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.



**(limit 2,500 characters)**

1.LPGs include hospitals, private clinics and managed care organizations (MCOs), as a part of their membership and collaborate to assist program participants in receiving healthcare services. Health care organizations report updates on eligibility, referral processes, timelines, new services or contacts, and other information regarding healthcare services. If there are any changes with services, a training is available to LPG partners around updates. LPG case managers are responsible for connecting with healthcare organizations to ensure that clients have access to healthcare and mental health treatment. If there are challenges in accessing services, LPG partners address any barriers with community partners. Anthem health is currently partnering with LPG communities and sits on the governing body of the CoC. Currently, the BoS CoC participates in the Virginia Homeless Data Integration Project (HDIP) which will allow higher coordination with DMAS and MCOs with CoCs across Virginia. Additionally, LPGs across the CoC work with MCOs to support clients with accessing resources that are available.

2.LPG staff work with mainstream resource providers and clients to ensure they are accessing all available benefits that will contribute to their housing stability. For example, as part of the Medicaid expansion, Cover Virginia (coverva.org) provides information on benefits and other helpful information (in multiple languages). This resource guides clients and service providers around the effective use of Medicaid and other benefits. Additionally, LPGs have SOAR trained staff who work to ensure those eligible for disability benefits are able to have applications approved.

ID-7.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:	
1.	respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

**(limit 2,500 characters)**

1. The CoC follows guidance from the Virginia Department of Health (VDH). When VDH puts out guidance regarding an infectious disease outbreak the CoC ensures this information is shared with LPG partners and implements the guidance into the CoCs response to infectious disease outbreaks. If the CoC receives communication that requires immediate dissemination to partners, the CoC lead agency will communicate the information via email or phone call to community partners. CoC staff are able to assist in community conversations to plan for the response to an infectious disease outbreak. As an on-going partnership, on a monthly basis staff from the lead agency collaborate with partners at VDH to discuss preventing the spread of infectious diseases including COVID-19 and monkeypox. These meetings include the provision of guidance to CoC partners as well as sending information about local and statewide resources to educate LPG partners.

2. To prepare and prevent future exposure to infectious disease outbreaks among households experiencing homelessness, the DHCD staff works with the state public health agency, VDH to share information with the LPG communities. The LPG community partners are connected with their local and state public health offices to develop policies and procedures to respond to infectious disease outbreaks and prevent infectious disease outbreaks among households experiencing homelessness. VDH is represented in the LPG membership. An example of this occurring was during the FY24 PIT Count. LPG communities were seeing an increase in COVID-19 cases around the PIT count time, CoC lead agency staff reached out to VDH staff to receive guidance around best practices in mitigating the spread of COVID-19 when interacting with households experiencing homelessness.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases. NOFO Section V.B.1.n.	
Describe in the field below how your CoC:		
1.	effectively shared information related to public health measures and homelessness; and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. DHCD collaborated with VDH to create guidance for individuals and families experiencing unsheltered homelessness. As communities continue to recover from the pandemic, the CoC facilitates monthly meetings with LPG partners to ensure that information is shared related to public health measures to support households experiencing homelessness. If the CoC receives communication that requires immediate dissemination to partners, the CoC lead agency will communicate the information via email or phone call to community partners.

2. The CoC lead agency meets regularly with partners at VDH to discuss the needs of homeless service providers and households experiencing homelessness. The CoC receives updates from providers to highlight the needs of organizations providing SO or emergency shelter. During the meeting, discussions focus on COVID-19 testing necessities and additional equipment necessary to prevent the outbreak of infectious diseases among program participants. The CoC lead agency then communicates any adjustments to program operations that were identified by VDH to support the providers operations to prevent or limit infectious disease outbreaks among program participants. During the annual PIT count the CoC lead Agency receives guidance on how to minimize the spread of COVID-19 when conducting outreach.

1D-8.	Coordinated Entry Standard Processes.	
	NOFO Section V.B.1.o.	

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

(limit 2,500 characters)

1. Per the CoC CE policies and procedures, each LPG has either a centralized coordinated access point or multiple coordinated access points to ensure persons from across the geographic area are able to enter the homeless system. Each LPG has a published housing crisis line where persons can access services. Community partners are provided this information monthly at LPG meetings. SO supports contacting clients in the community and partners are made aware of the main contact to support engagement with households who are unsheltered.

2. When a household contacts the CE access point, access points triage the household based off the current need (prevention or homeless services). Based on need, the household's immediate crisis is addressed (mediation, housing search, resource referral, emergency shelter referral, etc.). All households who are not unsheltered or in shelter are screened for diversion. This occurs by having a strengths-based conversation with the household to help identify alternatives to shelter. Averted households receive assessments to prioritize further services to obtain and/or stabilize housing. This assessment is conducted utilizing either of the two standardized CoC prioritization tools. Referrals to prevention, rapid re-housing, and permanent supportive housing (where available) are made based on prioritization. Many access points complete this process within 48 hours of initial contact with the access point.

3. The CoC is currently in the process of finalizing the standardized prioritization tool that is used amongst the LPG providers. The new tool was created to use trauma informed language and collect only the necessary information needed to prioritize and make proper referrals.

4. Feedback regarding CE is collected through each LPG. The LPG coordinates feedback from community partners and from households with lived expertise. LPG evaluation methods include but are not limited to the following: feedback collected during case conferencing, through annual anonymous surveys via email or physical mail, or via committee of individuals with lived expertise who are compensated for their participation and feedback. Feedback is evaluated by local organizations and the CE cmte. The CE Cmte is exploring other methods to collect feedback from community partners and households with lived expertise that will prioritize the compensation of project participants who are willing to provide their feedback to improve current CoC policies.

1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC's coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and	
4.	takes steps to reduce burdens on people seeking assistance.	

**(limit 2,500 characters)**

1.LPGs have relationships with partners including local businesses, school systems, etc. to reach households who are least likely to engage with homeless services in the absence of outreach. Providers facilitate trainings so the community is aware of housing resources. Marketing material includes pamphlets, resource guides, etc. with access point information and is available at LPG partner offices to ensure households have access to information without needing to interact with staff. Events are held to provide information about CE resources, most recently LPG staff attended a LGBTQ+ festival to market CE information and housing services.

2.The CoC uses two standardized assessments for prioritization: the prevention prioritization tool that includes homeless vulnerability and housing barrier assessments and the VI-SPDAT for persons experiencing literal homelessness. The CoC CE cmte is currently in the process of updating the prioritization tools to ensure they are trauma informed and address racial equity. Members identified prioritization factors based on vulnerabilities identified in the LPGs, which include the following: parenting, fleeing violence, utilization of emergency services, literal homelessness, chronic homelessness, lack of income, lack of social supports, chronic health conditions, and criminal history

3.For Households at imminent risk of homelessness (14 days or less), households receive the prevention prioritization assessment. For households who enter shelter or when rapport is built with unsheltered households; CE staff administer the VI-SPDAT no more than 3 to 5 days after households are referred. The provision of services is guided by the client and services that are needed are identified during interactions with clients.

4.The VA BOS individualizes the implementation of CE to ensure services meet households needs. The CoC does not implement unnecessary barriers for households. Access points must provide support to households who speak multiple languages through language line services or staff support. CoC staff work with access points to ensure households with limited mobility are engaged where they are located or in offices that are ADA accessible to ensure that CE services are available. The CoC ensures services are administered through an equitable and culturally competent lens to ensure households who identify as Black, Indigenous and/or People of Color have fair and equal access to services.

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

**(limit 2,500 characters)**

1. Per the CoC CE Policies and Procedures “Each LPG reviews/updates CE advertising and marketing materials at least annually to ensure that all individuals and families in need know how to access the CE system. CE system partners must post these materials in locations at their agency that are accessible to the public. The CoC also makes these materials available to other community-based organizations and at events. In addition, each LPG provides access updates to 211 annually.” Currently, one of the LPG communities in the VA BOS are currently working on pamphlets, materials, and a translation service to address the growing need for the Hispanic community to access services in the LPG. Additional efforts of the LPG communities to affirmatively market housing and services includes implementing formal SO, participating in community events, and implementing online forms for easier connection to services.
2. Per the CoC CE Policies and Procedures “Each LPG must have a CE grievance policy. All Individuals and families must have the option to file their grievances orally or in writing. All individuals’ or families’ concerns and grievances must be resolved promptly and fairly, in the most informed and appropriate manner”. Information on how to file a Fair Housing Complaint is outlined in the CoC CE Policies and Procedures which is available publicly via DHCDs website. Additionally, the CoC CE Policies and Procedures state that “CE system partners shall inform individuals and families of the following processes for filing a fair housing grievance.”
3. DHCD monitors for fair housing and makes the decisions for funding for both ESG and state general funding for homeless services. CoC staff report the results from regular check ins and quarterly calls to make determinations for corrective action if a violation of fair housing is identified. As the CoC lead agency, we hold bi-monthly meetings to ensure that project applications and organizations receiving funding are consistent with the expectations of the Consolidated Plan. If immediate action is necessary to address the violation, the corrective plan is discussed developed during this meeting.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	07/29/2024

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC’s Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	

Describe in the field below:	
1.	the data your CoC used to analyze whether any racial disparities are present in your CoC’s provision or outcomes of CoC Program-funded homeless assistance; and
2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC’s provision or outcomes of CoC Program-funded homeless assistance.

**(limit 2,500 characters)**

1. To analyze whether any racial disparities are present in the VA BOS provision or outcomes of CoC Program funded homeless assistance there are bi-annual evaluations of HMIS data, comparing it to U.S. Census Data. Additionally, the CoC uses the PIT data to identify racial disparities amongst who experiences homelessness in the VA BOS.

2. The CoC lead agency staff identified that there are racial disparities in the provision and outcomes of the CoC program funded homeless assistance programs. HMIS data demonstrated that between HUD FY 17 and FY 23, an average of approximately 50.5% of individuals experiencing homelessness in the BoS CoC identified as Black, African American, or African while only representing 17.6% of the individuals living in the LPG communities. This is in stark contrast to White counterparts who represent approximately 53.5% of the individual's experiencing homelessness in the BoS CoC, while representing 78.3% of the individuals living in the LPG communities. FY 24 HMIS data continued to portray a similar trend where individuals who identify as Black, African American, or African are presenting for homeless services in the BoS CoC at two times the rate of how the population is represented in the LPG communities (41.9% represented in HMIS data, versus 17.6% represented in the community). FY 24 HMIS data also showed that an average of approximately 4.0% of individuals experiencing homelessness in the BoS CoC identified as two or more races while only representing 3.0% of the individuals living in the LPG communities. Additionally, FY 24 HMIS data showed that those who identified as American Indian, Alaskan Native, or Indigenous (0.44% represented in HMIS data, versus 0.39% represented in the community) and Native Hawaiian or Pacific Islander (0.12% represented in HMIS data, versus 0.09% represented in the community) are disproportionately represented in who is presenting for homeless services when compared to the population that is represented in the LPG communities. Data from the FY 24 PIT count demonstrated that an average of approximately 28.9% of individuals in emergency shelters identified as Black, African American, or African while only representing 17.6% of the individuals living in the LPG communities. This is in stark contrast to White counterparts who represented approximately 60.2% of those in emergency shelter during the FY 24 PIT count while representing 78.3% of the individuals living in the LPG communities.

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

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

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	No
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	No
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes

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

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

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

**(limit 2,500 characters)**

The VA BOS currently convenes a Racial Equity subcmte monthly to focus on addressing racial equity within our CoC, and discuss action steps for the short term goals listed below. Starting FY 24 the short term goals of the Racial Equity subcmte include: creating common language for the CoC, completing a strengths and weakness analysis around racial equity, creating a roadmap for LPG leadership to address equity, education for the LPG communities (including outreach to other system partners), defining the layers of analyzing data, and bringing additional technical assistance opportunities to the LPG communities. Currently, the Racial Equity subcmte is working to create a survey to identify knowledge and understanding of racial disparities, and racial equity within the VA BOS CoC. Additionally, the CoC Lead Agency staff with the help of the Racial Equity subcmte members are currently working to identify someone to come in and provide a training dedicated to addressing inequities within the VA BOS system. The CoC Program Admin completes a bi-annual analysis of racial disparities within the VA BOS CoC system, and this is completed on a system level and the LPG level. Additionally, in FY 25 the CoC lead agency staff will be visiting the LPG communities to strategically plan around racial equity, and plan to discuss the representation of staff at the organizations. A role of the Racial Equity subcmte is to evaluate system level processes, policies, and procedures for racial equity and ensure the VA BOS policies and procedures are not further perpetrating racial disparities. Additionally, the CoCs staff approach to evaluate system level processes, policies, and procedures for racial equity will include both anecdotal data from reports from grantees and partners, as well as quantitative data. The HDIP will also contribute to the evaluation of racial disparities in the VA BOS system, through an automated racial equity dashboard that includes CoC funded and non-CoC programs.



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

(limit 2,500 characters)

1. The Racial Equity subcmte of the CoC supports the efforts in addressing the action plan that will eliminate the barriers faced by people of color within the LPG communities, identifying the measures of success for the CoC in addressing racial disparities, and tracking the progress of the implementation of the CoC-wide action plan. CoC short-term goals include but are not limited to creating a resource guide for LPG partners to address equity in their communities, convening peer learning spaces to discuss through some of the unique challenges of addressing equity in extremely rural communities, and conducting a strengths and weakness analysis for each LPG that will contribute to the local action plans to address equity. Cmte members can access goals and action plans via Microsoft TEAMS.

2. The CoC utilizes HMIS data to examine the outcomes and provision of services for racial disparities. CoC Staff complete this evaluation utilizing HMIS data and the U.S. Census Data. The Racial Equity subcmte is identifying other tools the CoC should utilize to track the progress on preventing or eliminating disparities. In the CoCs local competition new and renewal projects were evaluated on their response to the following question: Please describe how your project will promote racial equity in your community? Please include your evaluation process for racial disparities and the results of this evaluation (please provide examples: e.g. including data, any trainings, any policies and procedures that have been implemented, etc.) and Provide a description on how your project promotes equitable access to traditionally marginalized populations (including but not limited to: Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.)". Overall, 16.66% of the points for renewal projects and 18.33% of the points for new projects were dedicated to racial equity and serving traditionally marginalized populations. The CoC plans to utilize the HDIP to contribute to the evaluation of racial disparities in the VA BOS system, through an automated racial equity dashboard that includes CoC funded and non-CoC programs.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
	NOFO Section V.B.1.q.	
	Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decisionmaking processes.	

**(limit 2,500 characters)**

As per the CoC charter, there is at least one seat on the CoC steering committee, the main governing board of the CoC, reserved for individuals with lived expertise. A similar process is maintained for other decision-making processes that the CoC initiates. Recruitment for representation of individuals with lived expertise is announced via the LPG representative sitting on the CoC Steering Committee. The LPG representative will disseminate this information to their partners, via newsletter, announcements during in person meetings, or emails sent out to community partners. Descriptions of the initiatives, and roles, and responsibilities of members are provided to partners as a part of the outreach efforts to individuals with lived experience to ensure that individuals are fully informed of the process that they will be participating in. In this description, the CoC lead agency staff will identify whether the initiative has the opportunity to be compensated or not. The CoC lead agency staff conducts additional targeted outreach to providers and households with lived experience to identify members for leadership roles and decision making processes. This can involve engagement with individuals outside of traditional working hours to ensure that there is no conflict for the individual with lived expertise. It is a CoC wide process to formally compensate individuals with lived expertise. On the local level, individuals with lived expertise are employed by homeless service organizations to support the implementation of CoC projects. In the YHDP target community, we have a Youth Action Board (YAB) comprised solely of youth with lived experience of homelessness. The YAB is compensated for their time and are provided rides to the meetings if needed. The YAB worked closely with homeless service providers to create and implement the coordinated community plan, approves policies and procedures, and provides overall direction for how the YHDP project is implemented. YAB recruitment is done through in person engagements, flyers that are handed out during meetings, and community outreach activities and efforts that include but are not limited to a cold weather program during the warmer months, and movie nights for youth.

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

You must upload the Lived Experience Support Letter attachment to the 4B. Attachments Screen.  
 Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Routinely included in the decisionmaking processes related to addressing homelessness.	1	5
2.	Participate on CoC committees, subcommittees, or workgroups.	1	4
3.	Included in the development or revision of your CoC's local competition rating factors.	0	3
4.	Included in the development or revision of your CoC's coordinated entry process.	0	1

1D-10b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

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

**(limit 2,500 characters)**

Among the LPG communities of the VA BOS, there are employment opportunities for individuals with lived expertise. Many organizations have hired individuals with lived expertise and have offered promotion opportunities to those individuals. Additionally, LPG partners share professional development opportunities to all employees and other CoC members, including individuals with lived expertise, focused on system level planning and homeless services coordination. LPG partners have also offered compensation opportunities to individuals with lived expertise for their participation in local decision-making processes. It is a CoC wide process to formally compensate individuals with lived expertise. On the local level, individuals with lived expertise are employed by homeless service organizations to support the implementation of CoC projects. For the YABs monthly meetings there are trainings around life skills, and professional development opportunities that are presented to encourage professional development and employment opportunities.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

Describe in the field below:

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

**(limit 2,500 characters)**

1. The CoC requested feedback around services from partners, including people with lived expertise. The feedback focused on specific CoC initiatives. For example as the CoC gathered feedback regarding the current CoC prioritization tool, the VI-SPDAT, the CoC lead agency staff informed partners to share the survey with individuals with lived expertise. Feedback from individuals with lived expertise is also gathered via the CoC cmtes that those with lived expertise participate on. Individuals with lived expertise also participate in anonymous surveys and focus groups that are administered and conducted annually by LPG partners regarding services.
2. Annual input sessions are hosted by CoC lead agency staff and the ESG admins. Those with lived expertise are invited to participate in the input sessions to provide feedback regarding their receipt of services. Individuals with lived expertise participate in anonymous surveys and focus groups that are administered and conducted annually by LPG partners regarding services offered within the community
3. Feedback received is utilized to update policies and procedures and or CoC processes. For example, community partners, including individuals with lived expertise identified that questions on the VI-SPDAT were not trauma informed and were not constructed through a racial equity lens. The CoC lead agency staff collected this information and presented this back to the CE Cmte to consider while creating a new prioritization tool. Annual feedback received by LPG partners is utilized to make programmatic adjustments during the implementation of projects. Adjustments that are made on the programmatic level are reported to LPG partners during quarterly check-ins with the community.
4. The CoC conducts annual surveys in an effort to support the response to homelessness across the CoC, CoC staff are also responsible for an information line. During interactions with individuals who are seeking services, feedback is provided directly to CoC staff which can then be addressed with local providers.
5. As concerns are raised, CoC staff facilitate meetings directly with LPG lead agency staff and partners. An example of this process was after review of PIT data, CoC staff saw an increase in households experiencing homelessness, and increased calls to the CoC lead agency. The CoC staff supported the community in creating an additional access point, and the community partnered with an organization to implement SO.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	
	Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. The CoC lead agency works closely with the ASNH team at DHCD to discuss opportunities to develop capital within the CoC geographic area. The CoC collaborates with the ASNH team to discuss increasing capital in the LPG communities and ASNH staff aid in the efforts to identify funding opportunities to leverage in these areas. For example, CoC program staff and ASNH staff at DHCD have been discussing methods to leverage HOME ARP funding to support capital projects that will support individuals experiencing homelessness. Conversations around expanding capital can include discussions around barriers in zoning and land use policies to permit more housing development and who would be the appropriate local partner to contact. DHCD staff worked internally to rezone an area to be used for an emergency shelter in one of the LPG communities.
2. The CoC lead agency staff works internally with their partners on ASNH to discuss regulatory barriers that impact the development of housing in LPG communities. ASNH staff provide insight in meetings with LPG partners who are interested in increasing capital in their communities regarding regulatory barriers and identifying local partners who can assist in advocating to reduce these barriers. Externally, DHCD staff works with one of the largest developers in VA (VH) to increase capital in the LPG communities. Currently, VH is working to develop 811 units of affordable housing. LPG partners conduct regular outreach to locality leadership to discuss regulatory barriers that impact the delivery of services in the community which can include affordable housing development.

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

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

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

1E-1.	Web Posting of Advance Public Notice of Your CoC's Local Competition Deadline, Scoring and Rating Criteria.	
	NOFO Section V.B.2.a. and 2.g.	

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	08/13/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	08/13/2024

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.  NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.  
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	123
2.	How many renewal projects did your CoC submit?	11
3.	What renewal project type did most applicants use?	PH-RRH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.  NOFO Section V.B.2.d.	
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Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1. Applicants were required to submit the annual performance report (APR) from HMIS or a comparable database (i.e. VADATA) for current projects. The ranking cmte was instructed to assess the project based on how they met the following benchmarks: 80% of RRH/PSH participants exit to or retain permanent housing and 85% of project’s households did not return to homelessness in the first year of being housed. For new applicants that never received funding before, the ranking cmte was instructed to evaluate the application based on how the project would meet the benchmarks.
2. Applicants were required to submit an APR from HMIS or VADATA for current projects. From the APR, members of the ranking cmte were instructed to assess projects based on how the project addressed length of time a household experiences homelessness with the goal of a household experiencing homelessness for 30 days prior to their connection to permanent housing. For new applicants that never received funding before, members of the ranking cmte were instructed to evaluate the application based on how the project intends to meet this benchmark.
3. The CoC identified the most severe barriers and vulnerabilities that impact services are zero income, active substance use, mental or physical conditions, criminal histories, and family composition. To address these needs, the CoC outlined in the system level policies and procedures that all projects are required to use a Housing First model, prioritize based on vulnerability (using VI-SPDAT), and ensure there are no barriers to project entry. Project applicants are required to discuss how the project meets the needs of participants coming from unsheltered homelessness, emergency shelters or fleeing domestic violence. New project applicants outlined how their LPG identified this project was a necessity for their community.
4. The barriers our CoC considered are zero income, active substance use, mental or physical conditions, criminal histories, and family composition. During the ranking process members of the ranking cmte were instructed to score applications based on the following question: “Describe in detail how the organization implements a Housing First approach. Include specific examples of how the organization implements a Housing First approach such as organizational or programmatic policies, procedures, guidelines, etc. (e.g. a narrative description). Housing first is a priority and accounts for 15 points of the overall scoring.

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



**(limit 2,500 characters)**

1. As a result of the CoC convening a workgroup in FY 22 dedicated to addressing the service needs of individuals and families, improvements to the evaluation tool were recommended and implemented to evaluate projects during the CoCs local competition. 60% of the members who participated in the CoC's ranking and rating process identified as BIPOC. Looking forward, the CoC staff have recruited including individuals from traditionally marginalized populations to support the evaluation of our CoC Competition process, this will be implemented in FY 25.

2. Members identified racial equity as a priority for evaluation for the local competition. Members provided feedback around racial equity questions in the CoC's supplemental application, shifts in questions were made to account for feedback received. For the FY24 local competition, CoC staff kept the workgroup recommended question focused on racial equity and ranking cmte members were instructed to score applications on responses provided. A question around racial equity and serving traditionally marginalized populations was included in the CoCs supplemental application. In the FY24 local competition, 60% of the members who participated in the CoC's ranking and rating process identified as BIPOC.

3. In the FY24 local competition, applicants were evaluated on their response to the following question around serving traditionally marginalized populations: Provide a description on how your project promotes equitable access to traditionally marginalized populations (including but not limited to: Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.) ". Applicants were also evaluated on their response to the following question regarding racial equity: Provide specific details on how your project will promote racial equity in your community? Include your evaluation process for racial disparities and the results of this evaluation (provide examples: including data, any trainings, any policies and procedures that have been implemented, etc.). 16.66% of the points for renewal projects and 18.33% of the points for new projects were dedicated to racial equity and serving traditionally marginalized populations.

<b>1E-4.</b>	<b>Reallocation—Reviewing Performance of Existing Projects.</b>	
	NOFO Section V.B.2.f.	

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

**(limit 2,500 characters)**

1. DHCD first identifies which projects had a history of returning HUD funding. The CoC then identifies whether the applicant was within their first renewal of their project or if the project had been renewed in previous rounds of the competition. Then DHCD assessed the amount returned from each year of the project's operation based on the HUD quarterly spending reports provided by the SNAPS office. The CoC PM utilizes this information as well as the project's APR that is required for the submission of the application for the local competition to determine whether a reallocation of funding is necessary.
2. The CoC did not identify projects to reallocate through this process during the local competition
3. The CoC did not identify projects to reallocate through this process during the local competition
4. The CoC did not identify projects to reallocate through the local competition due to the gap that would be left in the LPG community and the CoCs crisis response system.

1E-4a.	Reallocation Between FY 2019 and FY 2024. NOFO Section V.B.2.f.	
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	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps. NOFO Section V.B.2.g. You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	
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1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	

1E-5a.	Projects Accepted–Notification Outside of e-snaps. NOFO Section V.B.2.g. You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	
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	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/08/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	<b>Does your attachment include:</b> 1. Project Names; 2. Project Scores; 3. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	10/28/2024
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1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	10/28/2024
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## 2A. Homeless Management Information System (HMIS) Implementation

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

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

<b>2A-1.</b>	<b>HMIS Vendor.</b>	
	Not Scored—For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
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<b>2A-2.</b>	<b>HMIS Implementation Coverage Area.</b>	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Multiple CoCs
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<b>2A-3.</b>	<b>HIC Data Submission in HDX.</b>	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2024 HIC data into HDX.	05/10/2024
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<b>2A-4.</b>	<b>Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.</b>	
	NOFO Section V.B.3.b.	

	In the field below:	
	1. describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and	
	2. state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards.	

**(limit 2,500 characters)**

1. The VSDVAA administers VADATA, the HMIS comparable database to all DV providers within the CoC. VADATA has the capabilities to collect the same data elements that are required to be collected from the HUD-published 2024 HMIS Data Standards. As the HUD HMIS Data Standards are updated, the VSDVAA and the CoC communicate with one another to ensure that VADATA has the capacity to meet the requirements for data collection set forth by HUD. For example, when updates are made that impact the data collection this is discussed between the HMIS lead and VADATA representatives to ensure that both databases are compliant with HUD HMIS Data standards. Additionally, the HMIS admin of the CoC, Homeward, meets regularly with representatives from the VSDVAA to ensure that VADATA meets all HUD HMIS Data Standards. VADATA representatives also support the development and evaluation of HMIS policies and procedures that are implemented by Homeward.
2. DV housing and service providers in the CoC are using a HUD compliant comparable database, compliant with the FY 2024 HMIS Data Standards. The HMIS administrator of the CoC, Homeward, meets regularly with representatives from the VSDVAA to ensure that VADATA meets all HUD HMIS Data Standards.

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

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

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	695	183	634	72.21%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	218	0	46	21.10%
4. Rapid Re-Housing (RRH) beds	232	3	228	97.02%
5. Permanent Supportive Housing (PSH) beds	469	0	228	48.61%
6. Other Permanent Housing (OPH) beds	55	0	22	40.00%

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

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

- |    |  |
|----|--|
| 1. | steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and |
| 2. | how your CoC will implement the steps described to increase bed coverage to at least 85 percent.                                     |

**(limit 2,500 characters)**

1. The recruitment for new projects in HMIS is ongoing for the CoC. The CoC utilizes the following steps to address HMIS participation: TA for all LPG providers regardless of funding source and participation in the cloud-based statewide HMIS warehouse (HDIP). For emergency shelter beds there was an overall increase in HMIS coverage from FY23 (61.77% to 72.21%), the increase is due to an increase in seasonal shelters participating in HMIS. Despite the 48.61% HMIS coverage rate for PSH beds, the CoC increased the available PSH beds in the CoC by 11.66% since FY23. The expansion in PSH across the VA BOS LPGs is supported by another state funding source that does not require HMIS participation as a part of project design. Additionally, the CoC has increased available beds for PSH through the expansion of two CoC funded projects. CoC Staff continue to explore additional methods of collecting data and coordinating services for individuals experiencing chronic homelessness. Although most TH providers do not coordinate their services in HMIS, the CoC increased the HMIS coverage in TH beds by 21.10% from FY23. Although 40% of OPH beds are covered in HMIS, the CoC continues to partner with TH and OPH providers to ensure coordination of services for households receive adequate support.

2. HMIS-specific TA is provided to all partners regardless of funding source. If interest in participation in HMIS is identified, community members will be linked with the CoC HMIS admin, Homeward, for assignments for licensures and HMIS training. The strategies for the provision of HMIS TA to all community partners has improved the overall participation of partners in CoC operations. Homeward holds regular open office hours to support the implementation of HMIS and support project providers. Homeward also supports individual LPG trainings regarding HMIS projects and implementation. CoC staff support local providers in accessing private funding opportunities through applications that utilize data collected through HMIS. In addition to incorporating data from HMIS, the technical aspects of the project allow easier and more accurate integration of other data sources (such as criminal justice, health care, and education). As the HDIP continues to be developed, demonstration training will be provided to all LPG partners in order to recruit new users to HMIS.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	
Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?		Yes

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

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

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

<b>2B-1.</b>	<b>PIT Count Date.</b>	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2024 PIT count.	01/24/2024
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<b>2B-2.</b>	<b>PIT Count Data—HDX Submission Date.</b>	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024
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<b>2B-3.</b>	<b>PIT Count—Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.</b>	
	NOFO Section V.B.4.b.	

Describe in the field below how your CoC:

- |    |   |
|----|---|
| 1. | engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;   |
| 2. | worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and |
| 3. | included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.   |

(limit 2,500 characters)

1. Each LPG conducts outreach to providers across their local communities and informs them of the PIT count. This includes conducting outreach to public child welfare agencies, school districts and other youth providers in the communities. LPG partners include stakeholders to discuss the questions that will be asked of youth experiencing homelessness and how to effectively engage with youth experiencing homelessness. Additionally, the CoC provides recorded training to all stakeholders participating in the PIT count regarding the operations of the PIT count including youth providers. Due to staff turnover, development of a youth dedicated PIT count has been delayed. The CoC is currently updating methodology for engaging youth experiencing homelessness during the PIT count by leveraging the tools from the YHDP opportunity as well as methods identified by the CoC YAB. The Youth Homelessness Program Coordinator at DHCD is currently supporting the planning for a PIT count dedicated to youth experiencing homelessness.
2. With the acknowledgement that youth homelessness is not readily visible, our CoC has taken a number of actions to ensure that youth are represented during the PIT count. The YAB is engaged prior to the PIT count to get an understanding of where youth experiencing homelessness commonly congregate. Additionally, Stakeholders and youth provided ample feedback regarding the locations to engage youth experiencing homelessness. CoC partners engaged with educators and school districts to ensure that they were trained on the administration of the youth PIT survey. Finally, youth conducted events in LPGs of the CoC to engage youth in the community who may be experiencing homelessness. The CoC will formalize the operations of a CoC wide PIT Count dedicated to engaging youth experiencing homelessness and will leverage support from youth and stakeholders serving youth to increase engagement during the count.
3. Youth are informed of the PIT count via their LPG representatives and through older adult partners facilitating youth initiatives including YABs. Through these interactions with youth the older adult partners are able to identify volunteers for the upcoming PIT count. In the YHDP target community, youth outreach workers assisted in the PIT count to help volunteers locate and identify youth experiencing homelessness within the community. The CoC will formalize a process to identify youth volunteers for the PIT count in FY 25.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
	1. describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;	
	2. describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;	
	3. describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and	
	4. describe how the changes affected your CoC's PIT count results; or	
	5. state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024.	



**(limit 2,500 characters)**

1. The CoC did not conduct any changes in the methodology to count sheltered individuals between the FY 23 and FY 24 PIT counts.
2. The CoC did not conduct any changes in the methodology to count unsheltered individuals between the FY 23 and FY 24 PIT counts. Although, outreach to individuals experiencing unsheltered homelessness improved through the increase in providers supporting CoC communities in the FY 24 PIT count. Improved coordination increased the knowledge of CoC partners in locating individuals experiencing unsheltered homelessness. Additionally, LPGs reported that there were specific teams dedicated to canvassing different locations within the LPG communities.
3. During the FY 24 PIT Count, the CoC experienced an approximate 5.33% (412 to 434) increase in individuals experiencing unsheltered homelessness compared to the FY 23 PIT Count. The increase in individuals experiencing unsheltered homelessness identified during the 24 PIT is largely due to increased outreach efforts to individuals experiencing unsheltered homelessness in the LPG communities during the FY 24 PIT count. CoC partners improved coordination and increased the knowledge of locating individuals experiencing unsheltered homelessness. Anecdotally, CoC providers reported an increase in legislation across the CoC communities that impacted individuals experiencing unsheltered homelessness (such as public camping laws and laws regarding loitering).
4. Outreach to individuals experiencing unsheltered homelessness improved through the increase in providers supporting CoC communities in the 2024 PIT count, and teams dedicated to canvassing different locations within the LPG communities.

## 2C. System Performance

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

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

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

**(limit 2,500 characters)**

1. The CoC reviews both the quantitative data provided from emergency shelters as well as the qualitative data provided from the LPG communities to determine the characteristics of individuals who experience homelessness. Initially, the CoC identified 21 characteristics that may make a household more vulnerable to homelessness. Of these 21, four were identified that may yield the greatest vulnerabilities: unaccompanied youth, 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. The LPGs described the following risk factors that have contributed to the vulnerabilities that influence an individual's experience of homelessness: the lack of affordable, habitable housing, and the increase of households experiencing unemployment due to the pandemic.

2. The CoC leverages prevention funds to divert households from homelessness as opposed to eviction prevention. Additionally, the CoC plans to support households at risk of becoming homeless through follow up from CE systems. The CE subcmte is dedicated to formalizing the technical assistance that will be available to access points to ensure they are supporting households at risk of becoming homeless. The CoC PM also works closely with development partners both internally and externally to discuss opportunities to develop capital within the CoC geographic region. The CoC is working towards strengthening relationships with their workforce development providers to ensure opportunities for employment are made available to those experiencing homelessness. Between FY22 and FY23, the CoC saw a 24.08% decrease in individuals who were experiencing homelessness for the first time in ES, SH, TH, or any PH projects within 24 months.

3. DHCD chairs the CoC wide strategy to decrease the number of individuals experiencing homelessness for the first time. The CoC Lead Agency staff provide support to the 12 LPGs that comprise the CoC. Our CoCs current strategies include targeting individuals who are experiencing homelessness for the first time who are contacting CE. The CE program admin is currently working with the CE subcmte to develop best practices for engagement with individuals experiencing homelessness for the first time that make contact with LPG communities access points. The conversation includes focusing on state funded targeted homeless prevention projects, long term and short term goals will be identified in FY 25.

<b>2C-1a.</b>	<b>Impact of Displaced Persons on Number of First Time Homeless.</b>	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:
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1.	natural disasters?	No
2.	having recently arrived in your CoC's geographic area?	No

<b>2C-2.</b>	<b>Reducing Length of Time Homeless—CoC's Strategy.</b>	
	NOFO Section V.B.5.c.	

In the field below:
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1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
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2.	describe how your 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 your CoC's strategy to reduce the length of time individuals and families remain homeless.

**(limit 2,500 characters)**

1. Over FY 23, the CoC has reviewed and is in the process of finalizing the updates to the CoC wide CE process with the goal to create additional mechanisms to prioritize individuals experiencing homelessness for an extended length of time. A prioritization factor of the updated CoC prioritization tool includes the experience of multiple episodes of homeless. Additionally, the CoC will continue to divert households from homelessness by mediating with landlords, family and friends, or identifying alternative mainstream services. If diversion is not possible, emergency shelters have received training on low-barrier procedures which ensures that households with the greatest needs are able to access shelter and then obtain the housing resources needed.

2. Between FY 22 and FY 23 the CoC experienced a 26.26% decrease in the average length of time individuals experience homelessness. The CoC utilizes a tool provided from the NAEH that assists emergency shelters in evaluating shelter inflow, outflow and length of stay. The CoC HMIS admin 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. Communities also utilize weekly case conferencing as a method of identifying households with the longest lengths of time homeless. Additionally, CoC staff work with our partners at DHCD that are administering the eviction prevention reduction pilot program and the ASNH to support the development of projects dedicated to increasing capital for vulnerable populations.

3. CoC staff at DHCD work with each LPG to ensure they are reviewing data and using state prevention funds in accordance with the CoC system level procedures. The CoC Program Admin and the CE subcmte, comprised of representatives from the LPGs, will be responsible for overseeing the updates in the CE prioritization process.

2C-3.	Successful Permanent Housing Placement or Retention –CoC's Strategy.	
	NOFO Section V.B.5.d.	

In the field below:

1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

**(limit 2,500 characters)**

1. The CoC will continue to implement housing focused case management in emergency shelter, rapid exits to housing, and access to RRH as methods to ensure individuals exit to a permanent housing destination. Emergency shelters in the CoC implement the following strategies to reduce barriers to permanent housing: housing first approach, housing focused services, rapid exits from shelter and evaluation of program performance to identify areas of improvement. Additional outreach regarding homeless services is being provided to landlords and is supported through ESG and state funding deployed in the LPG communities.
2. Housing stabilization case management is provided through homeless service providers within the CoCs, which focuses on supporting the individual household's needs to ensure they are able to maintain their permanent housing placement. This case management works to stabilize a household in the following ways: connection to mainstream resources, employment opportunities, connection to education services, etc. LPGs have formed Landlord Cmtes with the goal of bringing together property owners and housing specialists/counselors from homeless service organizations across the CoC. These cmtes 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. The CoC had a housing retention rate of 92.7% in permanent housing between FY 22 and FY 23.
3. The CoC PM at DHCD works with each LPG to ensure they are reviewing system and project level data to assess their communities performance in connecting individuals with permanent housing. The CoC program staff at DHCD conduct a bi-annual review of community wide system data and project level data. The information gathered from these assessments includes the number of households connected to permanent housing. Additionally, the CE cmte, comprised of representatives from the LPGs, will be responsible for overseeing and monitoring the outcomes from the shifts made to CE.

2C-4.	Reducing Returns to Homelessness—CoC's Strategy.	
	NOFO Section V.B.5.e.	

	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate that individuals and families return to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

**(limit 2,500 characters)**

1. The CoC utilizes HMIS data collected from CE, emergency shelter, and permanent housing projects to analyze households entering and re-entering the homeless system. Each LPG manages a CE project in HMIS, which has helped identify those who are re-entering the crisis response system more timely. Over the past year, the CoC has also taken steps to evaluate this data further to understand the racial makeup of individuals who are re-entering the homelessness system on both the CoC and LPG level. The CoC implements SO to identify individuals and families who have returned to homelessness, and reconnect them to CE services. The CoC also works with McKinney Vento Liaisons to implement early intervention strategies to ensure that households with children do not experience homelessness, or re-experience homelessness.

2. As per the CoC system level procedures, the CoC is targeting prevention funds to serve those most likely to become homeless and not on eviction prevention. The CoC currently prioritizes those who have previously been homeless as well as those with high barriers to obtaining housing (large households, youth, multiple episodes of homelessness, income under 15% AMI). By targeting those with previous episodes of homelessness, LPGs are able to prevent re-entries into homelessness. The CoC plans to leverage the TA provided from CI to improve the CoC's relationships with culturally specific CBOs in LPGs with high rates of individuals returning to homelessness who identify as people of color. It is evident that these strategies are effective as the CoC had a housing retention rate of 94.2% within the first 13 to 24 months of their placement in permanent housing and a housing retention rate of 96.8% within the first 6 to 12 months of their placement in permanent housing. In FY 25 the CoC lead agency staff will also utilize a report in the HDIP that looks at who returns to homelessness to identify households that return to homelessness.

3. The CoC PM oversees system level data and the CoC Program Admin facilitates the Uniform/CE and Assessment cmte, which addresses system processes such as targeting and prioritizing. The Racial Equity ad hoc committee is responsible for assessing the racial data and formalizing the strategic plan to reduce the rate of returns among communities of color.

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

(limit 2,500 characters)

1. Many LPGs across the CoC have internal workforce development programs. Homeless service staff in the LPGs meet regularly with workforce development staff to address the needs of job seekers (who have experienced homelessness or unstable housing) to secure meaningful employment, competitive wages, and career advancement. Additionally, the CoC is working in partnership with DMAS to develop a cross-systems approach to address the employment needs of individuals experiencing homelessness. DMAS is designing a benefit program for Medicaid eligible individuals to access supportive services for both housing and employment.
2. The CoC partners with mainstream employment organizations to advertise for available positions, provide opportunities for apprenticeships and to identify education opportunities for individuals and families to increase their cash income. These partners also provide input in the planning efforts to increase cash income within the LPGs. Mainstream partners aiding the CoC in these efforts include DMAS, Virginia Employment Commission, Dept. of Aging and Rehabilitative Services, Virginia Department of Labor and Industry, Dept. of Social Services, Community Action Agencies, and Dept. of Juvenile Justice. The number of system stayers that increased their employment cash income is 2.19%, the number of system leavers that increased their employment cash income is 0.56% between FY22 and FY23. Between FY22 and FY23 the number of system stayers that decreased their total income is 0.97%, and system leavers that increased their total income is 3.17%.
3. The CoC lead agency organizes system level partnerships and aids LPGs in planning discussions. These partnerships are established at the local level and are replicated across the CoC.

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

**(limit 2,500 characters)**

1. Along with the partnership created to increase employment income, the CoC is working on a strategy to increase access to non-employment income. To improve access, the CoC ensures case managers work to reduce barriers for clients by providing transportation and educating clients regarding the eligibility criteria of the benefits. LPGs have SOAR trained staff who work to ensure those eligible for disability benefits are able to have applications approved. Additionally, CE staff in the LPGs provide referrals to mainstream resources to ensure that clients can increase their non-employment income. Between FY22 and FY23 the number of system stayers that decreased their non-employment cash income is 1.66%, the number of system leavers that increased their non-employment cash income is 1.08% . Between FY22 and FY23 the number of system stayers that decreased their total income is 0.97%, and system leavers that increased their total income is 3.17%.
2. The CoC lead agency organizes system level partnerships and aids LPGs in planning discussions. These partnerships are established at the local level and are replicated across the CoC.

### 3A. Coordination with Housing and Healthcare

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

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

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			



### 3B. New Projects With Rehabilitation/New Construction Costs

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

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

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.r.	

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

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

**(limit 2,500 characters)**

1. N/A
2. N/A

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

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

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

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

1. N/A
2. N/A

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

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

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

4A-1.	New DV Bonus Project Applicants.	
	NOFO Section I.B.3.j.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.j.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2024 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

**You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.**

4A-3.	Data Assessing Need for New DV Bonus Housing Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.j.(1)(c) and I.B.3.j.(3)(c)	

1.	Enter the number of survivors that need housing or services:	699
2.	Enter the number of survivors your CoC is currently serving:	639
3.	Unmet Need:	60

4A-3a.	How Your CoC Calculated Local Need for New DV Bonus Housing Projects.	
	NOFO Section I.B.3.j.(1)(c)	
	Describe in the field below:	
	1. how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
	2. the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
	3. if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

**(limit 2,500 characters)**

1. The number of survivors the CoC is currently serving was collected from the Virginia HMIS comparable database, VADATA as well as the DHCD centralized administration and management system (CAMS) . The information was calculated from the number of individuals served in DV emergency shelters and the number of individuals who exited those DV shelters to permanent destinations, including to rapid-rehousing programs in their LPG community.

2. The HMIS comparable data base, VADATA, and DHCD’s CAMS were the sources of data to calculate the need for housing or services for survivors.

3. The CoC is currently seeking funding to meet the need in communities that have demonstrated the capacity necessary to distribute the CoC DV bonus funding. Between FY 23 and FY24 there was 3.39% increase in survivors seeking shelter (618 to 699), data between FY 23 and FY 24 also showed that there was a 14.92% decrease in survivors exiting to permanent destinations (134 to 114). The CoC is seeking funding to increase the number of projects serving survivors in the LPGs. This is to ensure a streamlined process for survivors and their families to access permanent housing opportunities. The focus of the DV bonus projects will be to provide individualized services to meet the unique needs of survivors and their families. The CoC is dedicated to ensuring that survivors and their households access safe and affordable housing. The CoC collaborates with VSDVAA to identify the capacity needs of other DV providers and increase the provision of services to meet the needs of survivors in the LPGs. Our CoC works alongside the VSDVAA to collect the data that accurately reflects the needs of survivors in the CoC communities. Additionally, the CoC will continue planning with DV providers to leverage state funding to assist in their efforts to meet the needs of survivors in their communities.

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

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

<b>Applicant Name</b>
STEPS, Inc.

## Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

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

Enter information in the chart below on the project applicant that applied for one or more New DV Bonus housing projects included on your CoC's FY 2024 Priority Listing for New Projects:

1.	Applicant Name	STEPS, Inc.
2.	Rate of Housing Placement of DV Survivors–Percentage	100%
3.	Rate of Housing Retention of DV Survivors–Percentage	100%

<b>4A-3b.1.</b>	<b>Applicant's Housing Placement and Retention Data Explanation.</b>	
	NOFO Section I.B.3.j.(1)(d)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated the rate of housing placement;
2.	whether the rate for housing placement accounts for exits to safe housing destinations;
3.	how the project applicant calculated the rate of housing retention; and
4.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

**(limit 1,500 characters)**

1. Since STEPS has only provided limited DV/SA services since November 2022, it is a relatively new DV/SA provider that has only begun to provide a full array of services in September 2024. In November 2022 the previous provider closed all its services including Madeline’s House, which is a DV/SA emergency shelter that STEPS has now taken over. The placement and retention rates above are for the first year of limited services provided by STEPS Director of Victim Services (DVS) in collaboration with housing staff. Given the limited interim DV/SA services provided and limited amount of RRH funds available there were only 4 survivors served with RRH.
2. The rate for housing placement accounts for exits to safe housing destinations are calculated based on 4 successful placements. This project will allow STEPS to expand their services to survivors.
3. Going forward STEPS will calculate placement and retention rates through the Housing Case Manager (HCM) and in this project if funded. Under this proposed project, RRH services will be provided to DV/SA survivors as deemed appropriate.
4. Housing placement and exit destinations for clients will be tracked through follow-ups by the HCM, and the results will be entered into in VADATA. Outreach follow-up after RRH program exit will be done on a quarterly basis by Madeline’s House staff for an additional 6 months. After exiting services, DV/SA survivors can contact the HCM to request assistance with sustaining permanent housing.

<b>4A-3c.</b>	<b>Applicant’s Experience Housing DV Survivors.</b>	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below how the project applicant:	
	1. ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
	2. prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan;	
	3. determined survivors’ supportive services needs;	
	4. connected survivors to supportive services; and	
	5. moved survivors from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

**(limit 2,500 characters)**

1.Until 07/01/2024 STEPS had moved DV/SA survivors into primarily affordable housing by referrals from the previous DV/SA provider in the region who operated Madeline’s House. As long as there was available funding all of these referrals were accepted by STEPS through coordinated entry, and rapid rehousing services were provided through the ESG program that served the homeless population in general.

2.Because of the historically limited funding in RRH, DV/SA clients were provided with the same deposit, first month’s rent assistance, utility deposits, and arrears assistance to secure permanent housing. If needed, there could be up to an additional two months of rental assistance provided. After Madeline’s House closed in November 2022, STEPS began assisting DV/SA survivors with referrals to shelters across the state or other safe locations. When we hired our DVS in August 2023, this allowed us to start the process of providing more localized specific DV/SA services such as safety planning and court advocacy to assist with securing protective orders, and assistance with obtaining and maintaining permanent housing options. This generated referrals to our RRH program and DV/SA victims made up 33% of our overall RRH caseload from 07/01/2023-06/30/2024. These referrals came through coordinated entry, and they were more seamless since STEPS was providing all the services involved without the need for a referral from an outside source.

3.Now that STEPS has reopened Madeline’s House these referrals will continue, and RRH service delivery by the HCM will occur at the shelter. Supportive services will be assessed continuously from the time of shelter intake through the RRH intake process, and in the follow-ups conducted by shelter staff and the HCM.

4. Training on confidentiality requirements and safety protocols has been provided to all Madeline’s House staff and will be provided to the HCM and all other housing staff. It includes information about survivor rights under the Violence Against Women Act. The funding for this project will allow for dedicated RRH funding for survivors, and it is planned that the numbers of survivors receiving these services will increase considerably now that there are no survivors being referred to shelters in other areas of the state for DV/SA services and all programs are operated by STEPS.

4A-3d.	Applicant’s Experience in Ensuring DV Survivors’ Safety. NOFO Section I.B.3.j.(1)(d)	
<ol style="list-style-type: none"> <li>1. taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;</li> <li>2. making determinations and placements into safe housing;</li> <li>3. keeping survivors’ information and locations confidential;</li> <li>4. training staff on safety and confidentiality policies and practices; and</li> <li>5. taking security measures for units (congregate or scattered site), that support survivors’ physical safety and location confidentiality.</li> </ol>	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	

(limit 2,500 characters)



1. During intake and the housing planning process, housing location is driven by the survivor. Our DVS and HCM work collaboratively to ensure that housing locations are safe. Factors that are assessed include recency of violence, stalking behaviors or specific threats, and remoteness and accessibility of housing location in relation to law enforcement response times. Survivors are in no way coerced into living in a location in which they do not feel safe or does not meet their needs.
2. Survivors are in no way coerced into living in a location in which they do not feel safe or does not provide for their needs for accessibility to employment, education, or other specific identified needs.
3. No information about housing location is provided to other agencies or parties unless the survivor consents to a release in writing, or it is required by law. The survivor's status as a DV/SA survivor is not disclosed to the landlord by STEPS, but the survivor can disclose if they deem it in their best interest. Counseling with survivors around the need to cut off communication with their abusers to avoid discovery of location has been provided by the DVS.
4. Training on confidentiality and safety has been provided to Madeline's House staff and will be provided to the HCM and other housing staff. Training includes survivor rights under the Violence Against Women Act such as protection from adverse rental decisions due to experiencing violence/abuse; the option for survivors to stay in the unit even if there has been criminal activity directly related to violence/abuse; the right to request an emergency transfer; and protection from retaliation by the housing provider including both landlords and service providers for seeking or exercising VAWA protections. All staff will receive training on identifying survivors of DV/SA and their right to self-determination.
5. Madeline's house has safety protocols that include but are not limited to cameras, a privacy fence, having the doors locked at all times, having a ring camera at the door for notification and visuals, and having alarms on every door that are set every night. Security measures will be replicated based on clients needs, and choices. Measures for ensuring confidentiality of survivor's locations include obtaining other cell phones to prevent tracking, and not sharing information about housing location to other agencies or parties unless the survivor consents to a release in writing, or it is required by law.

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

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

(limit 2,500 characters)

STEPS has historically conducted customer satisfaction surveys which included our interim DV/SA program after the Madeline’s House closure. In this survey, clients are asked to rate the services provided, describe any problems/issues with the service and/or service provider. If there are any negative ratings or comments, that information is shared with the STEPS Board and executive management and then staff providers. The issues are discussed, and recommendations are implemented to make improvements such as training, sensitivity, and knowledge of the issue at hand. The recommendations are put in place and revisited later should the issue arise again. Now that STEPS is providing a full array of DV/SA services in the region, we will be participating in the “Documenting Our Work” program which is a requirement for Virginia Department of Criminal Justice and Virginia Department of Social Services funding. This is specifically targeted to survivors and thus it will replace the overall survey conducted by STEPS across all its program. All shelter and community-based participants will be given the opportunity to fill out these surveys. They ask direct questions concerning our services and staff such as, upon entering the shelter, did you feel welcome and respected, and did staff respect your background and beliefs. The survey goes on to ask very direct questions concerning 8 different areas of services and lastly ask about any problems with the program or staff. The surveys will be given to the survivor after intake, at point in time intervals while receiving services, and at the exit from the DV/SA program. Once completed these surveys are mailed to Virginia Commonwealth University which compiles the results through a partnership with the Virginia Sexual and Domestic Violence Action Alliance. The results are put into the VaData system used to track all our DV/SA services. The staff utilize the results of these surveys to better the delivery of our services. They will also be provided to the STEPS Board and executive management, and followed up in the same manner that the currently survey process uses. An additional survey will also be developed to give survivors when they exit our RRH services, which will be administered through STEPS’ current survey process.

4A-3e.	Applicant’s Experience in Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

	Describe in the field below the project applicant's experience in:
1.	prioritizing placement and stabilization of survivors;
2.	placing survivors in permanent housing;
3.	placing and stabilizing survivors consistent with their preferences; and
4.	placing and stabilizing survivors consistent with their stated needs.

(limit 2,500 characters)

1. During over 20 years of providing RRH through ESG, STEPS has provided these services to survivors of domestic violence and sexual assault who have been sheltered at Madeline’s House. This was initiated on a referral basis from the shelter to STEPS. It involved placement in permanent housing through financial assistance with the deposit and first month’s rent, utility deposits, arrears assistance, and case management. After the previous DV/SA provider closed in November 2022, STEPS acquired Madeline’s House and reopened it on September 30, 2024. During the time period that it was closed, we provided survivors with hotel sheltering and transportation to shelters in other areas of the state. In August 2023 we hired an experienced DVS who has provided stabilization assistance with safety planning, obtaining protective orders, and addressing immediate and ongoing stated needs.
2. She is thoroughly trained and experienced in providing trauma informed, survivor centered services. Our Housing Case Manager has provided RRH services to survivors whose preferences were to be housed in the local area. The housing plan has been developed by the DVS, and referrals are made to the Housing Case Manager for RRH if applicable. The housing plan is driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available to implement the plan.
3. The DVS has over 30 years of experience working in DV/SA shelters and placing and stabilizing survivors in permanent housing. Now that Madeline’s House is fully operational, these services can be more easily provided in one shelter location all under the auspices of STEPS. The housing plan is driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available to implement the plan.
4. Our HCM has provided RRH services to survivors whose preferences were to be housed in the local area. The housing plan has been developed by the DVS, and referrals are made to the HCM for RRH if applicable. The housing plan is driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available to implement the plan.

4A-3f.	Applicant’s Experience in Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	
	Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
	1. establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures survivors and staff interactions are based on equality, and minimize power differentials;	
	2. providing survivors access to information on trauma, e.g., training staff on providing survivors with information on the effects of trauma;	
	3. emphasizing survivors’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
	4. centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
	5. providing a variety of opportunities for survivors’ connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
	6. offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

**(limit 5,000 characters)**

1. While STEPS' DV/SA program is relatively new we have a DVS with many years of experience managing shelter and supportive services, she is very knowledgeable in working with staff to create an environment of mutual respect and equality. STEPS DVS has already utilized that knowledge in the development of our program. Since she started serving survivors for our program in late August 2023 she has provided trauma-informed survivor centered services. Our DVS is fully trained in the areas that include cultural responsiveness and inclusivity, nondiscrimination, language access, and service improvement. Madeline's House staff are required to complete a cultural sensitivity and diversity awareness course.

2. Part of our training checklist covers policy and procedure for nondiscrimination, LEP, cultural responsiveness, and trauma-informed advocacy. We will discuss the evaluation of our services being adequate, partially adequate, or inadequate. This training will also be provided to the HCM working in this project if funded. Support group participants will discuss trauma and the effects of trauma, recovering from trauma, and coping skills. During the case planning process, the staff which includes the HCM for RRH participants will work with survivors to identify their strengths, desires, and past experiences in fields where they can excel to support themselves and their children (if they are parents). The HCM will work with shelter staff to assure that a full range of ongoing supportive service opportunities are available for survivors. Participants will have full access to ongoing supports already in place and offered new opportunities to get involved and explore self-awareness around goals, dreams, and aspirations.

3. We seek information from participants to gain new ideas for speakers or information on different subjects such as continuing education, women working in non-traditional employment roles, grants for small businesses, financial planning, budgeting, etc. Our program connects survivors to educational and support group opportunities that offer parenting classes, coping with past trauma, and celebrations of accomplishments. Longwood University and Hampden-Sydney College both have mentorship programs for our youth, and religious groups will offer things like spaghetti night with crafts and games-helping families to play together.

4. Our DVS came to us fully trained in areas that include cultural responsiveness and inclusivity, nondiscrimination, language access, and service improvement. Now that we have our own sheltering services at Madeline's House all staff are required to complete a cultural sensitivity and diversity awareness course. Within these trainings, staff will learn about cross-cultural awareness and diversity and inclusion, including recognizing our own biases.

5. Our program connects survivors to educational and support group opportunities that offer parenting classes, coping with past trauma, and celebrations of accomplishments. Longwood University and Hampden-Sydney College both have mentorship programs for our youth, and religious groups will offer things like spaghetti night with crafts and games-helping families to play together. STEPS is the Head Start and Early Head Start provider for this region, and survivors can apply for this service. They can also have access to that program's Conscious Discipline parenting classes and resources. This is a trauma-informed program that uses neuroscience, child development research, and psychology to teach skills for managing life tasks. It is a social-emotional learning program that teaches people how to manage their thoughts, feelings, and behaviors. The program's goal is to help people to achieve their goals, regardless of distractions. It's designed to help adults improve children's lives by changing the lives of adults first.

6. STEPS is the Head Start and Early Head Start provider for this region. Head

Start can provide subsidized and private pay childcare options for children who do not qualify for Head Start. Survivors can also have access to that program's Conscious Discipline parenting classes and resources. This is a trauma-informed program that uses neuroscience, child development research, and psychology to teach skills for managing life tasks. STEPS has strong partnerships with each of the local departments of social services (LDSS), which manage the childcare subsidies in VA. They can also provide guidance on available childcare resources. We will connect our survivors to the appropriate LDSS department to apply for these services. Our partnership with VA Legal Aid is also active. They have a representative on our Heartland LPG for the VA BoS CoC, and our housing program already makes multiple referrals to them. We will connect our survivors with their educational resources on tenant rights, how to be a good tenant, tax preparation, and the serious pitfalls of pay day loans.

4A-3g.	Applicant's Experience Meeting Service Needs of DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

**(limit 5,000 characters)**

While STEPS DV/SA program is relatively new, we have a DVS with many years of experience managing shelter and supportive services. Our DVS is very knowledgeable in working with staff to create an environment of mutual respect and equality, and she has already utilized that knowledge in the development of our program. Since she started serving survivors for our program in late August 2023 she has provided trauma-informed, survivor centered services. She came to us fully trained in these areas that include cultural responsiveness and inclusivity, nondiscrimination, language access, and service improvement. Now that we have our own sheltering services at Madeline's House all staff are required to complete a cultural sensitivity and diversity awareness course. Within these trainings, staff will learn about cross-cultural awareness and diversity and inclusion, including recognizing our own biases. Part of our extensive training checklist covers policy and procedure for nondiscrimination, LEP, cultural responsiveness, and trauma-informed advocacy. We will discuss the evaluation of our services being adequate, partially adequate, or inadequate so that staff can think through how their services can be adequate. This training will also be provided to the HCM working in this project if funded. Support group participants will discuss trauma and the effects of trauma, recovering from trauma, and coping skills. During the case planning process, the staff which includes the HCM for RRH participants will work with survivors to identify their strengths, desires, and past experiences in fields where they can excel to support themselves and their children (if they are parents). The HCM will work with shelter staff to assure that a full range of ongoing supportive services opportunities for the survivors that are being served with RRH. Participants will have full access to ongoing supports already in place and offered new opportunities to get involved and explore self-awareness around goals, dreams, and aspirations. We will seek information from participants to gain new ideas for speakers or information on different subjects of interest such as continuing education, women working in non-traditional employment roles, grants for small businesses, financial planning, budgeting, etc. Our program has a detailed list of the services of community partners and volunteers to enhance our service and allow our participants to experience community support such as educational and support group opportunities that offer parenting classes, help to cope with past trauma, and celebrations of accomplishments. Longwood University and Hampden-Sydney College both have mentorship programs for our youth, and religious groups will offer things like spaghetti night with crafts and games-helping families to play together. STEPS is the Head Start and Early Head Start provider for this region, and survivors can apply for this service. They can also have access to that program's Conscious Discipline parenting classes and resources. This is a trauma-informed program that uses neuroscience, child development research, and psychology to teach skills for managing life tasks. It is a social-emotional learning program that teaches people how to manage their thoughts, feelings, and behaviors. The program's goal is to help people achieve their goals. It's designed to help adults improve children's lives by changing the lives of adults first. Head Start also provides subsidized and private pay childcare options for children who do not qualify for Head Start. STEPS has strong partnerships with each of the local departments of social services (LDSS), which manage the childcare subsidies in VA. They can also provide guidance on available childcare resources. We will connect our survivors to the appropriate LDSS department to apply for these services. Our partnership with Virginia Legal Aid is also active. They have a representative on our Heartland Local Planning Group for the VA BoS CoC, and our housing program already makes multiple referrals to them. We will connect our survivors with their educational resources on tenant rights, how to be a good tenant, tax

preparation, and the serious pitfalls of pay day loans. We have already referred survivors in need of legal assistance for protective orders and custody cases to them. Shelter staff are already connecting survivors to WIC resources and social services benefits such as TANF, SNAP, and Medicaid. TANF recipients are then eligible for child care subsidy and the employment services support provided by the social services department. One of those employment services is delivered by referral to our STEPS workplace supports program. STEPS staff in that program assist participants with resumes, job search, and coaching after a participant obtains employment.

4A-3h.	Applicant's Plan for Placing and Stabilizing Survivors in Permanent Housing Using Trauma-Informed, Survivor-Centered Approaches in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	

	Describe in the field below how the project(s) will:
1.	prioritize placement and stabilization of program participants;
2.	place program participants in permanent housing;
3.	place and stabilize program participants consistent with their preferences; and
4.	place and stabilize program participants consistent with their stated needs.

(limit 2,500 characters)



1.This project will allow STEPS to provide more RRH resources to survivors. Current RRH allocations are available to survivors but are not exclusively for survivors. The resources in this project will provide rental assistance for up to 12 months along with the provision of stabilization services. It will also fund a HCM to work exclusively with DV/SA survivors in this project. Survivors are sheltered at Madeline’s House initially for 30-45 days, and they will have an on-site DV/SA Case Manager to provide services during their stay and develop a housing plan. Using the survivor-centered approach prioritizes the needs, experiences, and dignity of the survivor at every stage of the process. The plan will be driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available to implement the plan.

2.Housing search options for the client will be discussed during the first week of sheltering. A referral for RRH services if appropriate will be made to the HCM to work with the survivor and shelter staff on securing permanent housing.

3.The HCM will meet with the survivor every 2 weeks to discuss information obtained from landlords on housing availability. The HCM will reach out to them to explain the program, STEPS already has a list of landlords that the HCM and the survivor can utilize. If the identified unit passes inspections, then there will be a review of the lease and determination of a move-in date. STEPS will assist with utility deposits and arrearages to assure that these services are in the survivor’s name at move-in. The plan will be driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available to implement the plan.

4.After permanent housing is obtained, then bi-weekly follow-ups with the survivor will occur. The HCM will work on goals with the survivor that will promote the survivor’s recovery, reduce the risk of further harm, help the survivor regain control over their life, all while making sure their rights are at the forefront of all actions and services offered such as educational classes/trainings on employment matters, financial empowerment, and how to be a good tenant, etc. The HCM will also assist the survivor in goal setting, job searches, and staying on budget. The plan will be driven by the survivor in accordance with the assessment of their needs, housing preferences, and the resources available.

4A-3i.	Applicant’s Plan for Administering Trauma-Informed, Survivor-Centered Practices in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(e)	

	Describe in the field below examples of how the new project(s) will:
1.	establish and maintain an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant and staff interactions are based on equality, and minimize power differentials;
2.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
3.	emphasize program participants’ strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
4.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
5.	provide a variety of opportunities for program participants’ connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
6.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

**(limit 5,000 characters)**

1. While STEPS' DV/SA program is relatively new we have a DVS with many years of experience managing shelter and supportive services, she is very knowledgeable in working with staff to create an environment of mutual respect and equality. STEPS DVS has already utilized that knowledge in the development of our program. Since she started serving survivors for our program in late August 2023 she has provided trauma-informed survivor centered services. Our DVS is fully trained in the areas that include cultural responsiveness and inclusivity, nondiscrimination, language access, and service improvement. Madeline's House staff are required to complete a cultural sensitivity and diversity awareness course.

2. Part of our training checklist covers policy and procedure for nondiscrimination, LEP, cultural responsiveness, and trauma-informed advocacy. We will discuss the evaluation of our services being adequate, partially adequate, or inadequate. This training will also be provided to the HCM working in this project if funded. Support group participants will discuss trauma and the effects of trauma, recovering from trauma, and coping skills. During the case planning process, the staff which includes the HCM for RRH participants will work with survivors to identify their strengths, desires, and past experiences in fields where they can excel to support themselves and their children (if they are parents). The HCM will work with shelter staff to assure that a full range of ongoing supportive service opportunities are available for survivors. Participants will have full access to ongoing supports already in place and offered new opportunities to get involved and explore self-awareness around goals, dreams, and aspirations.

3. We seek information from participants to gain new ideas for speakers or information on different subjects such as continuing education, women working in non-traditional employment roles, grants for small businesses, financial planning, budgeting, etc. Our program connects survivors to educational and support group opportunities that offer parenting classes, coping with past trauma, and celebrations of accomplishments. Longwood University and Hampden-Sydney College both have mentorship programs for our youth, and religious groups will offer things like spaghetti night with crafts and games-helping families to play together.

4. Our DVS came to us fully trained in areas that include cultural responsiveness and inclusivity, nondiscrimination, language access, and service improvement. Now that we have our own sheltering services at Madeline's House all staff are required to complete a cultural sensitivity and diversity awareness course. Within these trainings, staff will learn about cross-cultural awareness and diversity and inclusion, including recognizing our own biases.

5. Our program connects survivors to educational and support group opportunities that offer parenting classes, coping with past trauma, and celebrations of accomplishments. Longwood University and Hampden-Sydney College both have mentorship programs for our youth, and religious groups will offer things like spaghetti night with crafts and games-helping families to play together. STEPS is the Head Start and Early Head Start provider for this region, and survivors can apply for this service. They can also have access to that program's Conscious Discipline parenting classes and resources. This is a trauma-informed program that uses neuroscience, child development research, and psychology to teach skills for managing life tasks. It is a social-emotional learning program that teaches people how to manage their thoughts, feelings, and behaviors. The program's goal is to help people to achieve their goals, regardless of distractions. It's designed to help adults improve children's lives by changing the lives of adults first.

6. STEPS is the Head Start and Early Head Start provider for this region. Head

Start can provide subsidized and private pay childcare options for children who do not qualify for Head Start. Survivors can also have access to that program's Conscious Discipline parenting classes and resources. This is a trauma-informed program that uses neuroscience, child development research, and psychology to teach skills for managing life tasks. STEPS has strong partnerships with each of the local departments of social services (LDSS), which manage the childcare subsidies in VA. They can also provide guidance on available childcare resources. We will connect our survivors to the appropriate LDSS department to apply for these services. Our partnership with VA Legal Aid is also active. They have a representative on our Heartland LPG for the VA BoS CoC, and our housing program already makes multiple referrals to them. We will connect our survivors with their educational resources on tenant rights, how to be a good tenant, tax preparation, and the serious pitfalls of pay day loans.

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

**(limit 2,500 characters)**

1. Given the newness of the program, the involvement of survivors in policy and program development, operations, and evaluation is still under development. The Director of Victim Services, the Services Coordinator, and one of our Case Managers are all survivors of domestic violence and/or sexual violence and homelessness. These life experiences have brought them all to the table of seeking and providing best practices for serving these populations. We plan to host quarterly conversations with participants who have transitioned from shelter to stable housing. These meetings will be information seeking about the services received and feedback opportunities.

2. We plan to host quarterly conversations with participants who have transitioned from shelter to stable housing. These meetings will be information seeking about the services received and feedback opportunities. We will offer a way for participants to remain anonymous and for participants who are eager to be heard, they will have a platform to speak and offer opportunities for changes. STEPS also has a very diversified Board of Directors from all walks of life. As a community action agency, we have a tripartite Board that includes members from the public sector, private sector, and representing individuals in poverty. The Board's role is to promote community participation in reducing poverty, and they are responsible for developing, planning, implementing, and evaluating our programs. We plan to work with our Board to identify those with life experience in domestic and sexual violence as well as homelessness to assist us in the development of policy, operations, and evaluation. The Board also has an active evaluation committee that reviews the outcomes of the surveys that are completed by our survivors, as well as participants in all our other programs. This will allow for ongoing input from a large group of survivors to come directly to the Board and staff, who can identify any needed improvements to our DV/SA services.

## 4B. Attachments Screen For All Application Questions

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

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
  - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
  - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1D-10a. Lived Experience Support Letter	Yes	1D-10a. Lived Exp...	10/24/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/23/2024
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	10/23/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	10/23/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/24/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/23/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/23/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes	1E-5d. Notificati...	10/28/2024

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	Competition Report	10/23/2024
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No	HUD 2991 Forms	10/24/2024

## Attachment Details

Document Description:

## Attachment Details

Document Description:

## Attachment Details

Document Description: 1D-10a. Lived Experience Support Letter

## Attachment Details

Document Description: Housing First Evaluation

## Attachment Details

Document Description: Local Competition Scoring Tool

## Attachment Details

**Document Description:** Scored Forms for One Project

## **Attachment Details**

**Document Description:** Notification of Projects Rejected- Reduced

## **Attachment Details**

**Document Description:** Notification of Projects Accepted

## **Attachment Details**

**Document Description:** Local Competition Selection Results

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** 1E-5d. Notification of CoC-Approved Consolidated Application



## **Attachment Details**

**Document Description:** Competition Report

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** HUD 2991 Forms

## Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/17/2024
1B. Inclusive Structure	10/24/2024
1C. Coordination and Engagement	10/24/2024
1D. Coordination and Engagement Cont'd	10/24/2024
1E. Project Review/Ranking	10/28/2024
2A. HMIS Implementation	10/24/2024
2B. Point-in-Time (PIT) Count	10/24/2024
2C. System Performance	10/24/2024
3A. Coordination with Housing and Healthcare	10/24/2024
3B. Rehabilitation/New Construction Costs	10/24/2024
3C. Serving Homeless Under Other Federal Statutes	10/24/2024

<b>4A. DV Bonus Project Applicants</b>	10/28/2024
<b>4B. Attachments Screen</b>	Please Complete
<b>Submission Summary</b>	No Input Required

## Valley Community Services Board, Housing First Evaluation:

Housing First is a proven approach, applicable across all elements of systems for ending homelessness, in which people experiencing homelessness are connected to permanent housing swiftly and with few to no treatment preconditions, behavioral contingencies, or other barriers. It is based on overwhelming evidence that people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate level of services. Study after study has shown that Housing First yields higher housing retention rates, drives significant reductions in the use of costly crisis services and institutions, and helps people achieve better health and social outcomes.

This checklist was designed to help you make a quick assessment of whether and to what degree housing programs — and entire systems — are employing a Housing First approach. Robust tools and instruments are available elsewhere to quantitatively measure program quality and fidelity to Housing First. This tool is not meant to take the place of those more rigorous assessments, but is intended to help Continuums of Care, individual housing and services providers, funders, and other stakeholders to communicate about, and quickly assess, alignment with key Housing First approaches.

### Core Elements of Housing First at the Program/Project Level

For your homelessness service system to work the most efficiently and effectively, individual programs must embrace a Housing First approach. This portion of the checklist can help you assess the extent to which your local programs are implementing Housing First. You can use this tool for trainings or planning sessions, during a site visit or program audit, as a guide when reviewing funding applications, or for many other uses.

- Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions.
- Programs or projects do everything possible not to reject an individual or family on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of “housing readiness.”
- People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy, and building and apartment units include special physical features that accommodate disabilities.
- Programs or projects that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere.
- Housing and service goals and plans are highly tenant-driven.
- Supportive services emphasize engagement and problem-solving over therapeutic goals.
- Participation in services or compliance with service plans are not conditions of tenancy, but are reviewed with tenants and regularly offered as a resource to tenants.
- Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants’ lives. Tenants are engaged in non-judgmental communication

regarding drug and alcohol use and are offered education regarding how to avoid risky behaviors and engage in safer practices.

Substance use in and of itself, without other lease violations, is not considered a reason for eviction.

Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.

Every effort is made to provide a tenant the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided.

Title: Program Manager

Date: 9/5/2024

Signature: *Dr Darl Wilburn*

Title: Community Based Services Manager

Date: 9/5/2024

Signature:   
-0ABEC6D870D64FC...



o Agency name and contact information

o Project name

o Specific reason for appeal

- Applicant should note a clear explanation of the grievance with the grant application or decision-making process in their appeal.
- The Ranking Committee will review all appeals and make final decisions on October 11th , 2024 via email vote.
- Applicants will be notified in writing of the appeal outcome not later than October 16th , 2024.

**VA-521 Virginia Balance of State FY 2024 CoC Program Competition Draft Priority Listing**

Tier 1 amount available \$1,570,979		Tier 2 amount available \$2,606,693		DV Bonus \$922,366	
Tier 1/2	Ranking	Project Name	Request	Project Type	New/Renewal
Tier 1	1	BOS Coordinated Entry FY 2024	\$121,206	SSO-CE	Renewal
	2	HMIS FY2024	\$141,301	HMIS	Renewal
	3	NRCA BOS CoC RRH Renewal application	\$100,000	RRH	Renewal
	4	Heartland LPG/ STEPS RRH	\$417,704	RRH	New
	5	VCSB PSH FY24 Renewal	\$244,748	PSH	Renewal
	6	Foothills PSH Renewal FY24	\$279,192	PSH	Renewal
	DV7	Heartland LPG/ STEPS RRH DV Bonus	\$435,434	RRH	New
	8	VCSB RRH FY2024 Renewal	\$114,420	RRH	Renewal
	9	Crater PSH 2024	\$152,408	PSH	Renewal
Tier 2	9	Crater PSH 2024	\$220,273	PSH	Renewal
	10	DV Bonus Renewal 2024	\$190,168	RRH	Renewal
	11	NDC RRH_DV Bonus Renewal	\$199,360	RRH	Renewal
	<b>YHDP</b>				
	<b>YHDP</b>	St. Joseph's Villa	YHDP Mobile Navigation and Diversion Renewal Project FY24	SSO	\$228,533
	<b>YHDP</b>	St. Joseph's Villa	YHDP TH/RRH Renewal Project FY24	TH-RRH	\$503,543
				<b>YHDP Total</b>	<b>\$732,076</b>

YHDP is included in this, but it is a non-competitive renewal.

Please reach out if you have any questions or concerns around this.

Best,

**Breanna Green** (*pronouns: she, her, hers* – [What's this?](#))

Virginia Balance of State Continuum of Care Program Administrator, Homeless and Special Needs Housing

Department of Housing and Community Development (DHCD)

(804) 316-2831

[Breanna.green@dhcd.virginia.gov](mailto:Breanna.green@dhcd.virginia.gov)

*DHCD's Homeless and Special Needs Housing Unit works to prevent and end homelessness in Virginia. If you or someone you know is experiencing a housing crisis, please contact your local housing crisis response system using this [interactive map](#) or [this directory](#).*





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## Notification of CoC Approved Consolidated Application

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**From** Green, Breanna (DHCD) <Breanna.Green@dhcd.virginia.gov>

**Date** Mon 10/28/2024 11:40 AM

**To** apress <apress@esvaplan.org>; russwilliams <russwilliams@a-npdc.org>; Charmain Horton (chorton@escsb.org) <chorton@escsb.org>; Jen Hope (jhope@a-npdc.org) <jhope@a-npdc.org>; Chlan, Katie <kchlan@sjvmail.net>; Schoelles, Katelyn <kschoelles@sjvmail.net>; Betty Segal <browe@peopleinc.net>; rwareham <rwareham@rrregion.org>; Patrick Mauney <plmauney@rrregion.org>; Shawn Rozier <srozier@steps-inc.org>; Jordan Stidham <jstidham@wythehope.org>; Marybeth <director@family-crisis.org>; Angie Alley <aalley@bayaging.org>; Casey Edmonds <cedmonds@nrca.org>; nrfamilyshelter <nrfamilyshelter@gmail.com>; Kim Carson <kcarson@tricityva.org>; Petrina Carter (pcarter@tricityva.org) <pcarter@tricityva.org>; Lydia Campbell <lcampbell@vcsb.org>; Craig McCroskey <craig@unitedwayofhcm.org>; Amy Barts <abarts@drhava.com>

**Cc** Wilburn, Darl (DHCD) <Darl.Wilburn@dhcd.virginia.gov>

Good morning all,

We want to thank you all for your quick votes to approve the Consolidated Application (CA) to be submitted on behalf of the Balance of State.

We have received enough approval for submission of the CA, and we will be submitting and posting on the website here shortly. We will notify you all when it is submitted and posted.

Please let us know if you have any questions or concerns, thank you all for turning this around so quickly. We appreciate you!

Best,

**Breanna Green** (*pronouns: she, her, hers* – [What's this?](#))

Virginia Balance of State Continuum of Care Program Administrator, Homeless and Special Needs Housing

Department of Housing and Community Development (DHCD)

(804) 316-2831

[Breanna.green@dhcd.virginia.gov](mailto:Breanna.green@dhcd.virginia.gov)

*DHCD's Homeless and Special Needs Housing Unit works to prevent and end homelessness in Virginia. If you or someone you know is experiencing a housing crisis, please contact your local housing crisis response system using this [interactive map](#) or [this directory](#).*