

Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while completing the application in e-snaps.

- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.

- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: NC-505 - Charlotte/Mecklenburg County CoC

1A-2. Collaborative Applicant Name: City of Charlotte

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Michigan Coalition Against Homelessness

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	No
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	No
Law Enforcement	Yes	No	No
Local Jail(s)	Yes	No	No
Hospital(s)	Yes	Yes	Yes
EMT/Crisis Response Team(s)	Yes	Yes	Yes
Mental Health Service Organizations	Yes	No	No
Substance Abuse Service Organizations	Yes	Yes	No
Affordable Housing Developer(s)	No	No	No
Public Housing Authorities	Yes	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	No
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	No
Youth advocates	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Veteran Service providers	Yes	Yes	Yes
Organizations that providing funding for CoC activities	Yes	Yes	Yes

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.

Meeting with stakeholders, providers and persons with lived experience, the CoC gathers information to identify gaps, improve services and advocate for resources. CoC meetings are open to the public and advertised via the Homeless Services Network and Housing Advisory Board (includes CoC funded agencies) email lists and CoC website, which reach a broad range of people. Attending meetings not connected to homeless services provides CoC staff an opportunity to give/receive feedback. The CoC governing board has a representative who is a HUD/ VASH Case Manager who uses her knowledge and expertise as she chairs the CoC committee and works with our local initiative to end Veteran homelessness. Safe Alliance, a DV Shelter, is active in the CoC and precipitated the Coordinated Entry staff to provide assessments at the DV shelter. The residential Director at Safe Alliance chairs Coordination of Services and Housing Committee for agencies, and has a broad knowledge of the homeless community.

1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
The Relatives	Yes	Yes	No
Another Choice for Black Children	Yes	Yes	No
Time Out Youth	No	No	No
Salvation Army	No	Yes	No
Mecklenburg County LINK Services	No	No	No

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area.

Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
Safe Alliance	Yes	No
Legal Services of Southern Piedmont	No	No
Mecklenburg County Community Support Services	Yes	Yes
Legal Aid of North Carolina	No	No

1B-2. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for new projects in 2016. (limit 1000 characters)

The CoC both facilitate and join meetings to announce that it is open to proposals from the community. Stakeholders, service providers and persons with lived experience discuss and identify gaps and ways to enhance services. A funding review committee makes recommendations based on these discussions to include new projects based on needs and gaps. Meetings are open to the community and are advertised via the Homeless Services Network and Housing Advisory Board (includes CoC funded agencies) email lists and on the CoC website. New agencies who attend are added to email lists. During the open local competition, meeting notifications, local application information and deadlines are sent to these emails lists, which also direct people to the CoC lead agency website (<http://charmeck.org/city/charlotte/nbs>). The CoC lead agency also responds to calls from agencies not actively involved in the CoC about available funding opportunities and connects them to CoC meetings and providers.

1B-3. How often does the CoC invite new members to join the CoC through a publicly available invitation? Bi-Monthly

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Does the CoC coordinate with Federal, State, Local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	No
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

1C-2. The McKinney-Vento Act, requires CoC's to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program Interim rule at 24 CFR 578.7 (c) (4) requires the CoC to provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110 (b)(2) requires the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for the information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	2
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	2
How many of the Con Plan jurisdictions are also ESG recipients?	2
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2

1C-2a. Based on the responses provided in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)

The CoC collaborates with 2 Consolidated plan jurisdictions. Within these, the City, County, local municipalities within the County and non-profit organizations focused on homelessness, housing and community development have developed various frameworks for collaborating on solutions for systemic housing problems for our area. As part of this process CoC members participate in public hearings and consultations. The Homeless Services Network (comprised of homeless services providers) meets monthly and is attended City staff responsible for Consolidated Plan, Annual Action Plan and CoC oversight. The City also facilitates quarterly meetings for Consolidated Plan member jurisdictions and housing nonprofits. Meetings provide another venue for ensuring activities continue to be thoroughly coordinated. One example of the effectiveness of this approach was an increase in rental assistance funding (HOME funded TBRA) due a request from CoC members during the consolidated planning process.

1C-2b. Based on the response in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities. (limit 1000 characters)

City entitlement ESG funding is provided to the community through a yearly competitive RFP process. This RFP provides homeless service agencies access to ESG funding and establishes requirements for the use of the funding. The City defers to the CoC for guidance on best practices for ending and preventing homelessness and service coordination, as well as the CoC's written standards and prioritization processes. An external committee selected by the City then review applications and makes funding recommendations. To assist in this process, the CoC provides the City with local performance measures (that are established by the CoC for ESG projects) and other information including PIT data, HIC data for bed utilization, HMIS data for quality and outcomes on HUD performance measures.

1C-3. Describe how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)

The CoC coordinates with domestic violence providers to ensure that Coordinated Entry (CE) addresses the safety needs of households fleeing all forms of DV. To accomplish this, CE staff are trained on privacy, confidentiality,

and safety planning. Training is provided by local victim service providers. Households fleeing DV present to CE and are connected to victim service providers through a direct, confidential referral. The data collection process is consistent with the VAWA. Staff is trained to review information about accessing domestic violence services with households. If a homeless household presents to a victim service provider, the provider connects the household to CE staff. CE staff is currently completing CE on-site at the DV shelter once per month to provide referrals into appropriate programs, upholding client choice. This coordination of service ensures that the safety and security of victims is upheld by providing a secure location for referral services to take place.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Charlotte Housing Authority	21.00%	Yes-Both

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

1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

The KEY is a program where affordable housing developments set aside 10% of units for persons with disabling conditions. Transition to Community Living Initiative is part of a DOJ settlement to ensure the mentally ill have living options beyond adult care homes. It provides rental subsidy, tenancy support & services. Our chronic homeless registry is used to target units with both of these projects. MeckFUSE is a County-funded PSH program targeting people with behavioral disorders who have frequent incarcerations. A Way Home Endowment provides housing subsidies & support services for approx. 103 homeless or at-risk families annually. Carolinas Care Partnerships administers HOPWA funds in the CoC. The Salvation Army and Men's Shelter use HOME/TBRA dollars for RRH with HUD homeless categories 1&4. Supportive Housing

Communities uses HOME/ TBRA to house chronic hshlds. CoC works with tax-credit developers to prioritize housing for those exiting homelessness.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 1000 characters)	
Members of CoC oversight committee participate in the Criminal Justice Advisory group, which helps homeless people avoid the justice system. This group created an initiative between the Charlotte-Mecklenburg Police Department (CMPD), outreach team, and shelters to address the criminalization of homelessness. As a result, CMPD hired a Licensed Social Worker to engage homeless individuals and connect them to trauma support and to complete an outreach referral to prevent CMPD from making an arrest or issuing a citation. The UMC outreach workers also assist individuals in accessing homeless services and housing to work to get them off the street and keep them out of jail. As part of the CMPD police training process, new officers spend time in the shelters to learn from staff and clients about homeless services. Since the initiative began, 58 people have been diverted from arrest or citation. MeckFuse houses 45 formerly homeless persons who were frequent users of jail and other services.	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Select the system(s) of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2. Select the system(s) of care within the CoC's geographic area with which the CoC actively coordinates with to ensure institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons

**discharged are not discharged into homelessness.
(limit 1000 characters)**

All boxes were checked in 1D-2

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.

**1E-1. Explain how the CoC's coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.
(limit 1000 characters)**

For HUD's homeless categories 1, 2 & 4, Coordinated Entry (CE) identifies & connects individuals/families to available shelter and housing. To ensure accessibility, five assessors are located at three centrally located sites, plus street outreach staff & shelter staff does CE after hours. The CE Supervisor speaks Spanish. CE is done on-site at the DV shelter monthly. CE staff are trained to use a standardized assessment that measures acuity of need. Clients who need shelter are given immediate referrals. Chronically homeless individuals & homeless families are prioritized for housing with the VI SPDAT. A by-name registry is kept to ensure the next most vulnerable person or family is offered the next available housing slot accounting for client choice. Rejections from providers must be explained to the CE Oversight Committee. Communication with law enforcement, mental health organizations and educational institutions are key to providing a broad array of entry into CE.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If there are other organizations or persons who participate but are not on this list, enter the information in the blank text box, click "Save" at the bottom of

the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
United Way of Central Carolinas	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Veterans Administration	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Charlotte-Mecklenburg School Representatives	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2016 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	12
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	1
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	11
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

Performance outcomes from APR reports/HMIS:	
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>

Monitoring criteria:	
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>

Need for specialized population services:

Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority. (limit 1000 characters)

The CoC's review, ranking and selection process encouraged projects to lower barriers serving persons with the highest needs and vulnerabilities and accounted for the higher difficulty in serving these populations. The CoC factored a project's population into the review, ranking and selection process through multiple ways including evaluation of project performance outcomes, data quality and & fiscal responsibility were weighted and project population information was required. The CoC prioritized projects utilized a Housing First approach. Any project not using this approach were penalized. The following populations were prioritized: chronically homeless, Veterans, families, youth, persons experiencing domestic violence and LGBTQ persons. Community data was utilized in determining project priority. For example, a new Coordinated Entry project was ranked higher as this is the front door to our system and more resources are needed for CE to be more efficient and effective.

1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. Evidence of the public posting must be attached. (limit 750 characters)

The CoC utilized email distribution to publicly announce our local application process including selection criteria. Email notifications were sent to three list serves: CoC funded agencies, Homeless Services Network, and Housing Advisory Board. July 8, 2016 notification was sent that application process had begun and asked for interested projects (new and/or renewal) to submit a Letter of Interest. July 19, 2016 eligible projects were notified that the local project competition was open. This notification, provided projects: CoC Statement about competition, New Project Application Scorecard, Renewal Project Application Scorecard and Information Sheet on the scorecard. All notifications were posted at <http://charmack.org/city/charlotte/nbs>.

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached). 09/12/2016

1F-5. Did the CoC use the reallocation process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.) Yes

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 08/30/2016

1F-6. In the Annual Renewal Demand (ARD) is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW? Yes

1G. Continuum of Care (CoC) Addressing Project Capacity

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

The COC has developed staff capacity (HMIS System Administrator [SA]) to provide site visits to monitor HMIS compliance and adherence to HUD data standards. SA runs system-wide reports monthly to target areas for data quality improvement. COC emphasizes bed/unit utilization, increased/maintained income and exits to permanent housing to assess recipient performance on the COC scorecard which is used to rank new and renewal projects. SA works closely with providers to complete annual AHAR, PIT reports and system performance measures that prompts closer monitoring of individual recipient performance. The SA facilitates bi-annual training for Agency Administrators, periodic user trainings and conference calls as a way to promote good data quality at the agency level. The SA presents system-wide performance measures at CoC meetings to inform providers and solicit feedback. The Coordinated Entry Oversight Committee reviews HMIS agency participation and housing outcomes.

1G-2. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have a Governance Charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the Charter itself or by reference to a separate document like an MOU/MOA? In all cases, the CoC's Governance Charter must be attached to receive credit, In addition, if applicable, any separate document, like an MOU/MOA, must also be attached to receive credit. Yes

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA. Governace Charter page 1; MOU pages 1-3

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application. Yes

2A-3. Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organization (CHOs)? Yes

2A-4. What is the name of the HMIS software ServicePoint

used by the CoC (e.g., ABC Software)?

2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)? Bowman System (subsidiary of Mediware Information Systems)

2B. Homeless Management Information System (HMIS) Funding Sources

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Select the HMIS implementation Single CoC coverage area:

*** 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.**

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$63,000
ESG	\$42,027
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$105,027

2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$0
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$0
Other Federal	\$0
Other Federal - Total Amount	\$0

2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$56,204
State	\$0
State and Local - Total Amount	\$56,204

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$0
Private - Total Amount	\$0

2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	\$83,000
Other - Total Amount	\$83,000

2B-2.6 Total Budget for Operating Year	\$244,231
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2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 05/01/2016

2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells in that project type.

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	1,075	120	915	95.81%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	601	0	546	90.85%
Rapid Re-Housing (RRH) beds	958	0	958	100.00%
Permanent Supportive Housing (PSH) beds	1,097	0	752	68.55%
Other Permanent Housing (OPH) beds	0	0	0	

2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)

The bed coverage rate is below 85% for Permanent Supportive Housing. A total of 345 VASH beds not entered into HMIS made up 31.5% of the total PSH beds reported. Excluding the VASH beds would result in an 100% bed coverage in HMIS. The CoC Lead and HMIS Administrator will continue to work with our local Veteran’s Administration to do the following: Meet with local VA Administration to discuss entering VASH data into HMIS, create detailed participation agreement, create sharing agreement, train staff to complete data entry into HMIS. Capturing data for this population will result in a clearer picture of services provided in the community.

2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be

attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.

VA Grant per diem (VA GPD):	<input type="checkbox"/>
VASH:	<input checked="" type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input type="checkbox"/>

2C-4. How often does the CoC review or assess its HMIS bed coverage? Quarterly

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" within the last 10 days of January 2016.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	2%	6%
3.3 Date of birth	5%	0%
3.4 Race	5%	0%
3.5 Ethnicity	6%	0%
3.6 Gender	4%	0%
3.7 Veteran status	2%	0%
3.8 Disabling condition	1%	1%
3.9 Residence prior to project entry	2%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	6%	0%
3.15 Relationship to Head of Household	6%	0%
3.16 Client Location	1%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	5%	0%

2D-2. Identify which of the following reports your HMIS generates. Select all that apply:

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

None	<input type="checkbox"/>
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2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR? 12

2D-4. How frequently does the CoC review data quality in the HMIS? Monthly

2D-5. Select from the dropdown to indicate if standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both. Both Project and CoC

2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input checked="" type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2D-6a. If any of the Federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the Federal partner program and the anticipated start date. (limit 750 characters)

All federal partners listed are currently using HMIS.

2E. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. Accurate, high quality data is vital to inform Congress' funding decisions.

- 2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count?** Yes
- 2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy)** 01/27/2016
- 2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, was an exception granted by HUD?** Not Applicable
- 2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: (mm/dd/yyyy)** 05/01/2016

2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input checked="" type="checkbox"/>
Interview of sheltered persons:	<input type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology. (limit 1000 characters)

The CoC's sheltered PIT count methodology consisted of a complete census count in HMIS and extrapolation when necessary to estimate a small portion of subpopulation data for sheltered homeless persons. Prior to the PIT Count, the

System Administrator used video meetings to provide training to CoC providers on PIT Count data elements. As required, DV agencies utilized a comparable database and sent de-identified census data to the HMIS System Administrator that was then entered into HMIS utilizing the approved methodology for 2016. The HMIS System Administrator worked with each provider after PIT count to ensure data was complete, accurate, and met PIT count sheltered data standards. The final HMIS data set was reviewed by the CoC's HMIS working group. The CoC selected this methodology in order to enhance accuracy, strengthen data quality and reduce the risk of duplication and allows us to target our homeless populations to enable us to further reduce homelessness within our area.

2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the PIT count). (limit 1000 characters)

No changes were made in methodology from 2015 to 2016.

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? Yes

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)

Two transitional housing programs in the 2015 count were removed from CoC provider coverage in the 2016 sheltered count, which resulted in decrease by 120 beds. Two additional rapid re-housing providers were added to the 2016 coverage, accounting for an increase of 232 rapid re-housing beds. Three additional Permanent Supportive Housing projects were added in 2016, increasing the coverage by 122 beds.

2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	<input checked="" type="checkbox"/>
Follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input type="checkbox"/>
	<input type="checkbox"/>

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g. change in sampling or extrapolation methods). (limit 1000 characters)

In order to improve data quality, an HMIS System Administrator was hired in 2015 to oversee the data entry and cleaning process of 2016 PIT Count data. For the first time, an HMIS System Administrator used video meetings to train providers on data collection for the PIT and HIC counts prior to the night of the PIT. In addition, the HMIS System Administrator followed up individually with each provider agency after the PIT count in order to verify the accuracy and completeness of all provider data sets contained within the HMIS reports. In addition, the final 2016 PIT Count data set was reviewed and approved by the HMIS working group, which represented a new and added level of review for data quality.

2H. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days in January 2015.

2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count? Yes

2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy): 01/27/2016

2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2016, or most recent count, was an exception granted by HUD? Not Applicable

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 05/01/2016

2I. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:

Night of the count - complete census:	<input checked="" type="checkbox"/>
Night of the count - known locations:	<input type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

2I-2. Provide a brief description of your CoC's unsheltered PIT count methodology and describe why your CoC selected this unsheltered PIT count methodology. (limit 1000 characters)

The CoC's unsheltered PIT count methodology consisted of a complete census count with service-based counts when necessary the day after to enumerate unsheltered households missed during the census. This methodology was selected in order to collect complete and accurate information on all unsheltered persons within the CoC and to improve data quality. Prior to the PIT, volunteers received training about the PIT Count and survey methodology. The count is managed through a system command structure comprised of 27 teams with 150 volunteers each headed by a captain. Each team was assigned to a specific zone to ensure maximum, strategic coverage across the full CoC and to minimize risk of duplication. Prior to and on the night of the PIT, outreach staff, police, youth providers, the McKinney Vento liaison for the schools, and chronic homelessness service providers participated in planning, recruitment and execution of the count in order to ensure all geographic areas were covered.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)

There was not a change in methodology from 2015 to 2016.

2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count? Yes

2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)

n/a

2J. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input checked="" type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey questions:	<input checked="" type="checkbox"/>
Enumerator observation:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)

For the first time in 2016, a planning group was convened in order to plan and implement the unsheltered count methodology. The planning group researched and developed a new survey tool in order to improve data quality and accuracy and to collect relevant information for local planning and policy improvement. In addition, the 2016 volunteer training was improved by engaging subject matter experts including outreach staff in the training content development and leadership. On the night of the 2016 PIT Count, volunteers were able to call in real time to designated staff persons to confirm the chronic homelessness

status of the survey respondent in HMIS. This practice strengthened the accuracy and quality of the chronic homelessness estimate on the night of the PIT Count. The CoC strengthened stakeholder engagement and improved coverage by including additional youth providers, outreach staff, persons with lived experience, and McKinney Vento liaisons in the planning process.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

* 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2,001	1,818	-183
Emergency Shelter Total	1,183	1,149	-34
Safe Haven Total	0	0	0
Transitional Housing Total	638	482	-156
Total Sheltered Count	1,821	1,631	-190
Total Unsheltered Count	180	187	7

3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	6,330
Emergency Shelter Total	5,579
Safe Haven Total	0
Transitional Housing Total	979

3A-2. Performance Measure: First Time Homeless.

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors of becoming homeless.

(limit 1000 characters)

To reduce the number of individuals/families who become homeless for the first time, the CoC has implemented a diversion assessment that is completed during Coordinated Entry (CE). CE staff utilizes options, like referrals for monetary assistance and other housing options, such as family/friends. Shelters have trained staff that work with clients to identify non shelter options. CoC partnership agencies identify risk factors of becoming homeless, including Crisis Assistance Ministry (CAM), which operates within the community and who provides utility and rental assistance. They respond promptly to eviction notices to prevent individuals/families from losing housing. CAM also works with clients to create plans to avoid financial crises in the future. Legal Aid of NC assists and educates clients on their rights as tenants and provides legal services to individuals who feel they are being wrongly evicted. These strategies assist with preventing first time homelessness in our community.

3A-3. Performance Measure: Length of Time Homeless.

Describe the CoC’s efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.

(limit 1000 characters)

The CoC uses HMIS and a by-name registry to monitor length of time homeless for chronically homeless individuals. The VISPDAT is used to identify the most vulnerable and longest term homeless families & individuals who are then prioritized for housing assistance. CoC has multiple strategies to both reduce time homeless, and ID and house those with the longest length of homelessness. These include: 12 outreach workers to identify and engage homeless individuals; \$50,000 budgeted by the County for diversion and has provided a position to help clients find alternatives to shelter; Housing inspections now have a 1-2 day turnaround; Master leasing is used when permitted; Programs seek out and engage new landlords and share housing leads; Local dollars have been designated to pay for application fees, security deposits, etc.; Via a data dashboard, our community will publish length of time homeless every 6 months. Our community has housed over 50% of 800 chronically homeless individuals.

*** 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.**

In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

**3A-4a. Exits to Permanent Housing Destinations:
Fill in the chart to indicate the extent to which projects exit program**

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participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent supportive housing.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	1,734
Of the persons in the Universe above, how many of those exited to permanent destinations?	1,132
% Successful Exits	65.28%

3A-4b. Exit To or Retention Of Permanent Housing:
 In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2014 and September 31, 2015.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	758
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	726
% Successful Retentions/Exits	95.78%

3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

Our CoC has implemented a Coordinated Entry process that assesses and scores households for PSH and rapid rehousing placement. To reduce the rates of return to homelessness, all families and individuals who are placed into housing are flagged in HMIS if they return to CE. The family is then provided with a higher level intervention such as PSH if RRH was not enough. This information is gathered and communicated as part of our community dashboard and used to inform the community about an appropriate allocation of scarce resources. RRH providers monitor the progress of clients as they are nearing the end of their time in the program. If eligible and necessary RRH providers work with PSH providers to facilitate referrals to PSH programs so that clients can go directly from RRH to PSH without returning to homelessness. A progressive engagement process is used and tracked in HMIS so that families who are not successful in one intervention can be flagged for another.

3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase

**program participants' cash income from employment and non-employment non-cash sources.
(limit 1000 characters)**

The CoC meets monthly in part to discuss and monitor progress on four main strategies to assist CoC program funded projects to increase participants' income. Strategies include 1) providing direct access to appropriate resources, 2) employing specialized staff to counsel clients, 3) leveraging skilled volunteers to coach/mentor clients, and 4) targeting referrals to employment and benefit-related agencies and governmental entities. Implementation of these strategies includes several SOAR trained staff within CoC program funded projects as well as dedicated staff and volunteers to assist with gaining meaningful employment opportunities. 87% of SSI/SSDI applications completed with the help of SOAR workers in Mecklenburg County have been approved in 2016. Strategies also include help applying for benefits such as SNAP and TANF as well as personal counseling around budgeting and helping to establish relationships with financial institutions.

**3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.
(limit 1000 characters)**

The CoC encourages collaboration and referrals to mainstream employment organizations as the primary ways to aid homeless individuals and families in increasing their income. The organizations most frequently turned to include NC Works, Vocational Rehabilitation Services, Goodwill Industries of the Southern Piedmont, Urban League of the Central Carolinas, Charlotte Area Fund, Dress for Success, and LifeSpan (disabilities). Staffing agencies are also used as a resource on a more limited basis. These organizations provide staff support and resources designed to help individuals build skills, create widespread awareness of and access to training and educational opportunities, and connect individuals to meaningful employment openings. Our CoC funds 15 PH projects. Of these projects 100% are regularly connecting participants with employment opportunities.

**3A-7. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?
(limit 1000 characters)**

CoC did not exclude specific geographic areas from the unsheltered PIT count. To identify areas for the 2016 unsheltered PIT count, CoC has one 12-member outreach team, which is eligible to serve the entire county. Having one team allows for ease of coordination and a single portal for referrals. The team has built strong referral partnerships with the two local hospital systems, Charlotte-Mecklenburg Police Department, Parks & Recreation, and MEDIC to ensure these public systems can easily connect frequent users and highly vulnerable individuals to outreach services. In addition, the team has a highly promoted online referral form, for any community member to refer an individual for outreach services. The team has regular early morning staff hours to connect with people while they are in their sleeping locations. Beyond referrals, the team also provides proactive outreach in the uptown area, which has the

highest concentration of unsheltered homelessness in our community.

3A-7a. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)? No

**3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)?
(limit 1000 characters)**

CoC did not exclude geographic areas from the 2016 PIT count.

**3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached.
(mm/dd/yyyy)** 08/12/2016

**3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data.
(limit 1500 characters)**

CoC was able to successfully submit performance measures.

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;
2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and
3. The highest needs for new and turnover units.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	257	170	-87
Sheltered Count of chronically homeless persons	146	110	-36
Unsheltered Count of chronically homeless persons	111	60	-51

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2016 compared to 2015. (limit 1000 characters)

CoC had decrease in PIT from 2015 to 2016.

3B-1.2. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC.	462	589	127

3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)

Our inventory of PSH beds designated for the chronically homeless persons increased by 127 beds from the 2015 HIC to the 2016 HIC. The increase can be contributed to our community effort in ending chronic homelessness, as well as additional beds being funded through HOPWA for individuals with HIV/AIDS.

3B-1.3. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status? Yes

3B-1.3a. If “Yes” was selected for question 3B-1.3, attach a copy of the CoC’s written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found. pages 1-8

3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? Yes

This question will not be scored.

3B-1.4a. If the response to question 3B-1.4 was “Yes” what are the

**strategies that have been implemented by the CoC to maximize current resources to meet this goal? If “No” was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017?
(limit 1000 characters)**

The CoC started a by name list with the 2015 PIT count. Teams of volunteers were deployed early morning and late night to interview each unsheltered person in the county. The police and the community were enlisted to help locate camps. All chronically homeless individuals are now tracked on a monthly basis. Everyone who is chronically homeless receives a VISPAT at Coordinated Entry and is prioritized for housing based on their vulnerability score and length of time homeless. Weekly CE meetings staff the individuals on the list for available resources. Each person is assigned a specific person to complete their application for housing placement. The 2016 PIT used a similar strategy as will 2017. Currently, there are slightly more than 300 chronically homeless persons identified in the CoC. New and creative uses of funds including RRH, Target, Key and Housing Authority relationships mentioned previously will ensure the CoC reaches the goal of ending chronic homelessness by 2017.

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

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input checked="" type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

Families are assessed and prioritized for housing. Diversion is explored first. Other strategies to ensure that families are rehoused within 30 days include CE using VI- SPDAT and supplementary questions to generate scores that prioritize the most vulnerable. The RRH providers agreed to a common application that captures info needed to match high-scoring families with housing and family preferences. A refreshed list is generated every 2 weeks. Mecklenburg Co. created a Housing Stability Fund to pay for case mgmt. needed for new RRH units. Case mgrs. assist clients to locate housing, negotiate with landlords, and maintain housing stability. The Fund requires providers to use a Housing First philosophy. The CoC was approved for HUD funds, not yet awarded, to develop a landlord consortium to increase landlord participation in housing homeless families. The CoC is running an ESG-funded two year pilot, placing families in RRH who score for PSH but may succeed with more limited supports.

3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve families in the HIC:	208	252	44

3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, gender or disability when entering shelter or housing? (check all strategies that apply)

CoC policies and procedures prohibit involuntary family separation:	<input type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input type="checkbox"/>
Local Funds awarded to Salvation Army to provide hotel vouchers for intact families seeking shelter	<input checked="" type="checkbox"/>
CoC has a minimum of 3 emergency shelter units set aside for fathers with children	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	256	226	-30
Sheltered Count of homeless households with children:	256	225	-31
Unsheltered Count of homeless households with children:	0	1	1

3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

CoC had a decrease in number of homeless households with children from 2015 to 2016.

3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth ages 18-24, including the following.

Human trafficking and other forms of exploitation?	Yes
LGBTQ youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes
Unaccompanied minors/youth below the age of 18?	Yes

3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>
Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input type="checkbox"/>
	<input type="checkbox"/>

N/A:	<input type="checkbox"/>
------	--------------------------

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

Vulnerability to victimization:	<input type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 - September 30, 2015).

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2015)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	578	630	52

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why. (limit 1000 characters)

2015 number is higher than 2014

3B-2.9. Compare funding for youth homelessness in the CoC's geographic

area in CY 2016 and CY 2017.

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$3,869,295.00	\$3,780,000.00	(\$89,295.00)
CoC Program funding for youth homelessness dedicated projects:	\$89,295.00	\$0.00	(\$89,295.00)
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$3,780,000.00	\$3,780,000.00	\$0.00

3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	10
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	6
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	6

3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts. (limit 1000 characters)

McKinney-Vento (MKV) liaisons and the Charlotte-Mecklenburg School District (CMS) collaborate with the Homeless Services Network (HSN) and Continuum of Care (CoC) agencies to assure that educational issues affecting homeless children and families are addressed. Agencies refer families to the CMS MKV liaisons to assist with education goals and school enrollment. All CMS schools have a MKV liaison to support homeless families who work closely with the Salvation Army shelter staff to identify eligible children and to assure their school participation. The Salvation Army also has a MOU in place with an early childhood program, Head Start, so that this program is now offered onsite at the shelter. Other agencies that address homelessness among youth and families are participants on the CoC include The Relatives, Charlotte Family Housing, A Childs Place, Supportive Housing Communities and Safe Alliance.

3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. (limit 2000 characters)

The CoC provides guidelines (attached) on how all CoC and ESG funded projects should inquire at intake about the educational status of each child

(ages 6-17) that resides in the household to ensure they are enrolled and attending school. Projects connect families to the assigned MKV Liaison at the school the child attends to ensure that the family has transportation (if needed) and to ensure that the child is connected to any needed educational assessments and/or services. Shelters that serve youth and families have established partnerships with the school district to ensure children experiencing homelessness get the services they need in order to continue with their education. Shelters also work to connect families to A Child's Place, a local program that works with families to assist with connecting to educational resources.

**3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others?
(limit 1000 characters)**

Through a partnership with Mecklenburg County Department of Social Services, families with children residing in emergency shelters are prioritized for childcare services. Vouchers are provided by Childcare Resources for working moms or those in training programs. COC agencies that have benefited include Charlotte Family Housing, Safe Alliance Domestic Violence Shelter and The Salvation Army Center of Hope Shelter. This year, the COC has expanded a partnership with the Head Start program and will prioritize homeless families living in all three shelters. The age group served by Head Start has expanded to serve children ages 6 months to 4 years. In addition to this expanded partnership, Head Start has collaborated with The Salvation Army Center of Hope to provide a Head Start classroom on site. Other partnerships include onsite information and orientation sessions for children eligible for CMS's Pre-K programs.

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	185	149	-36
Sheltered count of homeless veterans:	160	124	-36
Unsheltered count of homeless veterans:	25	25	0

3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

Number of veterans decrease from 2015 to 2016.

3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)

CoC identifies homeless veterans through multiple venues, including Coordinated Entry (CE), street and VA outreach, Mecklenburg County Veterans Services, PIT count, and the NC Serves database. The goal is for all identified

Veterans to complete CE. For Veterans that do a CE, they are referred directly to SSVF or HUD-VASH for housing options. CoC maintains a current by-name registry of Veterans that is updated every 14 days. Veterans who are unsheltered or sheltered who have not gone through CE are added to the registry. New names on the registry are sent to the VA to determine eligibility for VA benefits. Veterans who are ineligible for SSVF or HUD-VASH are prioritized for other available housing slots in the community (for example, HOME/TBRA).

3B-3.3. Compare the total number of homeless Veterans in the CoC and the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2016 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	157	124	-21.02%
Unsheltered Count of homeless veterans:	11	25	127.27%

3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016. Yes

This question will not be scored.

3B-3.4a. If "Yes", what are the strategies being used to maximize your current resources to meet this goal? If "No" what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2016? (limit 1000 characters)

Our community continues to identify all homeless veterans, both sheltered and unsheltered, through street outreach efforts. These veterans are placed on a by-name registry which is used to create housing plans for each veteran. The shelters in the community provide immediate low-barrier shelter for any veteran who wants it. We have a close partnership with our GPD provider who is working with us on strategic plans which will limit service-intensive transitional housing. We are working with the National League of Cities to hold a major event for landlord engagement, which will help us continue to engage landlords in ending veteran homelessness. We continue to apply for grants from community funders to supplement a flexible funding account which helps veterans reduce housing barriers. Most recently a PSH project expanded by 35 beds in which 10 units were set aside for Veterans.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and program changes that can affect homeless clients? Yes

4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	13
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	13
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)

CoC collaborates with organizations to facilitate health insurance enrollment. NC has implemented an e-PASS system to allow people to apply for Medicaid, NC Health Choice (CHIP), and Food and Nutrition Services. Assistance in completing applications for Medicaid is provided by the Department of Social Services, social workers associated with hospitals and outpatient clinics, and homeless assistance programs. Legal Services of the Southern Piedmont and Care Ring provide ACA Navigators in locations, such as health clinics, libraries, YMCA, and International House. There are 11 ACA Navigators with agencies in

the CoC, including health clinics, Regional AIDS Interfaith Network, and Crisis Assistance Ministry. DSS educate people about ACA; prisons give out ACA information at discharge. Success has been achieved by linking people with local SOAR specialists to apply for Social Security benefits and obtaining Medicaid or Medicare.

4A-4. What are the primary ways the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available to them?

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
Case management assist with linkage to health care providers	<input checked="" type="checkbox"/>
Integrated care teams on site at PSH units	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4B-1. Based on the CoCs FY 2016 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH), and SSO (non-Coordinated Entry) projects in the CoC are low barrier?

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	15
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	14
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	93%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	15
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	14
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	93%

4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

Direct outreach and marketing:	<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">X</div>
--------------------------------	---

Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
Spanish Speaking Coordinated Entry workers	<input checked="" type="checkbox"/>
CoC lead entity reaches out to agencies that serve special populations to connect to services and funding (for example, how to connect LGBTQ to CE and housing subsidies)	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	307	355	48

4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135?

(limit 1000 characters)

N/A

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

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons

defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

n/a

4B-8. Has the project been affected by a major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition? No

4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)

n/a

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD since the submission of the FY 2015 application? This response does not affect the scoring of this application. Yes

4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.

This response does not affect the scoring of this application.

CoC Governance:	<input checked="" type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-9b. Indicate the type(s) of Technical Assistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance

4C. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	NC505 2016 Consol...	09/14/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	NC505 CoC Consoli...	09/14/2016
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	NC505 CoC Rating ...	09/14/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	NC505 CoC Rating ...	09/14/2016
05. CoCs Process for Reallocating	Yes	NC505 CoC Process...	09/14/2016
06. CoC's Governance Charter	Yes	NC505 Governance ...	09/13/2016
07. HMIS Policy and Procedures Manual	Yes	NC505 HMIS Policy...	09/13/2016
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	NC505 PHA Adminis...	09/13/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	NC505 CoC HMIS MOU	09/13/2016
11. CoC Written Standards for Order of Priority	No	NC505 CoC Written...	09/13/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	NC505 CoC HDX Sys...	09/13/2016
14. Other	No	NC05 CoC Educatio...	09/14/2016
15. Other	No	NC505 Information...	09/14/2016

Attachment Details

Document Description: NC505 2016 Consolidated Application Evidence of communication to rejected participants

Attachment Details

Document Description: NC505 CoC Consolidated Application Public Posting Evidence

Attachment Details

Document Description: NC505 CoC Rating and Review Procedure

Attachment Details

Document Description: NC505 CoC Rating and Review Procedure Public Posting Evidence

Attachment Details

Document Description: NC505 CoC Process for Reallocating

Attachment Details

Document Description: NC505 Governance Charter

Attachment Details

Document Description: NC505 HMIS Policy and Procedures Manual

Attachment Details

Document Description:

Attachment Details

Document Description: NC505 PHA Administration Plan

Attachment Details

Document Description: NC505 CoC HMIS MOU

Attachment Details

Document Description: NC505 CoC Written Standards for Order of Priority

Attachment Details

Document Description:

Attachment Details

Document Description: NC505 CoC HDX System Performance Measures

Attachment Details

Document Description: NC05 CoC Educational Access to Education Guideline

Attachment Details

Document Description: NC505 Information on Criminal Justice System working with homeless service providers

Submission Summary

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

Page	Last Updated
1A. Identification	09/09/2016
1B. CoC Engagement	09/14/2016
1C. Coordination	09/14/2016
FY2016 CoC Application	Page 61
	09/14/2016

1D. CoC Discharge Planning	09/11/2016
1E. Coordinated Assessment	09/14/2016
1F. Project Review	09/14/2016
1G. Addressing Project Capacity	09/14/2016
2A. HMIS Implementation	09/14/2016
2B. HMIS Funding Sources	09/13/2016
2C. HMIS Beds	09/13/2016
2D. HMIS Data Quality	09/13/2016
2E. Sheltered PIT	09/13/2016
2F. Sheltered Data - Methods	09/13/2016
2G. Sheltered Data - Quality	09/13/2016
2H. Unsheltered PIT	09/13/2016
2I. Unsheltered Data - Methods	09/13/2016
2J. Unsheltered Data - Quality	09/13/2016
3A. System Performance	09/13/2016
3B. Objective 1	09/14/2016
3B. Objective 2	09/14/2016
3B. Objective 3	09/14/2016
4A. Benefits	09/13/2016
4B. Additional Policies	09/13/2016
4C. Attachments	09/14/2016
Submission Summary	No Input Required

Pfeiffer, Rebecca

From: Pfeiffer, Rebecca
Sent: Tuesday, August 30, 2016 6:38 PM
To: Dewitt, Nicole (nicoled@communitylinknc.org)
Subject: CoC application notification
Attachments: FY2016 Char Meck CoC Project Application Recommendations and Ranking.pdf

Nicole,

Below is information regarding the project applications submitted to the CoC for funding consideration:

- 1) The following Community Link project application will be included in the FY2016 Consolidated Application to HUD for possible CoC funding.

Project	Amount	Project Rank
RRH1	\$414,507	2

Please make changes to your project applications to reflect any adjusted amount (if applicable) and review your project applications to insure you have answered all the questions as completely as possible. I suggest you have someone not familiar with the project read your application for clarity and completeness. Please send me an updated application (pdf) for each project no later than Tuesday, September 6, 2016, 10:00am.

Do not hit submit in snaps till you receive an email giving the go ahead.

- 2) Community Link's PSH project application will not be included in the FY2016 Consolidated Application to HUD. The review committee based their decision on the following: funds being returned to HUD, low utilization, and high supportive services cost.

A complete list of project applications being included in the Consolidated Application is attached and will be posted at <http://charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx>.

Rebecca Pfeiffer, MSW
CHARLOTTE MECKLENBURG CONTINUUM OF CARE

NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

600 E. Trade St. Charlotte, NC 28202
PHONE: 704-336-2266
MOBILE: 704-622-4708
FAX: 704-632-8500
rpfeiffer@charlottenc.gov

Working to make Charlotte's neighborhoods and businesses healthy and vibrant
<http://nbs.charlottenc.gov>

Pfeiffer, Rebecca

From: Pfeiffer, Rebecca
Sent: Tuesday, August 30, 2016 6:36 PM
To: Brennon Graham (bgraham@therelatives.org); cjoe@therelatives.org
Subject: CoC application notification
Attachments: FY2016 Char Meck CoC Project Application Recommendations and Ranking.pdf

Brennon,

Thank you for submitting an application to the CoC for funding consideration. Unfortunately, The Relatives' project application, RRH Youth, will not be included in the FY2016 Consolidated Application to HUD. The application process was very competitive this year with multiple new application to be considered. Two Rapid Re-Housing projects were submitted to serve the same clients (youth 18-24). Even though both agencies had experience with providing this service, the review committee selected to include the other project in the consolidated application based on their cost per client served was significantly less than The Relatives.

Myself or someone from the review committee is available to meet with you to provide any additional feedback that could be helpful in future funding opportunities.

A complete list of project applications being included in the Consolidated Application is attached and will be posted at <http://charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx>.

Rebecca Pfeiffer, MSW
CHARLOTTE MECKLENBURG CONTINUUM OF CARE

NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

600 E. Trade St. Charlotte, NC 28202
PHONE: 704-336-2266
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rpfeiffer@charlottenc.gov

Working to make Charlotte's neighborhoods and businesses healthy and vibrant
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**Charlotte-Mecklenburg Continuum of Care
2016 New & Renewal Projects
Request for Letter of Interest for Continuum of Care Program
Due Friday July 15, 2016**

The Charlotte-Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds. This announcement serves as the opportunity for agencies to submit a Letter of Interest (LOI) for funding for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

Click here for complete information.

**Charlotte-Mecklenburg Continuum of Care
2016 New & Renewal Projects
Notice of Project Process Competition
Due Friday August 12, 2016**

The Charlotte-Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds. This announcement serves as the opportunity for eligible agencies to submit an application package for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition. Please see the Notice of Project Process Competition for complete information including required documents and due date. The following documents are also attached for your reference:

- CoC Statement regarding FY2016 HOPEA Competition
- Project Application Checklist
- New Project Application Scorecard
- Renewal Project Application Scorecard
- Information Sheet on FY2016 HOPEA Scorecard
- CoC Reallocation Power

**Charlotte-Mecklenburg Continuum of Care
FY2016 Consolidated Application Information**

- FY2016 Continuum of Care Project Selection and Funding
- FY2016 Continuum of Care Application
- FY2016 Continuum of Care Priority Listing



**Continuum of Care Committee
Wednesday, September 7, 2016
Hope Haven Conference Center
2:00pm – 3:30pm**

Meeting Minutes

- Welcome & Introductions
- Rebecca Pfeiffer presented information on the FY2016 CoC Funding Application Process
 - \$3.8 million is being requested
 - Includes 16 project applications for PH, SSO-CE & Planning Grant; Men's Shelter of Charlotte RRH project is being submitted for Bonus funds
 - There will be a local process debriefing meeting on 9/27/16, 9:30am @ Hal Marshall
 - All parts to the Consolidated Application are available for review at Charmeck.org/city/charlotte/nbs
- Rebecca Pfeiffer presented the updated PSH Written Standards for approval to adopt HUD CPD Notice 16-11, Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing
 - Members voted to accept updated standards
- Rebecca Pfeiffer presented Interim Access to Educational Services Guidelines
 - Discussion centered around clarifying program versus parent responsibilities for ensuring children are in school
- Stephanie Friend provided HMIS information
 - Any agency with custom reports need to notify her
 - Community meeting on Performance Measures 9/29/16
 - Deadline to complete annual privacy training is 9/30/16
- Mary Gaertner & Rosalyn Jacobs led discussion on ongoing Strategic Planning work by the Housing Advisory Board

Next Meeting: November 9, 2016

Charlotte-Mecklenburg Continuum of Care

2016 New & Renewal Projects Request for Letter of Interest for Continuum of Care Program

Due Friday July 15, 2016

The Charlotte- Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds.

This announcement serves as the opportunity for agencies to submit a Letter of Interest (LOI) for funding for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

The Notice of Funding Availability (NOFA) for the FY 2016 Continuum of Care (CoC) Program can be viewed at <https://www.hudexchange.info/resources/documents/FY-2016-CoC-Program-NOFA.pdf>.

Agencies considering submitting a letter of interest must clearly demonstrate their ability to successfully meet CoC program outcomes in one or more of the activity areas as outlined in the Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program; Interim Final Rule (24 CFR Part 578 [Docket No. FR-5476-I-01]).

INTRODUCTION

Eligible Activities:

- ***COC Renewal Projects***
- ***New Permanent Supportive Housing Projects***
- ***New Rapid Rehousing Projects***

Note: Project must be ready to proceed in calendar year 2017.

COC PROJECTS ARE DESIGNED TO:

- Promote community-wide commitment to the goal of ending homelessness.
- Provide funding for efforts by nonprofit providers and State and local governments to quickly house or rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families and communities by homelessness.
- Promote access to and utilization of mainstream benefits by homeless individuals.
- Provide supportive services that are voluntary, flexible and consumer-driven.

Funding for these projects is provided through the HUD CoC Homeless Assistance Grant Programs (under the HEARTH Act). Submission of a Letter of Interest does not constitute an application nor does it constitute approval for funding by the CoC or by HUD.

The CoC anticipates that HUD will allow Charlotte-Mecklenburg to apply for approximately **\$3,500,000.00** in this competition.

WHO CAN SUBMIT A LETTER OF INTEREST

Applicants that:

- Serve persons residing in Mecklenburg County
- Is prepared to utilize or already utilizing the Homeless Management Information System to record client level data.

PROCESS

Step 1: Interested agencies must submit a LOI by **July 15, 2016**.

Step 2: LOIs will be reviewed and evaluated in response to this announcement. Upon approval, applicants will be notified if they were or were not recommended to submit a full application for funding consideration.

Step 3: Applicants recommended will receive an invitation to submit a full project application and asked to submit via e-snaps.

Applicants that are not recommended will be provided a written explanation for the reason(s) for not being recommended and will be offered support and technical assistance to improve deficiencies identified during the letter of interest process. Applicants have the right to appeal funding recommendation decisions by submitting a formal written letter within two weeks of being notified.

SUBMISSION INSTRUCTIONS

All LOIs must be received electronically no later than **5:00 Friday, July 15, 2016** to rpfeiffer@charlottenc.gov. LOIs submitted after the deadline will not be reviewed or considered.

CONTACT INFORMATION

Questions may be directed to Rebecca Pfeiffer, CoC Coordinator at rpfeiffer@charlottenc.gov or by phone at 704.336.2266.

Charlotte-Mecklenburg Continuum of Care
2016 New & Renewal Projects
Notice of Project Process Competition

Due Friday August 12, 2016

The Charlotte-Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds.

This announcement serves as the opportunity for eligible agencies to submit an application package for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

The Notice of Funding Availability (NOFA) for the FY 2016 Continuum of Care (CoC) Program can be viewed at <https://www.hudexchange.info/resources/documents/FY-2016-CoC-Program-NOFA.pdf>.

In addition, all information around our local application process can be located at <http://charmeck.org/city/charlotte/nbs/Pages/default.aspx> under the News section (top right on the page).

Agencies submitting project applications are strongly encouraged to review the FY 2016 CoC Funding Notice, FY 2016 CoC Program Competition NOFA, FY 2016 General Section NOFA, and General Section Technical Correction to ensure proper consideration of all application requirements. Competition information can be located at <https://www.hudexchange.info/e-snaps/fy-2016-coc-program-nofa-coc-program-competition/>.

Project Applications for all new (including Bonus) and renewal projects are due to the Charlotte Mecklenburg CoC c/o Rebecca Pfeiffer, The City of Charlotte, Neighborhood & Business Services via email to rpfeiffer@charlottenc.gov on or before **5:00 p.m., Friday, August 12, 2016**, for review and ranking by the Continuum of Care funding subcommittee. The project scorecard is available for reference.

Written notification on project application(s) inclusion as part of the CoC Consolidated Application submission will be sent to all project applicants no later than close of business August 29, 2016.

A complete application package will include:

1. PDF version of the project application completed in esnaps;*
2. Latest version of submitted APR (renewal only);
3. Most up to date agency audit summary report;
4. Documentation of project eligibility requirements; and
5. Documentation of project process (referral to housing placement)
6. Optional: If you would like to elaborate on any items reference in the project scorecard, you may provide additional information in a one (1) page type document.

*Esnaps is currently not open to complete application. Notice will be sent out as soon as this is available.

Additional information about the Continuum of Care programs can be found at www.hudexchange.info or you may contact Rebecca Pfeiffer at 704-622-4708 or by email at rpfeiffer@charlottenc.gov.

Char-Meck CoC
Posted July 19, 2016

CHARLOTTE-MECKLENBURG CONTINUUM OF CARE (CoC)
2016 NOTICE OF FUNDING APPLICATION (NOFA)

PROJECT APPLICATION SCORECARD INFO SHEET

The purpose of this document is to provide an overview of the 2016 NOFA Scorecard including its components and how it is used. This information sheet applies for both new and renewal project applications.

WHY DO WE HAVE A SCORECARD?

Each year, the competition for federal CoC funds increases, which requires each CoC to submit a strong collaborative application in alignment with federal priorities to end and prevent homelessness in order to maintain or increase its current funding level. The scorecard is a critical component for the CoC's NOFA application: it establishes an objective and transparent method for ranking all project applications; and it develops a prioritization system that aligns with the CoC's stated goals and federal funding priorities to maximize the collaborative application's funding potential.

HOW DOES THE SCORECARD FIT INTO THE NOFA?

There are three main components to the NOFA application¹:

- 1) **CoC Application.** This section contains answers about the CoC planning body, governance structure, overall performance, and the strategic planning process. It is scored and determines the order in which CoCs are funded.
- 2) **Project Applications.** This section contains the applications completed by new and renewal projects applying for CoC funds.
- 3) **CoC Priority Listing.** The project listings rank projects in order of priority and identify any project applications rejected by the CoC. This listing is based upon the scorecard developed by the CoC.

WHAT IS ON THE 2016 NOFA SCORECARD?

There are two scorecards for the 2016 Charlotte-Mecklenburg CoC NOFA competition: one for new projects and one for renewal projects. The total number of points available including bonus and penalties is the same for both scorecards. Here is the breakdown:

- 1) **Performance Measures.** This section accounts for **45%** of the total possible points. For renewal projects, the performance measures are scored based upon the project's most recent Annual Performance Report (APR). For new projects that do not have an APR, the performance measures are based upon an agency's report using the calculation method on the scorecard (For example, a new project answering Measure 1: Average Unit

¹ Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2016 Continuum of Care Program Competition

Utilization would divide the total units utilized during the time frame (10/1/14-9/30/15) by the total units available during that same time frame.)

- 2) **Financial Information.** This section accounts for **10%** of the total possible points and consists of two questions. The first requires new and renewal projects to submit their Audit Summary. The second applies only to renewal projects, and requires them to submit their Line of Credit Control System (LOCCS) Voucher. New projects will only be scored on their Audit Review, which will account for all 20 possible points.
- 3) **HMIS & Data Quality.** This section accounts for **45%** of the total possible points and consists of one question, which requires new and renewal projects to submit information related to their data quality. For renewal projects and new projects that use HMIS, the HMIS Report 0252 Data Completeness Report Card (EE) will be used. For new projects that do not use HMIS, projects must submit in narrative form a description of their current data quality plan. A second question exists on both the new and renewal project scorecards for information purposes only; this question will be scored in the FY2017 NOFA competition.
- 4) **Penalty.** There are three possible penalties for all new and renewal project applications. The penalty value is the same for new and renewal projects. If the completed application package is received after the designated time, it is penalized 25 points. If the project received less than 90% of its new clients during the designated time frame through Coordinated Assessment, it will be penalized 25 points. Finally, if the project does not utilize a Housing First approach, it will be penalized 75 points. The total penalty possible is 125 points.
- 5) **Bonus.** New and renewal projects may receive 25 bonus points if they can show that during the designated time frame, the average length of time from receipt of a client application to client move-in was less than 90 days.
- 6) **Client Feedback.** Beginning in 2017, the CoC will consider client feedback as part of the ranking and prioritization process.

HOW WILL THE SCORECARD BE USED?

The Ranking and Review Committee, which is established by the Continuum of Care, will utilize the scorecard to assign point values based upon the information submitted by project applications. A total score will be assigned to each project. These scores will be used to rank all CoC Project applications from highest to lowest and submitted under the Priority Listing Section submitted as part of the NOFA collaborative application.

QUESTIONS?

If you have any questions regarding the scorecard, please email Rebecca Pfeiffer at rpfeiffer@ci.charlotte.nc.us

2016 NOFA¹ SCORECARD – NEW/ PROJECT APPLICATIONS

Charlotte-Mecklenburg Continuum of Care

INSTRUCTIONS	Chronically Homeless	Veterans	Families	Youth 18-24	Domestic Violence	LGBTQ
Place an X under each population category served by project.						

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS	
45%	PERFORMANCE MEASURES	UTILIZATION								
		1	Average Unit Utilization ³	Agency Report	10/1/14-9/30/15	(Total Units Utilized during Time Frame / Total Units Available) ⁴	>90%	80-90%	<80%	20
		2	PH ⁵ : Percentage of adult stayers ⁶ who gained or increased income from entry to follow up ⁷ .	Agency Report	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Follow Up / Total Adults (including those with No Income)	>20%	15-20%	<15%	20
		3	PH: Percentage of adult leavers ⁸ who gained or increased income from entry to exit.	Agency Report	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Exit / Total Adults (including those with No Income)	>30%	24-30%	<23%	20
EXIT TO PERMANENT HOUSING										
	4	PH: Percentage of leavers participating more than 90 days ⁹ who exit to permanent housing. ¹⁰	Agency Report	10/1/14-9/30/15	Total Persons Leaving Who Participated for more than 90 days and Exited to Permanent Housing / Total Leavers	>80%	70-80%	<70%	30	

¹ Notice of Funding Availability
² The numerical value for the partial points equals half the value of the full points possible. For example, if the full points possible = 20, partial points = 10
³ If agencies are not funded based upon units, the default will be Bed Utilization Rate.
⁴ Agencies must provide documentation that supports calculation with application.
⁵ PH means "Permanent Housing" and includes Permanent Supportive Housing, Other Permanent Housing and Rapid Re-Housing programs.
⁶ "Stayers" is defined by the population that is still active in the project during the report year (did not exit the program).
⁷ "Follow Up" is defined by the annual follow-up assessment closest to, but not after, 9/30/15.
⁸ "Leavers" is defined by the population that exited the project during the report year.
⁹ The population of leavers only includes those who participated in the project for more than 90 days after program entry.
¹⁰ Permanent Housing is defined as any of the following: Moved from one HOPWA funded project to HOPWA Permanent Housing; Owned by client, no ongoing housing subsidy; Owned by client, with ongoing housing subsidy; Permanent housing for formerly homeless persons; Rental by client, no ongoing housing subsidy; Rental by client, with VASH housing subsidy; Rental by client, with GPD TIP housing subsidy; Rental by client, with other ongoing housing subsidy; Staying or living with family, permanent tenure; or Staying or living with friends, permanent tenure.

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS
10%	FINANCIAL INFORMATION	Audit Review	Audit Submitted by Agency (Summary or Balance Sheet)	10/1/14-9/30/15	Final Recommendations in Audit	Audit shows no findings	Audit shows some ¹¹ findings	Audit shows agency has reportable conditions	20
		LOCCS ¹²	LOCCS Payment Voucher	Will be scored for Renewal Projects	(Start Date of NOFA – Start Date of Contract)/365 and Total Disbursed / Total Authorized	Within (+ or -) 5%	Within (+ or -) 10%	<10%	N/A
45%	HMIS ¹³ & DATA QUALITY	HMIS Data Quality ¹⁴	HMIS Report: 0252 Data Completeness Report Card (EE)	10/1/14-9/30/15	Utilize % for "Overall" (Cell G4) on Tab B of Report (Report Date 8/5/2016 ¹⁵)	>90%	80-90%	<80%	90
		N/A	HMIS Site Visit	Will be scored for NOFA FY2017	Site Visit Score	N/A	N/A	N/A	N/A
100%	TOTAL								
	Application turned in after designated time ¹⁶								
	PH: Less than 90% of project entries are from Coordinated Assessment ¹⁷								
	Project does NOT utilize a Housing First approach ¹⁸								
	PH: Average Length of time from Application Received to Move-In <90 days ¹⁹								
	+25								
2017	Will be scored in 2017: Program meets designated target for positive client feedback regarding services.								
	N/A								

¹¹ The Review and Ranking Committee reserves the right to reach out to agencies for more information if their audit shows "some" findings in order to gather more information.

¹² LOCCS stands for Line of Credit Control System. For the 2016 NOFA, the LOCCS Payment Voucher will serve as the source for scoring.

¹³ For Domestic Violence Related Agencies, utilize comparable database.

¹⁴ If the new project is not part of HMIS, data quality must be answered in narrative form. The project must describe its current data quality plan. The score will be assigned based upon this answer.

¹⁵ The 0252 Data Completeness Report Card (EE) will cover data from 10/1/2014 to 9/30/15. The report will be generated from HMIS on 8/5/2016 at 12pm. Any updates made after 12pm on 8/5/2016 will not be included.

¹⁶ Electronic Timestamp of Application must be before deadline set. Rebecca Pfeiffer will notify Agency and Ranking and Review Committee of any late projects.

¹⁷ Agency will provide Total Number of New Entries received from Coordinated Assessment and Total Number of Entries for FY2016 time frame (10/1/14-9/30/15).

¹⁸ Housing First is an "approach to homeless assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold" (NOFA 2016).

¹⁹ For Agencies who submit quarterly performance reports to Mecklenburg County, agencies will provide annual, cumulative percentage for outcome measure: ((Date Application Received to Date of Lease Signing for Each New Client Successfully Housed)/Number of New Persons Successfully Housed). For all other agencies, they will provide spreadsheet for all new program entries during FY2016 time frame (10/1/14-9/30/15) by the total number of entries and the average time for that total population (time of application received to the time they sign their lease divided by the total number of people successfully housed).

2016 NOFA¹ SCORECARD – RENEWAL PROJECT APPLICATIONS

Charlotte-Mecklenburg Continuum of Care

INSTRUCTIONS	Chronically Homeless	Veterans	Families	Youth 18-24	Domestic Violence	LGBTQ
Place an X under each population category served by project.						

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL PARTIAL ZERO TOTAL POINTS POINTS ² POINTS POINTS				
						UTILIZATION	INCOME	EXIT TO PERMANENT HOUSING		
45%	PERFORMANCE MEASURES (APR ³)	1	Average Unit Utilization ⁴	APR Q11 Unit Utilization Rate	10/1/14-9/30/15	(Jan + April + July + Oct) / 4	>90%	80-90%	<80%	20
		2	PH ⁵ : Percentage of adult stayers who gained or increased income from entry to follow up ⁶ .	APR Q24b1 Client Cash Income Change ⁷	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Follow Up / Total Adults (including those with No Income)	>20%	15-20%	<15%	20
		3	PH: Percentage of adult leavers who gained or increased income from entry to exit.	APR Q24b2 ⁸ Client Cash Income Change	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Exit / Total Adults (including those with No Income)	>30%	24-30%	<23%	20
10%	FINANCIAL INFORMATION	4	PH: Percentage of leavers participating more than 90 days who exit to permanent housing ⁹	APR Q29a1 Destination at Program Exit	10/1/14-9/30/15	Total Persons Leaving Who Participated for more than 90 days and Exited to Permanent Housing / Total Leavers	>80%	70-80%	<70%	30
		5	Audit Review	Audit Submitted by Agency	10/1/14-9/30/15	Final Recommendations in Audit	Audit shows no findings	Audit shows	Audit shows agency	10

¹ Notice of Funding Availability
² The numerical value for the partial points equals half the value of the full points possible. For example, if the full points possible = 15; partial points = 7.5
³ Annual Performance Report serves as the source for the Performance Measures. For the 2016 NOFA, utilize the X APR.
⁴ If agencies are not funded based upon units, the default will be Bed Utilization Rate (APR Q10). Utilize Percentages within entries for January, April, July and October and add together and divide by 4.
⁵ PH means "Permanent Housing" and includes Permanent Supportive Housing, Other Permanent Housing and Rapid Re-Housing programs.
⁶ "Follow Up" is defined by the APR as the annual follow-up assessment closest to, but not after, the last date of the operating year (Instructions Q23. Cash Income Range).
⁷ Utilize Percentage in Table Q24b1, Row "Number of Adults with Any Income" and Column "Performance Measures: Adults who Gained or Increased Income from Entry to Exit, Average Gain."
⁸ Utilize Percentage in Table Q24b2, Row "Number of Adults with Any Income" and Column "Performance Measures: Adults who Gained or Increased Income from Entry to Exit, Average Gain."
⁹ Divide the total number of persons under Row "Permanent Destinations" in Column 1 "Total" by total number of leavers in final row "Total" in Column 1 "Total". If there are no leavers, assign full points.

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ¹⁰	ZERO POINTS	TOTAL POINTS
			(Summary or Balance Sheet)				some findings	has reportable conditions	
		9 LOCCS ¹¹	LOCCS Payment Voucher	10/1/14-9/30/15	(Start Date of NOFA – Start Date of Contract)/365 and Total Disbursed / Total Authorized	Within (+ or -) 5%	Within (+ or -) 10%	<10%	10
45%	HMIS ¹² & DATA QUALITY	10 HMIS Data Quality N/A HMIS Site Visit	HMIS Report: 0252 Data Completeness Report Card (EE) Site Visit Scoresheet	10/1/14-9/30/15 Will be scored for NOFA FY2017	Utilize % for "Overall" (Cell G4) on Tab B of Report (Report Date 8/5/2016 ¹³) Site Visit Score	>90%	80-90%	<80%	90 N/A
100%	TOTAL								
	PENALTY	<p style="text-align: center;">Application turned in after designated time¹⁴ -25</p> <p style="text-align: center;">PH: Less than 90% of program entries are from Coordinated Assessment¹⁵ -25</p> <p style="text-align: center;">Program does NOT utilize a Housing First approach¹⁶ -75</p>							
	BONUS	<p style="text-align: center;">PH: Average Length of time from Application Received to Move-In <90 days¹⁷ +25</p>							
	SCORED IN 2017	Program meets designated target for positive client feedback regarding services.							
									N/A

¹⁰ The Review and Ranking Committee reserves the right to reach out to agencies for more information if their audit shows "some" findings in order to gather more information.

¹¹ LOCCS stands for Line of Credit Control System. For the 2016 NOFA, the LOCCS Payment Voucher will serve as the source for scoring.

¹² For Domestic Violence Related Agencies, utilize comparable database.

¹³ The 0252 Data Completeness Report Card (EE) will cover data from 10/1/2014 to 9/30/15. The report will be generated from HMIS on 8/5/2016 at 12pm. Any updates made after 12pm on 8/5/2016 will not be included.

¹⁴ Electronic Timestamp of Application must be before deadline set. Rebecca Pfeiffer will notify Agency and Ranking and Review Committee of any late projects.

¹⁵ Agency will provide Total Number of New Entries received from Coordinated Assessment and Total Number of Entries for FY2016 time frame (10/1/14-9/30/15).

¹⁶ Housing First is an "approach to homeless assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold" (NOFA 2016).

¹⁷ For Agencies who submit quarterly performance reports to Mecklenburg County, agencies will provide annual, cumulative percentage for outcome measure: (Date Application Received to Date of Lease Signing for Each New Client Successfully Housed)/Number of New Persons Successfully Housed). For all other agencies, they will provide spreadsheet for all new program entries during FY2016 time frame (10/1/14-9/30/15) by the total number of entries and the average time for that total population (time of application received to the time they sign their lease divided by the total number of people successfully housed).

2

Charlotte-Mecklenburg Continuum of Care Reallocation Process

The Charlotte-Mecklenburg Continuum of Care (hereinafter CoC) manages the performance of all CoC projects in the community and reallocates financial resources whenever doing so will improve the CoC's capacity to end homelessness. The CoC encourages new and existing providers to apply for new projects each fiscal year. The CoC reallocates funds using the following process when it has determined that a reallocation of funds from underperforming, underutilized or exiting programs will benefit the entirety of the homeless community.

- 1) The CoC, through the Collaborative Applicant, the City of Charlotte, issues a notice for a Letter of Intent (LOI) for new, bonus and renewal project applications.
- 2) The LOI specifies that an agency must indicate intentions to submit a new, renewal or permanent housing bonus project for consideration as per HUD guidelines.
- 3) All projects submitted in LOI must pass a preliminary threshold review for eligibility under HUD guidelines.*
- 4) All projects which pass threshold review will be notified that they are eligible to submit a project application to the CoC for funding consideration.
- 5) Projects applications are submitted to the CoC by the designated deadline which is no less than 30 days from Collaborative Applicant deadline to HUD.
- 6) An external review committee established by the CoC reviews renewal projects based on performance. New projects are reviewed based on organizational capacity, strategic priority, project approach and design, and total cost effectiveness.

If reallocation is necessitated to fund projects, the review committee continues with a discussion of projects losing or gaining funds through reallocation. Recommendations to reallocate funds by the review committee considers HUD's policy priorities and strategic objectives, the CoC's needs and priorities in relation to any new and existing renewal project proposals, as well as the performance and spending history of existing renewal projects.

Finally, the recommended project funding and priority listing is presented by the review committee to the CoC for review, discussion and approval. A single priority listing of projects is then developed for submission to HUD through the Collaborative Application. The priority listing, if applicable, indicates to HUD the renewal grants which have been eliminated or reduced in funding, so as to create one or more new projects through the reallocation process.

The Notice for Letters of Intent, Notice of Project Process Competition, New Project Application Scorecard and Renewal Project Application Scorecard are posted annually by the Collaborative Applicant at <http://charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx> and distributed directly to each prospective applicant that is approved to continue in the application process.

Charlotte-Mecklenburg Continuum of Care
Reallocation Process

*During each application period, HUD specifies types of eligible new projects for which reallocated or bonus funds may be used. For FY 2016, the following project types may utilize reallocated funds:

(a) new permanent supportive housing projects where all beds will be dedicated for use by chronically homeless individuals and families; (b) new rapid rehousing projects for homeless individuals and families who enter directly from the streets or emergency shelters, youth up to age 24, and persons fleeing domestic violence situations; (c) new Supportive Services Only (SSO) projects specifically for a centralized or coordinated assessment system; and (d) new dedicated Homeless Management Information System (HMIS) projects.

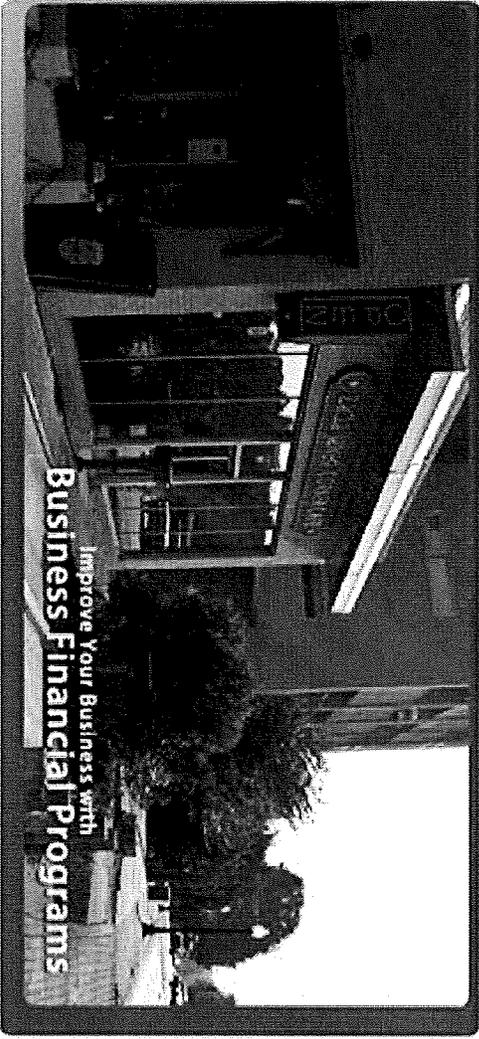
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2016 Continuum of Care Funding Application Information

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Study | Neighborhood Matching Grants

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Facade Improvement Grants | Security
Grants | Brownfield Grants

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Workforce Development

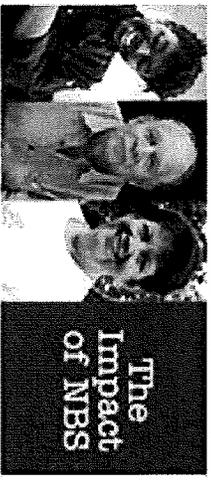
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Business Investment Grants |
Business/First Phantoms | Business

2016 Neighborhood Board Retreat



Saturday July 16, 2016, 8am-5pm
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- 2016 Continuum of Care Application

Charlotte > Neighborhood & Business Services > Housing Services > Charlotte-Mecklenburg Coalition for Housing > 2016 Continuum of Care Application

Print Feedback

Charlotte-Mecklenburg Continuum of Care 2016 New & Renewal Projects Request for Letter of Interest for Continuum of Care Program Due Friday July 15, 2016

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Click here for complete information.

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Charlotte > Neighborhood & Business Services > Housing Services > Charlotte-Mecklenburg Coalition for Housing > 2016 Continuum of Care Application

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- New Project Application Scorecard
- Renewal Project Application Scorecard
- Information Sheet on FY2016 HUDFA Scorecard
- CoC Reallocation Process

Pfeiffer, Rebecca

From: Gainor Eisenlohr <geisenlohr@cha-nc.org>
Sent: Friday, July 08, 2016 9:53 AM
To: Alice Harrison (aliceharrison@hopehaveninc.org); Ashley Pharr; Cross, Barbara J; Baseemah Hasan; Beth Maynard; Branden Lewis; Brennon Graham; Bridgett; Goodman, Carmen; Caroline Chambre; Carrington Cosby; McCoy, Catherine; Charles Page ; Charles Robinson; Cheryl Carrothers; Morton, Courtney; Courtnie McIntosh; Curtis Joe; Cynthia Reyes; Danette Glass; Cunningham, Darrell; Joyner, Delia; Denise C. Howard (dchoward@novanthealth.org); Development Staff; Emila Sutton; Eric Young (archwayprogram@gmail.com); Friend, Stephanie; Jennifer Coble; John Burns (John.Burns@goodwillsp.org); John Yeager (JYaeger@urbanministrycenter.org); Joy Warner; Justin Markel; Karen Kovach ; Kathy Bolster Gauger (kathy.gauger@safealliance.org); Katie Becker; Kecia Robinson ; Kelly Lynn (Kelly@aplacetoiveagain.org); Kenneth Smith; Keshia Sandidge (ksandidge@rhanet.org); Kimberly T SBYVAMC Stephens (Kimberly.Stephens3@va.gov); LaShonda Bryant; Liz Clasen-Kelly (lclasen-kelly@urbanministrycenter.org); Loretta Tillman; Mackie Johnson; Marsha Daymon; Gaertner, Mary; Mary Ashley Milano Barnett; Mary Kelly; Melissa Mummert; Metz, Deronda (Deronda.Metz@uss.salvationarmy.org); Harmon, Mike; Nancy Spencer; Nicole Dewitt; Pam Neal; Pamela Jefsen; Pamela Robinson; Patrice Brown; Peter Kelly; Safir, Peter; Pfeiffer, Rebecca; Rohan Gibbs (rgibbs@hopehaveninc.org); Ruth Amerson; Sandra Reid (Sandra_brc@bellsouth.net); Schroeder, Erin; Shannon Warren; Stephanie Shatto; Stephen Smith; Sylvia Synbel; T. Wilkinson; Tameka Belfield; Tameka Gunn; Tamika Goshton; Tammy Legette; Tanika Blackmon; Thelma Reynolds; Tonya Lawrence; Traci Cessna Carter; Trish Fries; T'Shima Kirkland; Veronica Jones; Yvonne McJetters; Biermann, Zelleka; Zhiss, Melissa
Subject: FW: The FY 2016 CoC Program Competition is Now Open
Attachments: Charlotte-Mecklenburg CoC Request for Letter of Interest July 2016.pdf

Gainor
704-353-0292 office
704-737-4019 cell



From: Pfeiffer, Rebecca [mailto:rpfeiffer@ci.charlotte.nc.us]
Sent: Friday, July 08, 2016 9:39 AM
To: Gainor Eisenlohr <geisenlohr@cha-nc.org>; Morton, Courtney <Courtney.Morton@mecklenburgcountync.gov>
Cc: 'Stephens, Kimberly T SBYVAMC' <Kimberly.Stephens3@va.gov>
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This information is also available at <http://charmeck.org/city/charlotte/nbs/Pages/default.aspx>

Please contact me if you have any questions,

Rebecca Pfeiffer, MSW
CHARLOTTE MECKLENBURG CONTINUUM OF CARE

NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

600 E. Trade St. Charlotte, NC 28202
PHONE: 704-336-2266
MOBILE: 704-622-4708
FAX: 704-632-8500
rpfeiffer@charlottenc.gov

Working to make Charlotte's neighborhoods and businesses healthy and vibrant
<http://nbs.charlottenc.gov>

From: HUD Exchange Mailing List [<mailto:news@hudexchange.info>]
Sent: Wednesday, June 29, 2016 12:47 PM
To: Pfeiffer, Rebecca
Subject: The FY 2016 CoC Program Competition is Now Open

Is this email not displaying correctly? [View it in your browser.](#)



The FY 2016 CoC Program Competition is Now Open

The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2016 Continuum of Care (CoC) Program Competition has been posted to the [FY 2016 CoC Program Competition: Funding Availability page](#) on the HUD Exchange.

Submission Deadline: Wednesday, September 14, 2016 at 7:59:59 PM EDT

- The FY 2016 CoC Program Competition is administered under the CoC Program interim rule (24 CFR part 578) and covers the application and award process for the FY 2016 CoC Program funds.
- The electronic application, *e-snaps*, is **not yet available**. HUD strongly encourages CoCs, Collaborative Applicants, project applicants, and stakeholders to use

Pfeiffer, Rebecca

Subject: FW: HSN FW: The FY 2016 CoC Program Competition is Now Open
Attachments: Charlotte-Mecklenburg CoC Request for Letter of Interest July 2016.pdf

From: Morton, Courtney
Sent: Friday, July 08, 2016 12:20 PM
Subject: HSN FW: The FY 2016 CoC Program Competition is Now Open

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Please see message below and attached document from Rebecca Pfeiffer regarding the process for applying for Continuum of Care dollars.

Thank you,

Courtney Morton, MSW, LCSW
MANAGEMENT ANALYST
HOUSING & HOMELESSNESS RESEARCH COORDINATOR

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Please contact me if you have any questions,

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NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

600 E. Trade St. Charlotte, NC 28202
PHONE: 704-336-2266
MOBILE: 704-622-4708
FAX: 704-632-8500
rpfeiffer@charlottenc.gov

Pfeiffer, Rebecca

From: Gaertner, Mary
Sent: Tuesday, July 19, 2016 5:19 PM
To: Deronda.Metz@uss.salvationarmy.org; nicoled@communitylinknc.org; Randall.Hitt@MensShelterOfCharlotte.org; pamela@aplacetoliveagain.org; chammock@urbanministrycenter.org; jcoble@friendshipcdc.org; dthompson@fcsnc.org; bgraham@therelatives.org; rgibbs@hopehaveninc.org; Lowry, Stacy M.
Cc: Pfeiffer, Rebecca
Subject: CoC 505 NOFA project competition phase
Attachments: FY2016 Competition Notice final 7.18.16.pdf; 2016 NOFA Application Checklist.pdf; 2016 NOFA Scorecard NEW PROJECTS Final 15 July 2016.pdf; 2016 NOFA Scorecard RENEWAL PROJECTS Final Version 15 July 2016.pdf; Information Sheet for 2016 NOFA Scorecard.pdf

Thank you for interesting in applying for 2016 Continuum of Care Funds. After reviewing your Letter of Interest you have been recommended to move on to the project competition phase where you will submit application packages for individual projects you are requesting to be funded.

Please see the attached [Notice of Project Process Competition](#) for complete information including required documents and due date. The following documents are also attached for your reference:

- CoC Statement regarding FY2016 NOFA Competition
- Project Application Checklist
- New Project Application Scorecard
- Renewal Project Application Scorecard
- Information Sheet on FY2016 NOFA Scorecard

This information can also be located at <http://charmeck.org/city/charlotte/nbs/Pages/default.aspx> under the News section (top right on the page).

Mary Gaertner

NEIGHBORHOOD PROGRAM COORDINATOR
NEIGHBORHOOD & BUSINESS SERVICES

City of Charlotte

600 E. Trade St. Charlotte, NC 28202

PHONE: 704-432-5495

MOBILE: 704-726-9359

Working to make Charlotte's neighborhoods and businesses healthy and vibrant

<http://nbs.charlottenc.gov>

Charlotte-Mecklenburg Continuum of Care Reallocation Process

The Charlotte-Mecklenburg Continuum of Care (hereinafter CoC) manages the performance of all CoC projects in the community and reallocates financial resources whenever doing so will improve the CoC's capacity to end homelessness. The CoC encourages new and existing providers to apply for new projects each fiscal year. The CoC reallocates funds using the following process when it has determined that a reallocation of funds from underperforming, underutilized or exiting programs will benefit the entirety of the homeless community.

- 1) The CoC, through the Collaborative Applicant, the City of Charlotte, issues a notice for a Letter of Intent (LOI) for new, bonus and renewal project applications.
- 2) The LOI specifies that an agency must indicate intentions to submit a new, renewal or permanent housing bonus project for consideration as per HUD guidelines.
- 3) All projects submitted in LOI must pass a preliminary threshold review for eligibility under HUD guidelines.*
- 4) All projects which pass threshold review will be notified that they are eligible to submit a project application to the CoC for funding consideration.
- 5) Projects applications are submitted to the CoC by the designated deadline which is no less than 30 days from Collaborative Applicant deadline to HUD.
- 6) An external review committee established by the CoC reviews renewal projects based on performance. New projects are reviewed based on organizational capacity, strategic priority, project approach and design, and total cost effectiveness.

If reallocation is necessitated to fund projects, the review committee continues with a discussion of projects losing or gaining funds through reallocation. Recommendations to reallocate funds by the review committee considers HUD's policy priorities and strategic objectives, the CoC's needs and priorities in relation to any new and existing renewal project proposals, as well as the performance and spending history of existing renewal projects.

Finally, the recommended project funding and priority listing is presented by the review committee to the CoC for review, discussion and approval. A single priority listing of projects is then developed for submission to HUD through the Collaborative Application. The priority listing, if applicable, indicates to HUD the renewal grants which have been eliminated or reduced in funding, so as to create one or more new projects through the reallocation process.

The Notice for Letters of Intent, Notice of Project Process Competition, New Project Application Scorecard and Renewal Project Application Scorecard are posted annually by the Collaborative Applicant at <http://charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx> and distributed directly to each prospective applicant that is approved to continue in the application process.

Charlotte-Mecklenburg Continuum of Care
Reallocation Process

*During each application period, HUD specifies types of eligible new projects for which reallocated or bonus funds may be used. For FY 2016, the following project types may utilize reallocated funds:

(a) new permanent supportive housing projects where all beds will be dedicated for use by chronically homeless individuals and families; (b) new rapid rehousing projects for homeless individuals and families who enter directly from the streets or emergency shelters, youth up to age 24, and persons fleeing domestic violence situations; (c) new Supportive Services Only (SSO) projects specifically for a centralized or coordinated assessment system; and (d) new dedicated Homeless Management Information System (HMIS) projects.

Charlotte-Mecklenburg Continuum of Care

2016 New & Renewal Projects Request for Letter of Interest for Continuum of Care Program

Due Friday July 15, 2016

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The Notice of Funding Availability (NOFA) for the FY 2016 Continuum of Care (CoC) Program can be viewed at <https://www.hudexchange.info/resources/documents/FY-2016-CoC-Program-NOFA.pdf>.

Agencies considering submitting a letter of interest must clearly demonstrate their ability to successfully meet CoC program outcomes in one or more of the activity areas as outlined in the Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program; Interim Final Rule (24 CFR Part 578 [Docket No. FR-5476-I-01]).

INTRODUCTION

Eligible Activities:

- ***COC Renewal Projects***
- ***New Permanent Supportive Housing Projects***
- ***New Rapid Rehousing Projects***

Note: Project must be ready to proceed in calendar year 2017.

COC PROJECTS ARE DESIGNED TO:

- Promote community-wide commitment to the goal of ending homelessness.
- Provide funding for efforts by nonprofit providers and State and local governments to quickly house or rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families and communities by homelessness.
- Promote access to and utilization of mainstream benefits by homeless individuals.
- Provide supportive services that are voluntary, flexible and consumer-driven.

Funding for these projects is provided through the HUD CoC Homeless Assistance Grant Programs (under the HEARTH Act). Submission of a Letter of Interest does not constitute an application nor does it constitute approval for funding by the CoC or by HUD.

The CoC anticipates that HUD will allow Charlotte-Mecklenburg to apply for approximately **\$3,500,000.00** in this competition.

WHO CAN SUBMIT A LETTER OF INTEREST

Applicants that:

- Serve persons residing in Mecklenburg County
- Is prepared to utilize or already utilizing the Homeless Management Information System to record client level data.

PROCESS

Step 1: Interested agencies must submit a LOI by **July 15, 2016**.

Step 2: LOIs will be reviewed and evaluated in response to this announcement. Upon approval, applicants will be notified if they were or were not recommended to submit a full application for funding consideration.

Step 3: Applicants recommended will receive an invitation to submit a full project application and asked to submit via e-snaps.

Applicants that are not recommended will be provided a written explanation for the reason(s) for not being recommended and will be offered support and technical assistance to improve deficiencies identified during the letter of interest process. Applicants have the right to appeal funding recommendation decisions by submitting a formal written letter within two weeks of being notified.

SUBMISSION INSTRUCTIONS

All LOIs must be received electronically no later than **5:00 Friday, July 15, 2016** to rpfeiffer@charlottenc.gov. LOIs submitted after the deadline will not be reviewed or considered.

CONTACT INFORMATION

Questions may be directed to Rebecca Pfeiffer, CoC Coordinator at rpfeiffer@charlottenc.gov or by phone at 704.336.2266.

Pfeiffer, Rebecca

From: Gainor Eisenlohr <geisenlohr@cha-nc.org>
Sent: Friday, July 08, 2016 9:53 AM
To: Alice Harrison (aliceharrison@hopehaveninc.org); Ashley Pharr; Cross, Barbara J; Baseemah Hasan; Beth Maynard; Branden Lewis; Brennon Graham; Bridgett; Goodman, Carmen; Caroline Chambre; Carrington Cosby; McCoy, Catherine; Charles Page ; Charles Robinson; Cheryl Carrothers; Morton, Courtney; Courtnie McIntosh; Curtis Joe; Cynthia Reyes; Danette Glass; Cunningham, Darrell; Joyner, Delia; Denise C. Howard (dchoward@novanthealth.org); Development Staff; Emila Sutton; Eric Young (archwayprogram@gmail.com); Friend, Stephanie; Jennifer Coble; John Burns (John.Burns@goodwillsp.org); John Yeager (JYaeger@urbanministrycenter.org); Joy Warner; Justin Markel; Karen Kovach ; Kathy Bolster Gauger (kathy.gauger@safealliance.org); Katie Becker; Kecia Robinson ; Kelly Lynn (Kelly@aplacetoiveagain.org); Kenneth Smith; Keshia Sandidge (ksandidge@rhanet.org); Kimberly T SBYVAMC Stephens (Kimberly.Stephens3@va.gov); LaShonda Bryant; Liz Clasen-Kelly (lclasen-kelly@urbanministrycenter.org); Loretta Tillman; Mackie Johnson; Marsha Daymon; Gaertner, Mary; Mary Ashley Milano Barnett; Mary Kelly; Melissa Mummert; Metz, Deronda (Deronda.Metz@uss.salvationarmy.org); Harmon, Mike; Nancy Spencer; Nicole Dewitt; Pam Neal; Pamela Jefsen; Pamela Robinson; Patrice Brown; Peter Kelly; Safir, Peter; Pfeiffer, Rebecca; Rohan Gibbs (rgibbs@hopehaveninc.org); Ruth Amerson; Sandra Reid (Sandra_brc@bellsouth.net); Schroeder, Erin; Shannon Warren; Stephanie Shatto; Stephen Smith; Sylvia Synbel; T. Wilkinson; Tameka Belfield; Tameka Gunn; Tamika Goshton; Tammy Legette; Tanika Blackmon; Thelma Reynolds; Tonya Lawrence; Traci Cessna Carter; Trish Fries; T'Shima Kirkland; Veronica Jones; Yvonne McJetters; Biermann, Zelleka; Zhiss, Melissa
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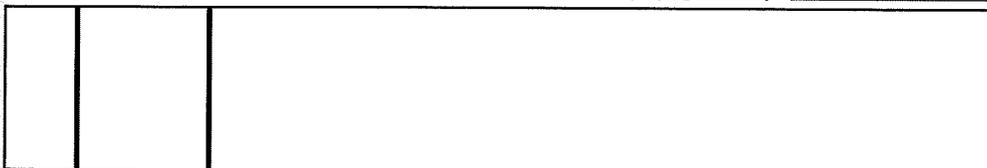
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City of Charlotte

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MANAGEMENT ANALYST
HOUSING & HOMELESSNESS RESEARCH COORDINATOR

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NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

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MOBILE: 704-622-4708
FAX: 704-632-8500
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Charlotte-Mecklenburg Continuum of Care
2016 New & Renewal Projects
Notice of Project Process Competition

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In addition, all information around our local application process can be located at <http://charmeck.org/city/charlotte/nbs/Pages/default.aspx> under the News section (top right on the page).

Agencies submitting project applications are strongly encouraged to review the FY 2016 CoC Funding Notice, FY 2016 CoC Program Competition NOFA, FY 2016 General Section NOFA, and General Section Technical Correction to ensure proper consideration of all application requirements. Competition information can be located at <https://www.hudexchange.info/e-snaps/fy-2016-coc-program-nofa-coc-program-competition/>.

Project Applications for all new (including Bonus) and renewal projects are due to the Charlotte Mecklenburg CoC c/o Rebecca Pfeiffer, The City of Charlotte, Neighborhood & Business Services via email to rpfeiffer@charlottenc.gov on or before **5:00 p.m., Friday, August 12, 2016**, for review and ranking by the Continuum of Care funding subcommittee. The project scorecard is available for reference.

Written notification on project application(s) inclusion as part of the CoC Consolidated Application submission will be sent to all project applicants no later than close of business August 29, 2016.

A complete application package will include:

1. PDF version of the project application completed in esnaps;*
2. Latest version of submitted APR (renewal only);
3. Most up to date agency audit summary report;
4. Documentation of project eligibility requirements; and
5. Documentation of project process (referral to housing placement)
6. Optional: If you would like to elaborate on any items reference in the project scorecard, you may provide additional information in a one (1) page type document.

*Esnaps is currently not open to complete application. Notice will be sent out as soon as this is available.

Additional information about the Continuum of Care programs can be found at www.hudexchange.info or you may contact Rebecca Pfeiffer at 704-622-4708 or by email at rpfeiffer@charlottenc.gov.

Char-Meck CoC
Posted July 19, 2016

CHARLOTTE-MECKLENBURG CONTINUUM OF CARE (CoC)
2016 NOTICE OF FUNDING APPLICATION (NOFA)

PROJECT APPLICATION SCORECARD INFO SHEET

The purpose of this document is to provide an overview of the 2016 NOFA Scorecard including its components and how it is used. This information sheet applies for both new and renewal project applications.

WHY DO WE HAVE A SCORECARD?

Each year, the competition for federal CoC funds increases, which requires each CoC to submit a strong collaborative application in alignment with federal priorities to end and prevent homelessness in order to maintain or increase its current funding level. The scorecard is a critical component for the CoC's NOFA application: it establishes an objective and transparent method for ranking all project applications; and it develops a prioritization system that aligns with the CoC's stated goals and federal funding priorities to maximize the collaborative application's funding potential.

HOW DOES THE SCORECARD FIT INTO THE NOFA?

There are three main components to the NOFA application¹:

- 1) **CoC Application.** This section contains answers about the CoC planning body, governance structure, overall performance, and the strategic planning process. It is scored and determines the order in which CoCs are funded.
- 2) **Project Applications.** This section contains the applications completed by new and renewal projects applying for CoC funds.
- 3) **CoC Priority Listing.** The project listings rank projects in order of priority and identify any project applications rejected by the CoC. This listing is based upon the scorecard developed by the CoC.

WHAT IS ON THE 2016 NOFA SCORECARD?

There are two scorecards for the 2016 Charlotte-Mecklenburg CoC NOFA competition: one for new projects and one for renewal projects. The total number of points available including bonus and penalties is the same for both scorecards. Here is the breakdown:

- 1) **Performance Measures.** This section accounts for **45%** of the total possible points. For renewal projects, the performance measures are scored based upon the project's most recent Annual Performance Report (APR). For new projects that do not have an APR, the performance measures are based upon an agency's report using the calculation method on the scorecard (For example, a new project answering Measure 1: Average Unit

¹ Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2016 Continuum of Care Program Competition

Utilization would divide the total units utilized during the time frame (10/1/14-9/30/15) by the total units available during that same time frame.)

- 2) **Financial Information.** This section accounts for **10%** of the total possible points and consists of two questions. The first requires new and renewal projects to submit their Audit Summary. The second applies only to renewal projects, and requires them to submit their Line of Credit Control System (LOCCS) Voucher. New projects will only be scored on their Audit Review, which will account for all 20 possible points.
- 3) **HMIS & Data Quality.** This section accounts for **45%** of the total possible points and consists of one question, which requires new and renewal projects to submit information related to their data quality. For renewal projects and new projects that use HMIS, the HMIS Report 0252 Data Completeness Report Card (EE) will be used. For new projects that do not use HMIS, projects must submit in narrative form a description of their current data quality plan. A second question exists on both the new and renewal project scorecards for information purposes only; this question will be scored in the FY2017 NOFA competition.
- 4) **Penalty.** There are three possible penalties for all new and renewal project applications. The penalty value is the same for new and renewal projects. If the completed application package is received after the designated time, it is penalized 25 points. If the project received less than 90% of its new clients during the designated time frame through Coordinated Assessment, it will be penalized 25 points. Finally, if the project does not utilize a Housing First approach, it will be penalized 75 points. The total penalty possible is 125 points.
- 5) **Bonus.** New and renewal projects may receive 25 bonus points if they can show that during the designated time frame, the average length of time from receipt of a client application to client move-in was less than 90 days.
- 6) **Client Feedback.** Beginning in 2017, the CoC will consider client feedback as part of the ranking and prioritization process.

HOW WILL THE SCORECARD BE USED?

The Ranking and Review Committee, which is established by the Continuum of Care, will utilize the scorecard to assign point values based upon the information submitted by project applications. A total score will be assigned to each project. These scores will be used to rank all CoC Project applications from highest to lowest and submitted under the Priority Listing Section submitted as part of the NOFA collaborative application.

QUESTIONS?

If you have any questions regarding the scorecard, please email Rebecca Pfeiffer at rpfeiffer@ci.charlotte.nc.us

2016 NOFA¹ SCORECARD – NEW PROJECT APPLICATIONS

Charlotte-Mecklenburg Continuum of Care

INSTRUCTIONS	Chronically Homeless	Veterans	Families	Youth 18-24	Domestic Violence	LGBTQ
Place an X under each population category served by project.	<input type="checkbox"/>					

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS	
45%	PERFORMANCE MEASURES	UTILIZATION								
		1	Average Unit Utilization ³	Agency Report	10/1/14-9/30/15	(Total Units Utilized during Time Frame / Total Units Available) ⁴	>90%	80-90%	<80%	20
		2	PH ⁵ : Percentage of adult stayers ⁶ who gained or increased income from entry to follow up ⁷ .	Agency Report	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Follow Up / Total Adults (including those with No Income)	>20%	15-20%	<15%	20
		3	PH: Percentage of adult leavers ⁸ who gained or increased income from entry to exit.	Agency Report	10/1/14-9/30/15	Total Adults Who Gained or Increased Income from Entry to Exit / Total Adults (including those with No Income)	>30%	24-30%	<23%	20
		EXIT TO PERMANENT HOUSING								
		4	PH: Percentage of leavers participating more than 90 days ⁹ who exit to permanent housing. ¹⁰	Agency Report	10/1/14-9/30/15	Total Persons Leaving Who Participated for more than 90 days and Exited to Permanent Housing / Total Leavers	>80%	70-80%	<70%	30

¹ Notice of Funding Availability

² The numerical value for the partial points equals half the value of the full points possible. For example, if the full points possible = 20; partial points = 10

³ If agencies are not funded based upon units, the default will be Bed Utilization Rate.

⁴ Agencies must provide documentation that supports calculation with application.

⁵ PH means "Permanent Housing" and includes Permanent Supportive Housing, Other Permanent Housing and Rapid Re-Housing programs.

⁶ "Stayers" is defined by the population that is still active in the project during the report year (did not exit the program).

⁷ "Follow Up" is defined by the annual follow-up assessment closest to, but not after, 9/30/15.

⁸ "Leavers" is defined by the population that exited the project during the report year.

⁹ The population of leavers only includes those who participated in the project for more than 90 days after program entry.

¹⁰ Permanent Housing is defined as any of the following: Moved from one HOPWA funded project to HOPWA Permanent Housing; Owned by client, no ongoing housing subsidy; Owned by client, with ongoing housing subsidy; Permanent housing for formerly homeless persons; Rental by client, no ongoing housing subsidy; Rental by client, with VASH housing subsidy; Rental by client, with GPD TIP housing subsidy; Rental by client, with other ongoing housing subsidy; Staying or living with family, permanent tenure; or Staying or living with friends, permanent tenure.

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS
10%	FINANCIAL INFORMATION	Audit Review	Audit Submitted by Agency (Summary or Balance Sheet)	10/1/14-9/30/15	Final Recommendations in Audit	Audit shows no findings	Audit shows some ¹¹ findings	Audit shows agency has reportable conditions	20
		LOCCS ¹²	LOCCS Payment Voucher	Will be scored for Renewal Projects	(Start Date of NOFA – Start Date of Contract)/365 and Total Disbursed / Total Authorized	Within (+ or -) 5%	Within (+ or -) 10%	<10%	N/A
45%	HMIS ¹³ & DATA QUALITY	HMIS Data Quality ¹⁴	HMIS Report: 0252 Data Completeness Report Card (EE)	10/1/14-9/30/15	Utilize % for "Overall" (Cell G4) on Tab B of Report (Report Date 8/5/2016 ¹⁵)	>90%	80-90%	<80%	90
		N/A	HMIS Site Visit	Will be scored for NOFA FY2017	Site Visit Score	N/A	N/A	N/A	N/A
100%	TOTAL								
					Application turned in after designated time ¹⁶				-25
					PH: Less than 90% of project entries are from Coordinated Assessment ¹⁷				-25
					Project does NOT utilize a Housing First approach ¹⁸				-75
					PH: Average Length of time from Application Received to Move-In <90 days ¹⁹				+25
2017					Will be scored in 2017. Program meets designated target for positive client feedback regarding services.				N/A

¹¹ The Review and Ranking Committee reserves the right to reach out to agencies for more information if their audit shows "some" findings in order to gather more information.

¹² LOCCS stands for Line of Credit Control System. For the 2016 NOFA, the LOCCS Payment Voucher will serve as the source for scoring.

¹³ For Domestic Violence Related Agencies, utilize comparable database.

¹⁴ If the new project is not part of HMIS, data quality must be answered in narrative form. The project must describe its current data quality plan. The score will be assigned based upon this answer.

¹⁵ The 0252 Data Completeness Report Card (EE) will cover data from 10/1/2014 to 9/30/15. The report will be generated from HMIS on 8/5/2016 at 12pm. Any updates made after 12pm on 8/5/2016 will not be included.

¹⁶ Electronic Timestamp of Application must be before deadline set. Rebecca Pfeiffer will notify Agency and Review Committee of any late projects.

¹⁷ Agency will provide Total Number of New Entries received from Coordinated Assessment and Total Number of Entries for FY2016 time frame (10/1/14-9/30/15).

¹⁸ Housing First is an "approach to homeless assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold" (NOFA 2016).

¹⁹ For Agencies who submit quarterly performance reports to Mecklenburg County, agencies will provide annual, cumulative percentage for outcome measure: ((Date Application Received to Date of Lease Signing for Each New Client Successfully Housed)/Number of New Persons Successfully Housed). For all other agencies, they will provide spreadsheet for all new program entries during FY2016 time frame (10/1/14-9/30/15) by the total number of entries and the average time for that total population (time of application received to the time they sign their lease divided by the total number of people successfully housed).

2016 NOFA¹ SCORECARD – RENEWAL PROJECT APPLICATIONS

Charlotte-Mecklenburg Continuum of Care

INSTRUCTIONS	Chronically Homeless	Veterans	Families	Youth 18-24	Domestic Violence	LGBTQ
Place an X under each population category served by project.						

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS	
45%	PERFORMANCE MEASURES (APR ³)	UTILIZATION								
		1	Average Unit Utilization ⁴	APR Q11 Unit Utilization Rate	10/1/14- 9/30/15	(Jan + April + July + Oct) / 4	>90%	80-90%	<80%	20
		INCOME								
		2	PH ⁵ : Percentage of adult stayers who gained or increased income from entry to follow up ⁶ .	APR Q24b1 Client Cash Income Change ⁷	10/1/14- 9/30/15	Total Adults Who Gained or Increased Income from Entry to Follow Up / Total Adults (including those with No Income)	>20%	15-20%	<15%	20
		3	PH: Percentage of adult leavers who gained or increased income from entry to exit.	APR Q24b2 ⁸ Client Cash Income Change	10/1/14- 9/30/15	Total Adults Who Gained or Increased Income from Entry to Exit / Total Adults (including those with No Income)	>30%	24-30%	<23%	20
		EXIT TO PERMANENT HOUSING								
10%	FINANCIAL INFORMATION	5	Audit Review	Audit Submitted by Agency	10/1/14- 9/30/15	Final Recommendations in Audit	Audit shows no findings	Audit shows	Audit shows agency	10
		4	PH: Percentage of leavers participating more than 90 days who exit to permanent housing. ⁹	APR Q29a1 Destination at Program Exit	10/1/14- 9/30/15	Total Persons Leaving Who Participated for more than 90 days and Exited to Permanent Housing / Total Leavers	>80%	70-80%	<70%	30

¹ Notice of Funding Availability
² The numerical value for the partial points equals half the value of the full points possible. For example, if the full points possible = 15; partial points = 7.5
³ Annual Performance Report serves as the source for the Performance Measures. For the 2016 NOFA, utilize the X APR.
⁴ If agencies are not funded based upon units, the default will be Bed Utilization Rate (APR Q10). Utilize Percentages within entries for January, April, July and October and add together and divide by 4.
⁵ PH means "Permanent Housing" and includes Permanent Supportive Housing, Other Permanent Housing and Rapid Re-Housing programs.
⁶ "Follow Up" is defined by the APR as the annual follow-up assessment closest to, but not after, the last date of the operating year (Instructions Q23. Cash Income Range).
⁷ Utilize percentage in Table Q24b1, Row "Number of Adults with Any Income" and Column "Performance Measures: Adults who Gained or Increased Income from Entry to Exit, Average Gain."
⁸ Utilize percentage in Table Q24b2, Row "Number of Adults with Any Income" and Column "Performance Measures: Adults who Gained or Increased Income from Entry to Exit, Average Gain."
⁹ Divide the total number of persons under Row "Permanent Destinations" in Column 1 "Total" by total number of leavers in final row "Total". If there are no leavers, assign full points.

WEIGHT	CRITERIA CATEGORY	RENEWAL EVALUATION CRITERIA	SOURCE FOR CRITERIA	TIME FRAME	CALCULATION	FULL POINTS	PARTIAL POINTS ²	ZERO POINTS	TOTAL POINTS
			(Summary or Balance Sheet)				some ¹⁰ findings	has reportable conditions	
		9 LOCCS ¹¹	LOCCS Payment Voucher	10/1/14-9/30/15	(Start Date of NOFA – Start Date of Contract)/365 and Total Disbursed / Total Authorized	Within (+ or -) 5%	Within (+ or -) 10%	<10%	10
45%	HIMIS ¹² & DATA QUALITY	10 HIMIS Data Quality	HIMIS Report: 0252 Data Completeness Report Card (EE)	10/1/14-9/30/15	Utilize % for "Overall" (Cell G4) on Tab B of Report (Report Date 8/5/2016 ¹³)	>90%	80-90%	<80%	90
		N/A HIMIS Site Visit	Site Visit Scoresheet	Will be scored for NOFA FY2017	Site Visit Score	N/A	N/A	N/A	N/A
100%					TOTAL				200
PENALTY					Application turned in after designated time ¹⁴				-25
					PH: Less than 90% of program entries are from Coordinated Assessment ¹⁵				-25
					Program does NOT utilize a Housing First approach ¹⁶				-75
BONUS					PH: Average Length of time from Application Received to Move-in <90 days ¹⁷				+25
SCORED IN 2017					Program meets designated target for positive client feedback regarding services.				N/A

¹⁰ The Review and Ranking Committee reserves the right to reach out to agencies for more information if their audit shows "some" findings in order to gather more information.

¹¹ LOCCS stands for Line of Credit Control System. For the 2016 NOFA, the LOCCS Payment Voucher will serve as the source for scoring.

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¹⁶ Housing First is an "approach to homeless assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold" (NOFA 2016).

¹⁷ For Agencies who submit quarterly performance reports to Mecklenburg County, agencies will provide annual, cumulative percentage for outcome measure: ((Date Application Received to Date of Lease Signing for Each New Client Successfully Housed)/Number of New Persons Successfully Housed). For all other agencies, they will provide spreadsheet for all new program entries during FY2016 time frame (10/1/14-9/30/15) by the total number of entries and the average time for that total population (time of application received to the time they sign their lease divided by the total number of people successfully housed).

Pfeiffer, Rebecca

From: Gaertner, Mary
Sent: Tuesday, July 19, 2016 5:19 PM
To: Deronda.Metz@uss.salvationarmy.org; nicoled@communitylinknc.org; Randall.Hitt@MensShelterOfCharlotte.org; pamela@aplacetoiveagain.org; chammock@urbanministrycenter.org; jcoble@friendshipcdc.org; dthompson@fcsnc.org; bgraham@therelatives.org; rgibbs@hopehaveninc.org; Lowry, Stacy M.
Cc: Pfeiffer, Rebecca
Subject: CoC 505 NOFA project competition phase
Attachments: FY2016 Competition Notice final 7.18.16.pdf; 2016 NOFA Application Checklist.pdf; 2016 NOFA Scorecard NEW PROJECTS Final 15 July 2016.pdf; 2016 NOFA Scorecard RENEWAL PROJECTS Final Version 15 July 2016.pdf; Information Sheet for 2016 NOFA Scorecard.pdf

Thank you for interesting in applying for 2016 Continuum of Care Funds. After reviewing your Letter of Interest you have been recommended to move on to the project competition phase where you will submit application packages for individual projects you are requesting to be funded.

Please see the attached [Notice of Project Process Competition](#) for complete information including required documents and due date. The following documents are also attached for your reference:

- CoC Statement regarding FY2016 NOFA Competition
- Project Application Checklist
- New Project Application Scorecard
- Renewal Project Application Scorecard
- Information Sheet on FY2016 NOFA Scorecard

This information can also be located at <http://charmeck.org/city/charlotte/nbs/Pages/default.aspx> under the News section (top right on the page).

Mary Gaertner

NEIGHBORHOOD PROGRAM COORDINATOR
NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte
600 E. Trade St. Charlotte, NC 28202
PHONE: 704-432-5495
MOBILE: 704-726-9359

Working to make Charlotte's neighborhoods and businesses healthy and vibrant
<http://nbs.charlottenc.gov>

charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx

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 2016 Continuum of Care Application

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Print Feedback

**Charlotte-Mecklenburg Continuum of Care
 2016 New & Renewal Projects
 Request for Letter of Interest for Continuum of Care Program
 Due Friday July 15, 2016**

The Charlotte- Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds.

This announcement serves as the opportunity for agencies to submit a Letter of Interest (LOI) for funding for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

Click here for complete information.

charmeck.org/city/charlotte/nbs/housing/housingcoalition/Pages/COC.aspx

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Charlotte > Neighborhood & Business Services > Housing Services > Charlotte-Mecklenburg Coalition for Housing > 2016 Continuum of Care Application

Print Feedback

**Charlotte-Mecklenburg Continuum of Care
 2016 New & Renewal Projects
 Request for Letter of Interest for Continuum of Care Program
 Due Friday July 15, 2016**

The Charlotte- Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds.

This announcement serves as the opportunity for agencies to submit a Letter of Interest (LOI) for funding for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

Click here for complete information.

**Charlotte-Mecklenburg Continuum of Care
 2016 New & Renewal Projects
 Notice of Project Process Competition
 Due Friday August 12, 2016**

The Charlotte-Mecklenburg Continuum of Care is charged by the US Department of Housing and Urban Development (HUD) to submit a community-wide application for homeless assistance funds.

This announcement serves as the opportunity for eligible agencies to submit an application package for new and/or renewal projects as part of the HUD Continuum of Care (CoC) Homeless Assistance Grants Competition.

Please see the Notice of Project Process Competition for complete information including required documents and due date. The following documents are also attached for your reference:

- CoC Statement regarding FY2016 HACFA Competition
- Project Application Checklist
- New Project Application Scorecard
- Renewal Project Application Scorecard
- Information Sheet on FY2016 HOFA Scorecard
- CoC Reallocation Process



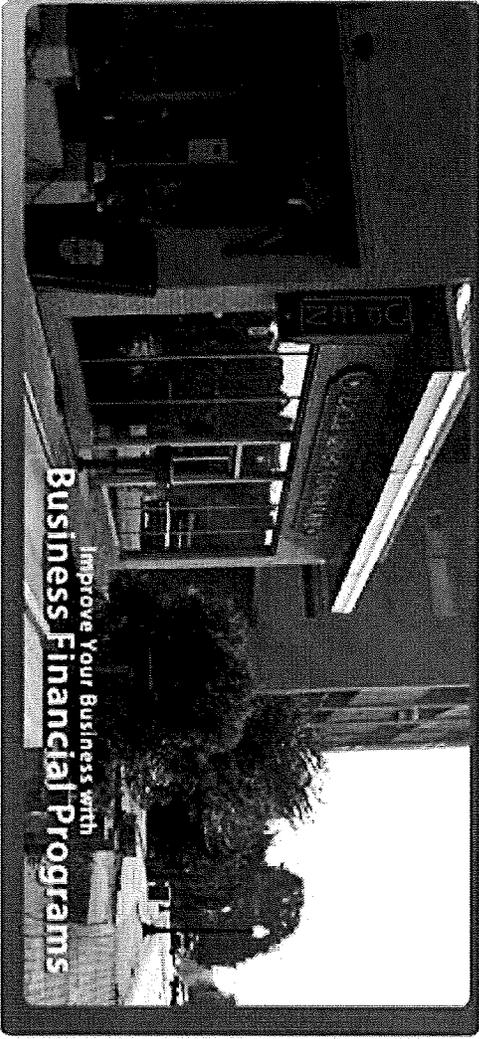
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BusinessDirect Charlotte | Business

2016 Neighborhood Board Retreat



The Impact of MBS

Saturday July 16, 2016, 8am-10am
UMCC Center City Campus 320 East 9th Street



The FY 2015 Continuum of Care Program Funding Process Competition Open

*The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2015 Funds in the FY 2015 Continuum of Care (CoC) Program Competition (FY 2015 CoC Program Funding Notice) is available at <https://www.hudexchange.info/e-snaps/fy-2015-coc-program-nofa-coc-program-competition/>. The FY 2015 CoC Priority Listing and Project Applications are now available in *e-snaps*.*

Project Applications for all new and renewal projects (including Bonus projects) are due to the Charlotte Mecklenburg CoC c/o Rebecca Pfeiffer, The City of Charlotte, Neighborhood & Business Services via email to rpfeiffer@charlottenc.gov on or before **5:00 p.m., Tuesday, October 20, 2015**, for review and ranking by the Continuum of Care funding subcommittee.

- HUD strongly encourages Collaborative Applicants, project applicants, project sub-recipients, and other CoC stakeholders to review the FY 2015 CoC Funding Notice, FY 2015 CoC Program Competition NOFA, FY 2015 General Section NOFA, and General Section Technical Correction to ensure proper consideration of all application requirements.

Project Applications will be reviewed and written notification regarding whether their project application(s) would be included as part of the CoC Consolidated Application submission to all project applicants no later than close of business November 6, 2015.

To be eligible to submit an application for a new or CoC Planning Project the applicant/agency must:

1. Meet all requirements found in the FY 2015 CoC Funding Notice.
2. Be an active CoC member or commit to attending bi-monthly meetings.
3. Complete the on-line Project Application and submit it in PDF format to the Rebecca Pfeiffer by **5:00 p.m., October 20, 2015** for review and ranking by the CoC, and;
4. Be financially responsible for any match requirement.

Additional information can be found at www.hudexchange.info or you may contact Rebecca Pfeiffer at 704-622-4708 or by email at rpfeiffer@charlottenc.gov.



NEIGHBORHOOD & BUSINESS SERVICES

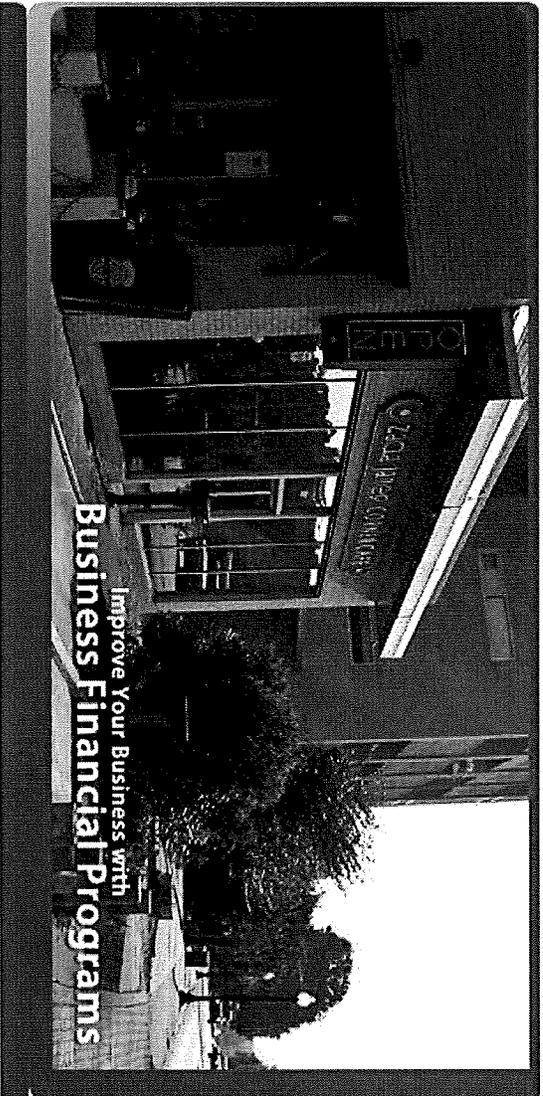
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- FY2015 Continuum of Care Competition Notice
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Mecklenburg County
Community Support
Services

NEWS RELEASE

FOR IMMEDIATE RELEASE

INFORMATION ON AVAILABLE FUNDING FOR CONTINUUM OF CARE HOUSING PROJECTS FOR SPECIFIED HOMELESS POPULATIONS

Charlotte, NC- Every year the U.S. Department of Housing and Urban Development (HUD) awards funding to communities to assist homeless and disabled citizens with housing. HUD has recently announced its Continuum of Care Notice of Funding Availability (NOFA) for projects.

This is a competitive grant opportunity available to local Continuum of Care communities. HUD will consider both new and continuing projects, including Bonus projects, provided they meet the eligibility criteria summarized below. In 2014, HUD has allocated \$3,663,224 for new and continuing projects; and, \$549,483 for one new Bonus projects for the Charlotte-Mecklenburg Continuum of Care (CoC) as a whole.

Eligibility Criteria and Selection Process

The CoC is committed to a fair and open process to select the projects that will receive funding via the 2014 NOFA. A Review Committee of the Charlotte-Mecklenburg CoC has been charged with the task of selecting and prioritizing all project applications. Selection criteria will be based on the following: (1) past performance, including outcome measures, for relevant projects, whether previously HUD-funded or not; (2) alignment with community service needs and gaps; and, (3) alignment with HUD's current funding priorities.

If you are interested in applying for 2014 project funds, whether new/Bonus or continuing funds, you must attend the Applicant Information Meeting on Wednesday, September 24, 2014

Project Selection Process

Applicant Information Meeting
Hal Marshall Center, 700 N. Tryon,
Charlotte. Basement, Hoffman Conference
Room

December 5, 9:00 a.m.

Project Application Due Date:

October 6, 2014, 11:59 p.m.
NO EXCEPTIONS

Project Notification

October 20, 2014

Entire NOFA grant application submitted to
HUD:

October 30, 2014

Media Contact: Peter Safir at 704-336-3100 or Peter.Safir@MecklenburgCountyNC.gov

Pfeiffer, Rebecca

From: Parker, Kimberly M. <kmparker@achildsplace.org>
Sent: Tuesday, September 23, 2014 8:43 AM
Subject: HSN FW: Available Funding for Continuum of Care Housing Projects
Attachments: 2014 CoC Notice of Funding Availability (NOFA).pdf

Please see the attached.

Thank you,

Kim

From: Pfeiffer, Rebecca [mailto:rpfeiffer@ci.charlotte.nc.us]
Sent: Monday, September 22, 2014 4:29 PM
To: Parker, Kimberly M.
Subject: Available Funding for Continuum of Care Housing Projects

Gainor and Kim, please forward to CoC & HSN. Thank you.

Every year the U.S. Department of Housing and Urban Development (HUD) awards funding to communities to assist homeless and disabled citizens with housing. HUD has recently announced its Continuum of Care Notice of Funding Availability (NOFA) for projects.

This is a competitive grant opportunity available to local Continuum of Care (CoC) communities. HUD will consider renewal projects and a Bonus project, provided they meet the eligibility criteria summarized below. In 2014, HUD has allocated \$3,663,224 for new and renewal projects; and, \$549,483 for one new Bonus project for the Charlotte-Mecklenburg CoC.

Eligibility Criteria and Selection Process

The CoC is committed to a fair and open process to select the projects that will receive funding via the 2014 NOFA. A Review Committee of the Charlotte-Mecklenburg CoC has been charged with selecting and prioritizing all project applications. Selection criteria will be based on the following: (1) past performance, including outcome measures for relevant projects, whether previously HUD-funded or not; (2) alignment with community service needs and gaps; and, (3) alignment with HUD's current funding priorities.

If you are interested in applying for 2014 Bonus project funds, please plan to attend an information meeting on Thursday, September, 25, 2014, immediately following the Homeless Services Network meeting at Hope Haven, 3815 N. Tryon Street Charlotte, NC 28206.

Rebecca Pfeiffer, MSW
Charlotte-Mecklenburg Continuum of Care

NEIGHBORHOOD & BUSINESS SERVICES
City of Charlotte

Pfeiffer, Rebecca

To: Pfeiffer, Rebecca
Subject: RE: Charlotte-Mecklenburg CoC Application Information

From: Gainor Eisenlohr [<mailto:geisenlohr@cha-nc.org>]

Sent: Saturday, October 19, 2013 8:52 PM

To: Alice Harrison ; Amy Leary; Angela W. Walters; Beth Maynard; Caroline Chambre; Carson Dean; Charles Page ; Charles Robinson; Cheryl Carrothers; Chidarrell Palmer-Glaze; Daphne Waugh; Darren Ash; Delia Joyner; Deronda Metz; Eric Young; Ginny Rainwater; Hasan, Baseemah; Jennifer Coble; John Burns; 'JYaeger@urbanministrycenter.org'; Karen Kovach ; Kay Prioleau; Kecia Robinson ; Kelly Lynn; Kenneth Smith; Keshia Sandidge; 'Ligia Mason'; Loretta Tillman; Mackie Johnson; Mary Ashley Milano Barnett; Mary Gaertner; Megan Coffey; Melissa Mummert; Melissa Thompson; Melonie Grier (melonieg@carolinascare.org); Mike Harmon; Nicole Dewitt; Pamela Jefsen; Peter Safir ; Priester, Mary Ann; Rebecca Pfeiffer; Rohan Gibbs ; Roosevelt Matthews (roosevelt.matthews@gmail.com); Roxianna Johnson ; Sandra Reid; Sharon Kugelmass; Thelma Reynolds ; Tierra Owens; Tori Sweeting ; Trish Fries; UMC Development Staff; Veronica Jones; Yvonne McJetters ; Zelleka Biermann; Zhiss, Melissa

Subject: FW: Charlotte-Mecklenburg CoC Application Information

See below

Gainor Eisenlohr
Grant Writer
Charlotte Housing Authority
1301 South Blvd.
Charlotte, NC 28203

Tel: 704.353.0292
Fax: 704.336.5237
E-mail: geisenlohr@cha-nc.org

www.cha-nc.org



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From: Pfeiffer, Rebecca [<mailto:rpfeiffer@ci.charlotte.nc.us>]
Sent: Friday, October 18, 2013 2:14 PM
To: Gainor Eisenlohr; Parker, Kimberly M. (kmparker@achildsplace.org)
Cc: Waugh, Daphne X.; Gaertner, Mary
Subject: Charlotte-Mecklenburg CoC Application Information

Gainor/Kim, please forward to the CoC & HSN. Thank you.

Charlotte-Mecklenburg CoC Application Information

The CoC application cycle occurs on an annual basis. The application begins when HUD publishes the NOFA (Notice of Funding Availability) in the Federal Register.

The 2013 application is expected to be released within the next 30 days. If you are interested in applying for a new project in 2013, please fill out the attached Intent to Apply Form and submit via email to Rebecca Pfeiffer at rpfeiffer@charlottenc.gov by Friday, October 25, 2013.

Rebecca Pfeiffer, M.S.W.

Charlotte-Mecklenburg Continuum of Care

NEIGHBORHOOD & BUSINESS SERVICES

City of Charlotte

PHONE: 704-336-2266

MOBILE: 704-622-4708

FAX: 704-632-8500

rpfeiffer@charlottenc.gov

Working to make Charlotte's neighborhoods and businesses healthy and vibrant

<http://nbs.charlottenc.gov>

**Charlotte-Mecklenburg Continuum of Care
2013 Funding Cycle
Intent to Apply**

If you are interested in applying for Continuum of Care funds in the 2013 application cycle, please fill out this form. This form is only for new projects. Renewal projects do not need to complete this form.

Name of Organization _____

Address _____

Primary Contact Name _____

Title _____

Phone _____

Email _____

Indicate the type of project for which you are interested in applying for Transitional Housing, Permanent Supportive Housing, Rapid Re-Housing or Supportive Services Only.

Targeted population of project _____

2013 Continuum of Care Funding Recommendations
1.16.2014

Type	Component	Agency	Project Title	2013 renewals	Requested	Recommended	Ranking
Renewal	PH	Meck. Co. Homeless Support Services	SPC Renewal A-13	\$ 1,625,439	\$ 1,625,439	\$ 1,625,439	1
Renewal	PH	Meck. Co. Homeless Support Services	SPC Smartlan Renewal B-13	\$ 112,392	\$ 112,392	\$ 112,392	2
Renewal	PH	Hope Haven	Phase IV Permanent Housing	\$ 52,867	\$ 52,867	\$ 52,867	3
Renewal	PH	Urban Ministry	Homeless to Homes	\$ 51,020	\$ 51,020	\$ 51,020	4
Renewal	PH	Supportive Housing Communities	McCreesh Place Supportive Services	\$ 33,333	\$ 33,333	\$ 33,333	5
Renewal	PH	Meck. Co. Homeless Support Services	SPC - Samartan Bonus C-13	\$ 94,490	\$ 94,490	\$ 94,490	6
Renewal	TH	Salvation Army	STRETCH Transitional Housing (15% reduction off renewal \$)	\$ 87,499	\$ 78,749	\$ 87,499	10
Renewal	TH	Salvation Army	SATH Transitional Housing (15% reduction off renewal \$)	\$ 226,646	\$ 203,971	\$ 192,649	11
Renewal	TH	Hope Haven	Transitional Housing (15% reduction off renewal \$)	\$ 383,500	\$ 345,150	\$ 325,975	12
Renewal	TH	Community Link	Assessment and Supportive Housing (15% reduction off renewal \$)	\$ 459,665	\$ 427,643	\$ 390,715	13
Renewal	SSO	Meck. Co. Homeless Support Services	Homeless Support Services (opted not to requested renewal)	\$ 145,136	\$ -	\$ -	
Renewal	SSO	Meck. Co. Area MH/DD, SA Authority	ACCESS (25% reduction off renewal \$)	\$ 361,127	\$ 324,874	\$ 270,845	17
Renewal	SSO	Hope Haven	Vocational Training (25% reduction off renewal \$)	\$ 53,980	\$ 38,461	\$ 40,485	16
Renewal	HMIS	NC Housing Coalition	CHIN HMIS	\$ 63,000	\$ 63,000	\$ 63,000	15
New	PH	Salvation Army	Rapid Re-Housing	\$ -	\$ 54,153	\$ 54,153	9
New	PH	Supportive Housing Communities	Scattered Site Permanent Supportive Housing (changed from 5 yr grant term to 1 yr & \$ 6,674 to match remaining amount available)	\$ -	\$ 299,307	\$ 140,956	8
New	PH	Urban Ministry Center	Moore Place Expansion (changed from 5 yr grant term to 1 yr)	\$ -	\$ 424,576	\$ 84,915	7
			Subtotal Tier I	\$ 3,750,094	\$ 4,229,425	\$ 3,607,608	
Renewal	Planning	City of Charlotte, Neighborhood & Business Services	Planning	\$ 47,388	\$ 47,388	\$ 47,388	14
New	PH	Community Link	Scattered Site Permanent Supportive Housing (\$9,914 reduction to match remaining amount available)	\$ -	\$ 152,400	\$ 142,486	18
			Subtotal Tier II	\$ 47,388	\$ 199,788	\$ 189,874	
			Total	\$ 3,797,482	\$ 4,429,213	\$ 3,797,482	

PH Permanent Housing
TH Transitional Housing
SSO Supportive Services Only

Mecklenburg County Continuum of Care

Meeting Minutes

1-15-14

Present: Gainor Eisenlohr, Pamela Jefsen, Nicole DeWitt, John Yaeger, Deronda Metz, Peter Safir, Beth Maynard, Pam Neal, Traci Carter, Justin Markel, Megan Coffey, Kathy Granger, Rebecca Pfeiffer, Daphne Waugh, Delia Joyner

CoC chair Rebecca Pfeiffer called the meeting to order and provided the Continuum members present a handout listing the 18 projects, their recommended funding level and their ranking by the selection committee. She provided the names of the Selection Committee and explained their decision-making process. She answered questions about the process and told the group which projects were in Tier 1 and Tier 2. She made sure the Continuum knew that funds had been reallocated from Transitional Housing and Supportive Services Only to make room for more permanent housing. This is the first year this Continuum has done a reallocation.

Once all questions were answered Rebecca asked if the group wanted a private or public vote. Hearing no suggestions, she asked for all those in favor of adopting the committee's recommendation to raise their hand. The Continuum voted unanimously to accept the Review Committee's recommendations on projects, funding levels and priority ranking.

Submitted by: Gainor Eisenlohr

3 Appointed by Mayor
8 Appointed by City Council
5 Appointed by County Commission
3 Ex-Officio

HOUSING ADVISORY BOARD OF CHARLOTTE MECKLENBURG
FORMERLY THE CHARLOTTE MECKLENBURG COALITION FOR HOUSING
(16 Members)

Membership – The Community based board to implement the Ten-Year Plan to End and Prevent Homelessness was approved by City Council at their May 24, 2010 meeting.

Initial terms shall be staggered and subsequent terms will be for three years. Members will serve no more than two consecutive full terms with initial terms counting as a full term.

Mayor shall appoint the first Chair who shall serve as Chair for three years. Appointment of Chair shall rotate between City, County and Foundation For The Carolinas.

The City Council (on July 28, 2014) and the Mecklenburg County Board of Commissioners (on August 5, 2014) approved the expansion of the Coalition and amended the responsibilities to include serving as the Governing Board for the Charlotte-Mecklenburg Continuum of Care to be in compliance with the HEARTH Act of 2009.

Mayor shall appoint representatives of non-profit, corporate/economic development and faith-based groups. City Council shall appoint representatives of the general community, affordable housing, donors, financial, real estate, legal, hospitals and a homeless or formally homeless individual. County Commissioners shall appoint representatives of public safety, education, human services, veterans and school districts. Ex-officio members shall be the Neighborhood and Business Services Director (City), Community Support Services Director (County) and Charlotte Housing Authority CEO.

Responsibilities – Principle functions of the Board are to ensure implementation of the Ten Year Plan which is mandated by HUD and to serve as the governing board for the Charlotte Mecklenburg Continuum of Care . Goals of the 10-Year Plan include facilitating safe and permanent housing for homeless families and individuals; encouraging intensive outreach and engagement; and promoting housing stability for those most at-risk of becoming homeless. Goals of the Continuum of Care include promoting community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; oversee HMIS administration as outlined in NCHMIS MOU and improve data collection and performance measurement; and optimize self-sufficiency among individuals and families experiencing homelessness.

Legend:

AH	Affordable Housing	H	Hospitals
COM	Community	HS	Human Services
CORP	Corporate/Economic Development	L	Legal
D	Donor/Philanthropic	NP	Non-Profit
ED	Education	PS	Public Safety
FB	Faith Based	R	Real Estate
FH	Formally homeless	SD	School District
FI	Financial	V	Veterans Organizations

Appointed by Mayor		Date Appointed	Term Expires
Name	Represents		
Rev. Nicole Martin	Faith Community	7.15.14	6.30.17
Brian Collier	Non-Profit	8.12.15	6.30.18
John Stokes	Corporate/Economic Development	7.1.16	6.30.19
Appointed by City Council		Date Appointed	Term Expires
Name	Represents		
Dennis Boothe	Affordable Housing	3.25.13	6.30.17
vacant	Finance		
Joe Padilla	Real Estate	7.1.16	6.30.19
Melanie Sizemore	Donor/Philanthropic	7.1.16	6.30.19
Carrie Cook	Community	11.23.16	6.30.18
Brandon Lofton	Legal	6.12.15	6.30.18
Brian Middleton	Hospitals	5.24.16	6.30.18
Justin Markel	Formerly homeless/homeless	10.29.14	6.30.17
Appointed by County Commissioners		Date Appointed	Term Expires
Name	Represents		
Joe Penner	Public Safety	6.18.13	6.30.17
Laura Clark	Human Services	7.1.16	6.30.19
Amy Hawn Nelson	Education	7.1.15	6.30.18
Marian Yates	School District	6.23.16	6.30.18
Kimberly Stephens	Veterans Organization	10.7.14	6.30.17
Ex-officio			
Pat Mumford	City	n/a	
Stacy Lowry	County	n/a	
Fulton Meachem	Charlotte Housing Authority	n/a	

**Memorandum of Understanding
North Carolina Statewide HMIS
North Carolina Continua of Care and the Michigan Coalition Against Homelessness
July 1, 2016 – June 30, 2017**

Objective: This MOU is designed to provide a frame for North Carolina’s multi-jurisdiction HMIS implementation as presented in Section 508.7 of the Federal Register / Vol. 76, No. 237 Homeless Management System Requirements. It is recognized that operation of the Statewide HMIS requires ongoing collaboration from member Continua of Care.

Continuum of Care (CoC): Charlotte-Mecklenburg (NC-505) agrees to adopt the North Carolina Statewide shared HMIS platform vendor, Bowman Systems Inc. ServicePoint. The CoC agrees that administration of the shared platform will be provided by the North Carolina HMIS Project, operated by the Michigan Coalition Against Homelessness. The CoC further agrees to operate the local CoC Implementation in compliance with HUD Data Standards and the North Carolina Statewide Operating Policies and Procedures.

Roles and Responsibilities:

Michigan Coalition Against Homelessness:

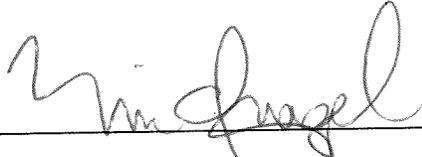
1. Management of the Statewide Vendor Contract with Bowman Systems, Inc.
2. Host the Statewide coordination meeting – the Monthly SA Call-In.
3. Define privacy and security protocols that allow for the broadest possible participation.
4. Provide Statewide Operating Policies and Procedures that represent the minimum standards for participation. Local CoCs may add additional requirements as negotiated locally.
5. Designate ex-officio staff member for NC HMIS Governance Committee
6. Provide for system administration and analyst staffing of help desk services between 9am and 5pm workdays and after-hours emergency response.
7. Negotiate the cost for local licenses to the Statewide System via contracts with Bowman Systems.
8. Provide training and ongoing collaboration regarding cross-jurisdiction system operation, measurement and research activities including:
 - a. Negotiation and training basic workflows for all users and specialized workflows for cross-jurisdiction funding streams.
 - b. HUD mandated activities including Point In Time, Housing Inventory Count, Annual Performance Report and the Annual Homelessness Assessment Report.
 - c. Provide data for Statewide and CoC-specific unduplicated homeless counts.
 - d. Research projects that involve statewide data sets.

- e. Maintain a suite of data quality, demographics, and outcome reports available to all CoCs on the System.
- f. Support for local Continuous Quality Improvement efforts.
- 9. Execute Contract for Services with CoC-designated fiduciary entities.
- 10. Provide the NC HMIS Governance Committee monthly reports updating the status and accomplishments of the NC HMIS project.

North Carolina Continua of Care:

- 1. Designate HMIS system
- 2. Designate CoC members and CoC alternates to NC HMIS Governance Committee
- 3. Ensure consistent participation of recipients and sub recipients in the HMIS
- 4. Uphold Cost-sharing agreement set by Governance Committee, including no/late-payment consequences
- 5. Plan the local HMIS implementation to maximize the greatest possible participation from homeless service providers.
- 6. To the extent permitted by the law, comply with North Carolina Statewide Privacy Protocols as specified in the Administrative and Sharing Qualified Services Organization Business Associates Agreements (QSOBAAs), Participation Agreements and the User Agreement Code of Ethics.
- 7. Adopt any additional standards of practice beyond those identified in the Statewide HMIS Operating Procedures.
- 8. Staff at least one local System Administrator and assure that each participating agency has identified an Agency Administrator. The System Administrator will:
 - a. Demonstrate competence in required training in privacy, security and system operation (e.g. provider page, workflows and reports).
 - b. License local users and support data organization and completion of Provider Pages for participating agencies.
 - c. Assign licenses to Agency Administrators and/or users.
 - d. Host local HMIS operations meeting(s) and/or assure that Agency Administrators are attending the Statewide User Meetings.
 - e. Assure that all users are trained in privacy, security and system operation.
 - f. Participate in HUD mandated measurement including PIT, HIC, APRs and the AHAR as appropriate.
 - g. Participate in the annual PIT count process and support publication of local reports.
 - h. Support the CoC's Continuous Quality Improvement efforts.
- 9. Through the Governance Committee, CoCs will:
 - i. Review, revise and approve Privacy, Security and Data Quality Plans
 - j. Ensure HMIS is administered to meet HUD standards
 - k. Approve MCAH budget and technical agreements

10. Designate fiduciary responsible for entering into a Contract for Services with HMIS Lead Agency
11. Designate eligible applicants to receive HMIS funds that will best allow them to participate in the statewide HMIS

Signed:  Date: 7/11/16
HMIS Lead Agency: MCAH Title: Exec. Director

Signed:  Date: 28 June 16
CoC Representative: Josef H Penn Title: Chair, Housing Advisory Board

North Carolina Statewide Homeless Management System (NC HMIS) Operating Policy and Procedure

The purpose of HMIS is to record and store client-level information about the numbers, characteristics and needs of persons who use homeless housing and supportive services, to produce an unduplicated count of homeless persons for each Continuum of Care; to understand the extent and nature of homelessness locally, regionally and nationally; and to understand patterns of service usage and measure the effectiveness of programs and systems of care. These are minimum standards, additional Policies and Procedures may be added by the local Continuum of Care. **The following operating policies and procedures apply to all designated HMIS Lead Agencies and participating Agencies (Contributing HMIS Organizations – CHOs).**

PRIVACY STATEMENT

NC HMIS is committed to make North Carolina's HMIS safe for all types of programs and the clients whose information is recorded, and to maximize the opportunities to improve services through automation.

Toward that end:

- Sharing is a planned activity guided by Sharing Agreements between agencies (QSOBAAs). The agency may elect to keep private some or all of the client record including all identifying data.
 - All organizations will screen for safety issues related to the use of the automation.
- NC HMIS has systematized the risk assessment related to clients through the NC HMIS Release, offered options in terms of the Search Screen, and provided guidance around the use of Un-Named Records and how the Privacy Notice is explained.
- NC HMIS has adopted a Privacy Notice that was developed in North Carolina to cover both HIPAA covered and non-covered organizations.
 - The NC HMIS System runs in compliance with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to insure that the broadest range of providers may participate in the Project.
 - Privacy Training is a requirement for all agencies and users on the NC HMIS system. We view our Privacy Training as an opportunity for all participating organizations to revisit and improve their overall privacy practice. Agencies are encouraged to put all of their staff through the training curricula – not just those with user access to the system and/or those that collect information from clients.
 - All those issued user access to the system must successfully complete privacy training and sign a User's Agreement and Code of Ethics, and agencies must sign a NC HMIS Participation Agreement. Taken together, these documents obligate participants to core privacy procedures. If agencies decide to share information, they must sign an agreement that defines sharing practice (the Sharing QSOBAA).
 - Policies have been developed that protect not only client's privacy, but also agency's privacy. Practice Principles around the use and publication of agency or CoC specific data have been developed and included in both the Policies and Procedures.
 - The NC HMIS System allows programs with multiple components/locations that serve the same client to operate on the a single case plan, reducing the amount of staff and client's time spent in documentation activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.

□ It is understood that 2015 represents a development period as participants in NC HMIS adopt a new approach to System operation as well as privacy. Agencies will take some time to effect the changes identified in this Policy and mid-course adjustments may occur. As such, the policies and procedures identified in this document represent basic standards and all participating agencies will be given adequate time and support to come into compliance. Local CoCs may adapt this document to apply a stricter standard and may establish local timelines for full implementation.

Key Terms and Acronyms:

Term	Acronym (if used)	Brief Definition
Homeless Management Information System	HMIS	Data systems that meet HUD requirements and are used throughout the nation to measure homelessness and the effectiveness of related service delivery systems. The HMIS is also the primary reporting tool for HUD homeless service grants as well as other public money's related to homelessness.
Continuum of Care	CoC	Planning body charged with guiding the local response to homelessness.
North Carolina HMIS	NC HMIS	Title given to the North Carolina statewide implementation of the HMIS.
Michigan Coalition Against Homelessness	MCAH	The North Carolina Governance Committee and participating CoCs has employed MCAH to act as the Lead HMIS administrator.
ServicePoint	SP	The database used by North Carolina to record and report HMIS information.
Bowman System, Inc		North Carolina's Vendor for HMIS. They provide the technology (ServicePoint) and software and server support for the System.
Independent Jurisdictions	IJs	CoCs that are recognized by HUD usually organized around the higher population counties. Detroit is its own IJ.
North Carolina HMIS Governance Committee	GC	The NC Governance Committee composed of representatives from all CoC provides direct oversight on the Statewide HMIS project.
MCAH Interim Memorandum of Understanding	MOU	The Interim MOU enables MCAH to serve as the HMIS Lead Agency and administer the statewide HMIS implementation on behalf of the North Carolina CoCs.
Contributing HMIS Organizations	CHO	An organization that participates on the HMIS.
Participation Agreement		The Agreement between all participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies.
NC Administrative Data Use Agreement / QSOBAA	Admin. QSOBAA	The Agreement signed by each Agency, local Lead HMIS Agency, and MCAH that governs the privacy standards for all those with administrative responsibility for the database
NC Sharing Agreement / QSOBAA	Sharing QSOBAA	The Agreement between agencies that elect to share information using the HMIS. The Agreement prevents the re-release of data and, in combination with the Participation Agreement, defines the rules of sharing.
User Agreement & Code of Ethics		The document each HMIS User signs agreeing to the HMIS standards of conduct.
Release of Information (Electronic)	ROI	An electronic ROI must be completed to share any person's data within the HMIS.
Privacy Notice		A document that details the Privacy rules applied to the System. It includes a description of the HMIS, the rights of clients, why we collect data and the legal uses of data/disclosures. It must be available to clients and be present on the agencies WEB Site.
HUD Public Notice		A description of why HUD requires grantees to collect information. It must be posted where-ever information is collected.
Privacy Script		Adapted by agencies based on what they collect and their sharing practice, the "script" is used by intake staff to standardize the privacy discussion with every client and is a critical part of the informed consent process.

NC HMIS Release of Information and Sharing Agreement	Release	A signed (paper) Release that specifies how the Search Screen will be configured and details each agencies sharing plan to support an “informed consent” process. A signed Release allows for reciprocal sharing between agencies/programs identified in the Release.
Sharing		Sharing refers to the sharing of data between agencies. It does not refer to basic entry into the HMIS. Sharing data between agencies requires a signed client Release of Information. Basic entry does not require an ROI as there is implied consent for the agency to keep records when a client provides information.
Visibility		Refers to the ability to see a client’s data between provider pages on the HMIS. Visibility is configured on the HMIS system in each Provider Page.
Visibility Groups		Visibility Groups are defined groups of Provider Pages where data is shared. Internal Visibility Groups control internal sharing. External Visibility Groups control sharing with other agencies and are defined with a Sharing QSOBAA.
Coverage Rate		The percent of the homeless population that is measured on the HMIS. Coverage estimates are used to project to a total homeless count that includes those served in Domestic Violence Providers or other non-participating Shelters or Outreach Programs. Coverage Memos provide guidance for estimating coverage. HUD also defines Bed Coverage (beds covered on the HMIS) and Service Coverage (person coverage for none residential programs).
Program Types		HUD defines 9 basic Program Types
		<ul style="list-style-type: none"> • ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of less than 3 months. • TH: Transitional Housing- Transitional environments with a planned LOS of not more than 2 years and provide supportive services. • PH-PSH: Permanent Supportive Housing- Permanent Housing for the formerly homeless with services attached to persons served under this program. • PH-PH: Permanent Housing- Permanent housing that may be supported by a voucher but does not have services attached to the housing. • PH- RRH: Rapid Rehousing- A program that rapidly rehouses those that are identified as Literally Homeless. • HP: Homeless Prevention- A program that helps those who are at imminent risk of losing housing, to retain their housing. • SOP: Street Outreach Program- A program that serves homeless persons that are living on the street or other places not meant for habitation. • SSO: Services Only Program- A program that serves only with no residential component. These programs often provide case management and other forms of support and meet with clients in an office, at the household’s home, or in a shelter. • Safe Haven: A program that provides low-demand shelter for hard-to-serve persons with severe disabilities. The clients have often failed in other sheltering environments.
Length of Stay	LOS	The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates. The HMIS offer calculations for discrete stays as well as the total stays across multiple sheltering events.
Point in Time Count	PIT	An annual count during the last week in January that is required for all CoCs. Every other year, that count also includes an “unsheltered” or street count.
Housing Inventory Chart	HIC	All residential programs (both HMIS and non-participating) must specify the number of beds and units available to homeless persons. The numbers are logged into related Provider Pages where the corresponding person data is recorded (for participating programs).
SOAR Across North Carolina	SOAR	Using the national “best practice” curriculum, the SOAR project reduces barriers to and supports the application for Supplemental Security Income or

		Supplemental Security Disability Insurance (SSI/SSDI) for North Carolina’s disabled homeless people.
Emergency Assistance Network	EAN	EAN agencies provide a mix of emergency services for people in need and report to funding organizations through NC HMIS.
Homeless Definition		<p>See Homeless Definition Crosswalk. HEARTH defines 4 categories of homelessness. Not all programs can serve all categories and some may utilize a different definition when delivering services. NC HMIS has adopted the HUD definition for counting the homeless.</p> <ul style="list-style-type: none"> • Category 1: Literally Homeless • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statute • Category 4: Fleeing/Attempting to Flee DV
Projects for Assistance in Transition from Homelessness	PATH	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides services to mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This program has different reporting requirements than HUD funded programs and uses HMIS to collect this information.
Shelter Plus Care	S+C	Refers to a federal program that provides Permanent Supportive Housing to disabled persons throughout the State of North Carolina. With the new HEARTH Regulation S+C was folded into CoC programming.
Housing Opportunities for Persons with AIDS	HOPWA	HOPWA provides housing assistance and related supportive services for persons with HIV/AIDs and family members who are homeless or at risk of homelessness. This program has different program reporting requirements than the other HUD-funded programs in this document.
Runaway and Homeless Youth Programs	RHY	RHY provides a range of services to youth up to age 21 experiencing homelessness. This federal program is required to participate on the HMIS effective 10/1/2014 and has specific operating rules.
Coordinated Assessment Programs	CA	North Carolina has implemented plans to better coordinate services to homeless persons. Each CoC must develop a plan based on their local providers and resources. The shared objective of these locally defined processes is to insure that access to homeless resources is optimized and based on a standardized assessment of need.

Policy Disclaimers and Updates

Operating Procedures defined in this document represent the minimum standards of participation on NC HMIS and general “best practice” operation procedures. Local Lead Agencies in coordination with their CoCs may include additional standards.

The Standards described in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA, RHY and VA providers have operating rules specific to HHS and the VA.

The NC HMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of the annual review. Updates will be reviewed at the Monthly System Administrator Call-In and included in the Meeting Minutes distribution email. To allow for evolution of compliance standards without re-issuing core agreements, updated policies supersede related policies in previously published Policies and Procedures or Agreements. Any changes from the previous year will be highlighted. A current copy of the Procedures may also be found on the NC HMIS WEB Site www.nchmis.org.

Agreements and Training Certifications:

- 1) All CoCs participating on the NC HMIS must sign the MCAH Interim MOU that designates the use of the North Carolina Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness (MCAH) as the Statewide Lead Agency for administration of the statewide database. Each Jurisdiction will also identify a local Lead Agency that coordinates with MCAH and is responsible for specific tasks. The MOU supports the ability for multiple jurisdictions to participate on a single statewide HMIS information system.
- 2) Training is required for all users of the System. Agencies must provide new staff with a list of training requirements and assure that basic training has been completed. A basic overview of required training is presented below, however details of specific Web Casts and Live Training for new and existing Users may be found at www.nchmis.org Training Certifications must be maintained on file for all licensed users. Privacy and Definitions Training is also required for those staff that interview clients and collect information.
- 3) All Agencies must have fully executed and be in compliance with the following Agreements. An Implementation Agency Checklist may be found at www.nchmis.org
 - a) Administrative QSOBAA governing administrative access to the System.
 - b) Participation Agreement governing the basic operating principals of the System and rules of membership.
 - c) Sharing QSOBAA's (if applicable) governing the nature of the sharing and the re-release of data.
 - d) A board certified Confidentiality Policy governing the over Privacy and Security standards for the Agency.
 - e) User Agreement and Code of Ethics governing the individual's participation in the System.
- 4) Agencies must have an assigned Agency Administrator. The Agency Administrator is required to support the agency's use of the System including insuring that all users are properly trained. Training categories include:
 - a) Privacy and annual privacy updates (all users and those that collect data from clients)
 - b) Provider Page Training to understand the System Configuration for each provider (Local System Administrators and Agency Administrators).
 - c) Updated Workflow training (The steps to completing data entry. There may be multiple workflows depending on the fund sources and the services provided by the agency.)
 - d) Reports Training (agency users and leadership tasked with supporting data quality as well as monitoring outcome and other performance issues).

Privacy and Security Plan:

All records entered into the HMIS and downloaded from the HMIS are required to be kept in a confidential and secure manner.

Oversight:

- 1) Agency Administrators with support from agency Leadership must:
 - a) Insure that all staff using the System complete annual privacy & security training. Training must be provided by NC HMIS Certified Trainers and based on the NC HMIS Privacy/Security Training Curriculums.
 - b) Adapt the Privacy Script Template and Client Release of Information and Sharing Plan to reflect their sharing choices.
 - c) Conduct a quarterly review of the Providers Visibility Set up and an annual security review of the agency that includes reviewing compliance with the Privacy and Security sections of this document. Finding from the review should be available upon request.
 - d) Insure the prompt removal of licenses to the HMIS when a staff person leaves the organization or revision of the user's access level as job responsibilities change.
 - e) Report any security or privacy incidents immediately to the Local Lead HMIS System Administrator (LSA) for the CoC Jurisdiction to insure that the record is closed as soon as possible. The Local System Administrator investigates the incident including running applicable audit reports. If the LSA determines that a possible breach has occurred and/or the staff involved violated privacy or security guidelines, the LSA will report to the chair of the CoC and NC HMIS Lead Director within 5 working days. A Corrective Action Plan will be negotiated. Components of the Plan must include at minimum supervision and retraining. It may also include removal of HMIS license, client notification if a breach has occurred, and any appropriate legal action. All confirmed breaches must be reported to the Governance Committee Executive Committee.
- 2) Criminal background checks must be completed on all System Administrators. All agencies should be aware of the risks associated with any persons given access to the System and limit access as necessary.
- 3) Local System Administrators conduct routine audits to insure compliance with the Operating Policies and Procedures. The audit will include a mix of system and on-site reviews. MCAH staff will also participate in local audits from time to time. Audits are designed to facilitate use of the System and agencies will be given adequate time to implement any required changes.
- 4) Agencies must have a formal grievance process. A copy of any HMIS-related grievance, and the Agency's response, must be submitted to the MCAH Project Manager, and CoC Lead within 5 days of completion of the agencies response.

Privacy:

- 1) All Agencies are required to have the **HUD Public Notice** posted and visible to clients where information is collected. See Appendix A for link to the Notice.
- 2) All Agencies must have a **Privacy Notice**. They may adopt the NC HMIS sample notice or integrate NC HMIS into their existing Notice. See Appendix A for a link to the sample Notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
 - a) The purpose for collection of client information.
 - b) A brief description of policies & procedures governing privacy including protections for vulnerable populations.
 - c) Data collection, use and purpose limitations. The Uses of Data must include uses related to de-identified data.
 - d) The client’s rights to copy/inspect/correct their record based on agency policy. Agencies may establish reasonable norms for the time and cost related to producing a copy of the report. The agency may say “no” to the request to correct information, but the agency must inform the client of its reasons in writing within 60 days of the request.
 - e) The client complaint procedure
 - f) Notice to the consumer that the Privacy Notice may be updated overtime and applies to all client information held by the Agency.
 - g) All Notices must be posted on the Agencies WEB Site.
- 3) All Agencies are required to have a **Privacy and Security Policy**. Agencies may elect to integrate the Privacy Policies defined in this document into an existing Privacy Policy. See Appendix A for link. All Privacy Policies must include:
 - a) Procedures defined in the Agencies Privacy Notice
 - b) Protections afforded those with increased privacy risks such as protections for victims of domestic violence, dating violence, sexual assault, and stalking. Protection include at minimum:
 - i) Closing of the profile search screen so that only the serving agency may see the record.
 - ii) The right to refuse sharing if the agency has established an external sharing plan.
 - iii) The right to be entered under an Un-Named Record Protocol where identifying information is not recorded in the System and the record is located through a randomly generated number (note: this interface does allow for un-duplication because the components of the Unique Client Id are generated).
 - iv) The right to have a record marked as inactive.
 - v) The right to remove their record from the System.

- c) Agencies may create a paper record by printing the Assessment screens located within the HMIS. These records must be kept in accordance with the procedures that govern all hard copy information (see below).
 - d) Client Information Storage and Disposal. Users may not store information from the System on personal portable storage devices. The Agency will retain the client record for a period of **7** years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
 - e) Remote Access and Usage: The Agency must establish a policy that governs use of the System when access is approved from remote locations. The policy must address:
 - i) The use of portable storage devices.
 - ii) The environments where use is approved.
 - iii) All browsers used to connect to the System must be secure. No user is allowed to access the database from a public or none-secured private network such as an airport, hotel, library, or internet café.
- 4) Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.
- a) Client files are locked in a drawer/file cabinet
 - b) Offices that contain files are locked when not occupied.
 - c) Files are not left visible for unauthorized individuals.
- 5) Agency provides a **Privacy Script** to all staff charged with explaining privacy to standardize the explanation of agency privacy rules. The Script must:
- a) The Script must be developed to reflect the agencies sharing agreements and the level of risk associated with the type of data the Agency collects and shares.
 - b) The Script should be appropriate to the general education / literacy level of the Agencies clients.
 - c) A copy of the Script should be available to clients as they complete the intake interview.
- 6) Agencies that plan to share information through the System must sign a **Sharing QSOBAA** (Qualified Services Organization Business Associates Agreement).
- a) Sharing QSOBAAs are managed by the CoC's LSA and negotiated within the CoC planning process.
 - b) The Agreement proscribes the re-release of information shared under the terms of the Agreement.
 - c) The Agreement specifies what is shared with whom.
 - d) Agencies may share different information with different partners and may sign multiple Sharing QSOBAAs to define a layered sharing practice.
 - e) The signatories on the Agreement include authorized representatives from all Agencies covered by the Agreement.

- f) All members of a Sharing QSOBAA are informed that by sharing the electronic record they are creating a common record that can impact the data reflected on Reports. Members of the sharing group agree to negotiate data conflicts.
 - g) No Agency may be added to the Agreement without the approval of all other participating agencies.
 - i) Documentation of that approval must be available for review and may include such items as meeting minutes, email response or other written documentation.
 - h) When a new member is added to the Sharing QSOBAA, the related Visibility Group is end-dated and a new Visibility Group is begun. **A new member may not be added to an existing Visibility Group.**
- 7) Agencies must have appropriate **Release(s) of Information** that are consistent with the type of data the agency's plan to share.
- a) The Agency adapts the NC HMIS Release of Information and Sharing Plan to reflect their sharing decisions and include a list of sharing partners and a description of the information to be shared.
 - b) If the Agency integrates the NC HMIS Release into their existing Releases, the Release must include the following components:
 - i) A brief description of NC HMIS and a discussion of why we collect information.
 - ii) A specific description of the Client Profile Search Screen and an opportunity for the client to request that the Screen be closed.
 - iii) A description of the Agency's sharing partners (if any) and a description of what is shared. **It must reflect items negotiated in the Agency's Sharing QSOBAA.**
 - iv) A defined term of the Agreement.
 - v) The NC HMIS Release is intended to allow for the exchange of information between all agencies included within the Sharing QSOBAA and may be completed one time to cover all entities.
- 8) An **automated ROI** is required to enable the sharing of any particular client's information between any Provider Pages on the System.
- i) Agencies should establish internal sharing by creating a Visibility Group(s) that includes all Agency provider pages where sharing is planned and allowed by law.
 - (1) **Internal sharing** does not require a signed Client Release of Information unless otherwise specified by law.
 - (2) If new provider pages are added to the Agency tree, they may be included in the existing Visibility Group. The information available to that Provider Page will include all information covered by the Visibility Group from the beginning date of the Group – sharing will be retrospective.

- ii) Agencies may elect to share information with other Agencies – **External Sharing** - by negotiating a Sharing QSOBAA (see 7 above).
 - (1) A signed and dated Client Release of Information(s) must be stored in the Client Record (paper or scanned onto the System) for all Automated ROIs that release data between different agencies – external sharing.
 - (2) To prevent retrospective sharing, a new Visibility Group is constructed whenever a new sharing partner is added to the agencies existing sharing plan / QSOBAA.

- 9) The Agency must have a procedure to assist clients that are hearing impaired or do not speak English as a primary language. For example:
 - a) Provisions for Braille or audio
 - b) Available in multiple languages
 - c) Available in large print

- 10) **Agencies are required to maintain a culture that supports privacy.**
 - a) Staff do not discuss client information in the presence of others without a need to know.
 - b) Staff eliminate unique client identifiers or any information that would allow the public to re-identify the client before releasing data to the public.
 - c) The Agency configures workspaces for intake that supports privacy of client interaction and data entry.
 - d) User accounts and passwords are not shared between users, or visible for others to see.
 - e) Program staff are educated to not save reports with client identifying data on portable media as evidenced through written training procedures or meeting minutes.
 - f) Staff are trained regarding use of email communication.

- 11) All staff using the System must complete Privacy and Security Training annually. Certificates documenting completion of training must be stored for review upon audit.
- 12) Victim Service Providers are precluded from entering client level data on the HMIS or providing client identified data to the HMIS. These providers will maintain a comparable database to respond to grant contracts.

Data Security:

- 1) All licensed Users of the System must be assigned **Access Levels** that are consistent with their job responsibilities and their business “need to know”.
- 2) All computers must have **virus protection with automatic updates.**

- a) Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to insure:
 - i) The Anti-Virus Software is using the up-to-date virus database.
 - ii) That updates are automatic.
 - iii) OS Updates are also run regularly.
- 3) All computers are protected by a Firewall.
 - a) Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to insure:
 - i) For Single Computers, the Software and Version is current.
 - ii) For Network Computers, the Firewall Model and Version is current.
 - iii) That updates are automatic.
- 4) Physical access to computers that connect to the HMIS is controlled.
 - a) All workstations in secured locations (locked offices).
 - b) Workstations are logged off when not manned.
 - c) All workstations are password protected.
 - d) **All HMIS Users are proscribed from using a computer that is available to the public or from access the System from a public location through an internet connect that is not secured.** That is, staff are not allowed to use Internet Cafes, Libraries, Airport Wi-Fi or other non-secure internet connections.
- 5) A plan for remote access if staff will be using the NC HMIS System outside of the office such as doing entry from home. Concerns addressed in this plan should include the privacy surrounding the off-site entry.
 - a) The computer and environment of entry must meet all the standards defined above.
 - b) Downloads from the computer may not include client identifying information.
 - c) Staff must use an agency-owned computer.
 - d) System access settings should reflect the job responsibilities of the person using the System. Certain Access levels do not allow for downloads.

Remember that information security is never better than the trustworthiness of the staff licensed to use the System. The data at risk is the agency's own and that of its sharing partners. If an accidental or purposeful breach occurs, the agency is required to notify MCAH. A full accounting of access to the record can be completed.

Disaster Recovery Plan:

The HMIS can be a critically important tool in the response to catastrophic events. The HMIS data is housed in a secure server bank in Shreveport, LA with nightly off-site backup. The solution means that data is immediately

available via Internet connection if the catastrophe is in North Carolina and can be restored within 4 hours if the catastrophe is in Louisiana.

- 1) HMIS Data System (see “Bowman Systems Securing Client Data” for a detailed description of data security and Bowman’s Disaster Response Plan):
 - a) NC HMIS is required to maintain the highest level disaster recovery service by contracting with Bowman Systems for Premium Disaster Recovery that includes:
 - i) Off site, out-of state, on a different Internet provider and on a separate electrical grid backups of the application server via a secured Virtual Private Network (VPN) connection.
 - ii) Near-Instantaneous backups of application site (no files older than 5 minutes).
 - iii) Nightly off site replication of database in case of a primary data center failure.
 - iv) Priority level response (ensures downtime will not exceed 4 hours).
- 2) HMIS Lead Agencies:
 - a) HMIS Lead Agencies are required to back-up internal management data system’s nightly.
 - b) Data back-ups will include a solution for off-site storage for internal data systems.
- 3) Communication between staff of the Lead Agency, the CoC, and the Agencies in the event of a disaster is a shared responsibility and will be based on location and type of disaster.
 - a) Agency Emergency Protocols must include:
 - i) Emergency contact information including the names / organizations and numbers of local responders and key internal organization staff., designated representative of the CoCs, local HMIS Lead Agency, and the NC HMIS Project Director.
 - ii) Persons responsible for notification and the timeline of notification.
 - b) In the event of System Failure:
 - i) The NC HMIS Project Director or designee will notify all participating CoCs and local System Administrators should a disaster occur at Bowman System’s or in the NC HMIS Administrative Offices. Notification will include a description of the recovery plan related time lines. Local/assigned System Administrators are responsible for notifying Agencies.
 - ii) After business hours, NC HMIS staff report System Failures to Bowman System using the Emergency Contact protocol. An email is also launched to Local System Administrators and Emergency Shelter designated staff no later than one hour following identification of the failure.
 - c) NC HMIS Project Director or designated staff will notify the HMIS Vendor if additional database services are required.
- 4) In the event of a local disaster:
 - a) NC HMIS in partnership with the local Lead Agency will provide access to additional hardware and user licenses to allow the CHO(s) to reconnect to the database as soon as possible.

- b) NC HMIS in collaboration with the local Lead Agencies will also provide information to local responders as required by law and within best practice guidelines.
- c) NC HMIS in collaboration with the local Lead Agencies will also provide access to organizations charged with crisis response within the privacy guidelines of the system and as allowed by law.

System Administration and Data Quality Plan:

1) Provider Page Set-Up:

- a) Provider Page are appropriately named per the NC HMIS naming standards **<agency name> - <county> - <program> - <project/funding>**. Example: “The Salvation Army – Wake County – Housing for Veterans - ESG”. Identification of funding stream is critical to completing required reporting to funding organization.
- b) Inactive Provider Pages are properly identified with “XXXCLOSED”> followed by the year of the last program exit >Provider Page Name. For example: XXXCLOSED2015 – The Salvation Army...
- c) HUD Data Standards are fully completed on all Provider Pages:
 - i) CoC code is correctly set.
 - ii) Program type codes are correctly set.
 - iii) Geocodes are set correctly for Principal Site provider pages.
 - iv) Bed and Unit Inventories are set for applicable residential programs.
 - v) The Federal Partner Funding Source section is completed for all projects receiving funding from one of the federal partners.
- d) User licenses are set up to “Enter Data As” (EDA) and users are trained to use EDA to navigate provider pages.
- e) All Agency Administrators and System Administrators complete Provider Page Set-Up Training. Set-up instructions will vary by funding and/or Provider type. Agency Administrators and System Administrators update instruction and respective Providers as new instructions are published.

2) Data Quality Plan:

- a) Agencies must require documentation at intake of the homeless status of consumers according to the reporting and eligibility guidelines issued by HUD. The “order of priority” for obtaining evidence of homeless status are (1) third party documentation, (2) worker observations, and (3) certification from the person. Lack of third party documentation may not be used to refuse emergency shelter, outreach or domestic violence services. Local CoCs may designate the local central intake/coordinated assessment agencies to establish the homeless designation and maintain related documentation.

- b) 100% of clients must be entered into the System no more than 15 days after the information is collected from the client. If the information is not entered on the same day it is collected, the agency must assure that date associated with the information be the collection date by:
 - i) Entering entry/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or
 - ii) Backdating the information into the System.
- c) All staff are required to be trained on the definition of Homelessness.¹
 - i) NC HMIS will provide a Homeless Definition Cross-Walk to support agency level training.
 - ii) Documentation of training must be available for audit. This should be maintained in the agency's HMIS binder.
 - iii) There is congruity between the following NC HMIS case record responses, based on the applicable homeless definition: (Housing Status and Residence Prior to Project Entry are being properly completed).
- d) Agency has a process to ensure the First and Last Names are spelled properly and the DOB is accurate.
 - i) An ID is requested at intake to support proper spelling of the client's name as well as the recording of the DOB.
 - ii) If no ID is available, staff request the legal spelling of the person's name.
 - iii) Programs that serve the chronic and higher risk populations are encouraged to use the Scan Card process within ServicePoint to improve un-duplication and to improve the efficiency of recording services.
 - iv) Data for clients with significant privacy needs may be entered under the "Un-Named Record" feature of the System. However, while identifiers are not stored using this feature, great care should be taken in creating the Un-Named Algorithm by carefully entering the first and last name and the DOB. Names and ServicePoint Id #s Cross-Walks (that are required to find the record again) must be maintained off-line in a secure location.
- e) Income, non-cash benefits and health insurance information are being updated at least annually and at exit.
- f) Agencies have an organized exit process that includes:
 - i) Clients and staff are educated on the importance of planning and communicating regarding discharge. This is evidenced through staff meeting minutes or other training logs and records.
 - ii) Discharge Destinations are properly mapped to the HUD Destination Categories.
 - (1) NC HMIS provides a Destination Definition Document to support proper completion of exits (see Appendix A for link).
 - iii) There is a procedure for communicating exit information to the person responsible for data entry.

¹ Specific instruction is available for PATH and HOPWA programs at www.dyns-services.com

- g) Agency Administrator/Staff regularly run data quality reports.
 - i) Report frequency should reflect the volume of data entered into the System. Frequency for funded programs will be governed by Grant Agreements, HUD reporting cycles, and local CoC Standards. However, higher volume programs such as shelters and services only programs must review and correct data at least monthly. In low volume longer stay programs, reports should be run following all intakes and exits and quarterly to monitor the recording of services and other required data elements.
 - ii) The program entry and exit dates should be recorded upon program entry or exit of all participants. Entry dates should record the first day of service or program entry with a new program entry date for each period/episode of service. Exit dates should record the last day of residence before the participant leaves the shelter/housing program or the last day a service was provided.
 - iii) Data quality screening and correction activities must include the following:
 - (1) Missing or inaccurate information in (red) Universal Data Element Fields.
 - (2) If funded through a Federal Partner Funding Source, missing program specific elements are also audited.
 - (3) Un-exited clients using the Length of Stay and Un-exited Client Data Quality Reports.
 - (4) Count reports for proper ratio of children to adults in families. (at least 1.25)
 - (5) Provider Page Completion Reports with an Annual update of the HUD Standards Information.
 - (6) Close all inactive provider pages within the agency tree. Audit of inactive pages includes closing all open services and exiting all un-exited clients.
 - (7) Insure that PH RRH providers have recorded a “Move In” date reflecting when the client was actually housed.
- h) CoCs and Agencies are required to review Outcome Performance Reports. Targets are adjusted by Project Type. The CoC’s HMIS Lead Agency, in collaboration with the CoC Reports Committee or designated CQI Committee, establishes local benchmark targets. See Appendix A for links and “Setting Targets” training podcast.
- i) NC HMIS publishes regional benchmarks on all defined measures annually (see Appendix A).
- j) Agencies are expected to participate in the CoCs Continuous Quality Improvement Plan as they are developed locally. See CQI materials designed to support Data Quality through Continuous Quality Improvement (see Appendix A).

3) Workflow Requirements:

- a) Assessments set in the Provider Page Configuration are appropriate for the funding stream.
- b) Users performing data entry have latest copies of the workflow guidance documents.

- c) If using paper, the intake data collection forms correctly align with the workflow.
- d) 100% of clients are entered into the System within 15 days of data collection.
- e) Agencies are actively monitoring program participation and exiting clients. Clients are exited within 30 days of last contact unless program guidelines specify otherwise.
- f) All required program information is being collected.
 - i) All HMIS participants are required to enter at minimum the Universal Data Elements and if completing entries and exits, the HUD CoC and ESG Exit (NC HMIS) Form.
 - ii) Programs that serve over time are required to complete additional program elements as defined by the funding stream. If the Agency is not reporting to a funding stream, they are encouraged to use the HUD CoC Entry (NC HMIS) and HUD CoC and ESG Exit (NC HMIS) forms.
- g) Data sharing is properly configured for sharing information internally between the agency's programs, including use of visibility groups.
- h) External data sharing aligns with any Sharing QSOBAA's including use of visibility groups.
- i) Visibility groups are managed appropriately (see Privacy 9).

4) Electronic Data Exchanges:

- a) Agencies electing to either import or export data from the NC HMIS must assure:
 - i) The quality of data being loaded onto the System meets all the data quality standards listed in this policy including timeliness, completeness, and accuracy. In all cases, the importing organization must be able to successfully generate all required reports including but not limited to the APR and the North Carolina Basic Counting Report.
 - ii) Agencies exporting data from NC HMIS must certify the privacy and security rights promised participants on the HMIS are met on the destination System. If the destination System operates under less restrictive rules, the client must be fully informed and approve the transfer during the intake process. The agency must have the ability to restrict transfers to those clients that do not approve the exchange.

5) Publication and Research:

- a) MCAH, another statewide entity or your local CoC may sponsor de-identified research to improve the understanding of homelessness and the effectiveness of homeless services.
 - i) De-identification will involve the masking or removal of all identifying or potential identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.

- ii) Geographic analysis will be restricted to prevent any data pools that are small enough to inadvertently identify a client by other characteristics or combination of characteristics.
 - iii) Programs used to match and/or remove identifying information will not allow a re-identification process to occur. If retention of identifying information is maintained by a “trusted party” to allow for updates of an otherwise de-identified data set, the organization/person charged with retaining that data set will certify that they meet medical/behavior health security standards and that all identifiers are kept strictly confidential and separate from the de-identified data set.
 - iv) CoCs will be provided a description of each Study being implemented. Agencies or CoCs may opt out of the Study through a written notice to MCHA or the Study Owner.
- b) MCAH, another statewide entity or the local CoC may sponsor identified research to improve the understanding of homelessness and the effectiveness of homeless services.
- i) All identified research must be governed through an Institutional Research Board including requirements for client informed consent.
 - ii) CoCs will be provided a description of each Study being implemented. Agencies or CoCs may opt out of the Study through a written notice to MCHA or the Study Owner.
- c) Annually MCAH in conjunction with other State and local partners may publish information about the scope and causes of homelessness as well North Carolina’s response to end homelessness. The following strategies will guide publication of statewide data sets:
- i) Content, qualifiers and message will be guided by the Statewide Reports Committee as well as other key stakeholders such as the local Interagency Council on Homelessness/the Campaign to End Homelessness or representatives from public and private organizations that fund homeless services.
 - ii) Identified CoC data may only be included with written CoC approval.
 - iii) CoCs will be provided for review and approval CoC data sets planned for inclusion in the statewide aggregate data (without CoC identification). The review process will include at least two cycles of the data with time between for any data or report correction activities.
 - iv) The cycles of data review can begin no sooner than two months following the close of the report period to all for routine data quality activities to be completed.
- d) MCAH, another statewide entity or the local CoC may sponsor Point in Time or publication of specialized data sets.
- i) Development of the plan for publication including the frequency, data types, analytics and publication media type will be guided by the relevant entity.
 - ii) CoCs will be provided a description of each proposed publication.
 - iii) Agencies or CoCs may opt out of the publication through a written notice to MCHA or the Study Owner.

6) Staff Training and Required Meetings:

- a) All Users and those that collect information from clients are recertified in Privacy Training Annually.
- b) All Users participate in Workflow Training and Training Updates for their assigned Workflows.
- c) All Users and those that collect data from clients are trained in Data Standard data element definitions.

d) All Agency Administrators participate in:

- i) Provider Page Set-Up Training.
- ii) Workflow Training sponsored by the funding agency or NC HMIS.
- iii) Reports Training
 - (1) Data Quality
 - (2) Required funding Reports
 - (3) Outcome Reporting.
- iv) Other training specified by the CoC.
- v) CoC Agency Administrator Meetings and Trainings.
- vi) Agency specific User Meetings or preside over an HMIS specific topic during routine staff meetings.
- vii) A local Reports Committee that governs the publication of information as requested.

e) All System Administrators participate in:

- i) All System Administrators are required to read and understand the HUD Data Standards that underpin the rules of the HMIS.
- ii) System Administrator Orientation (Live sessions with MCAH to overview the basic rules and provide a place for dialogue and questions – conducted in the second or third month after assuming the role).
- iii) Provider Page Set-Up Training (prior to licensure and routinely as changes occur).
- iv) Workflow Training sponsored by the funding agency or NC HMIS.
- v) Reports Training
 - (1) Data Quality
 - (2) Required Funding Reports
 - (3) Outcome Reporting.
- vi) CQI Training.
- vii) HUD Initiative Training (AHAR, PIT, APR, etc.).
- viii) On Site and System Audits of Agency compliance of Data Privacy, Security and Oversight standards as well as item1 through 4 under System Administration and Data Quality.
- ix) The Monthly System Administrator Call-In.
- x) The CoC Reports Committee or CoC Meeting where data use and release is discussed.
- xi) North Carolina’s Campaign to End Homelessness Work Groups and Regional Meetings as assigned.

Appendix A: Links to Documents referred to in this Policy

<http://mihomeless.org/index.php/north-carolina-documents>

System Administration:

- HUD HMIS Data Standards 2014
- HMIS Requirements Proposed Rules Federal Registered (Hearth)
- HMIS Homeless Definition Crosswalk
- HUD Homeless Definition Matrix
- HMIS Discharge Destination Guidance

Administrative

- Participation Agreement
- Administration QSOBAA
- Sharing QSBAA
- HMIS Operating Policies and Procedures
- Interim MOU

Privacy

- Privacy and Security Training PP or PDFs
- Privacy Certification Questionnaire
- Overview of Agency Requirements
- User Access Levels in ServicePoint
- HUD Public Notice
- User Agreement and Code of Ethics
- Privacy Script Suggestions
- Privacy Notice Sample
- NC HMIS Release of Information and Sharing Plan

Training

- All technical workflow and training documents and podcasts
- Provider Page Training
- Reports Training
- Securing Client Records and establishing Visibility

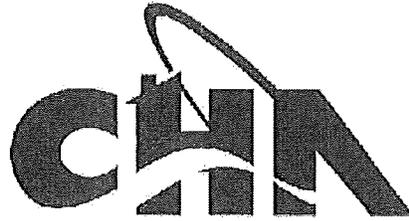
System Administrator and User Meeting Minutes

- Minutes from Required System Administrator Meetings (current year/recent)

6/1/2015v5

Adopted June 8, 3015

NC HMIS Project



**Housing Choice Voucher Program
Administrative Plan**

for the

Housing Authority of the City of Charlotte

North Carolina

2015

CHA Policy

The CHA administers the following types of targeted funding:

Veterans Affairs Supportive Housing (VASH)

Family Unification Program (FUP)

Non Elderly Disabled (NED)

Demolition/Disposition

Regular HCV Funding

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

4-III.C. SELECTION METHOD

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

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

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

CHA Policy

The CHA will use the following local preferences:

1. Homeless Families participating in a self reliance, supportive service program that assists families in a shelter or in short term transitional housing programs.
2. Veteran Families.

3. **Working Families.** The CHA will establish a preference for “working” families, where the head, spouse, co-head, or sole member is employed at least 15 hours per week, participating in an economic self sufficiency program, full time students in a job training or accredited institution, receiving unemployment benefits or actively seeking work. As required by HUD, families where the head and spouse, or sole member is a person age 62 or older, or is a person with disabilities, will also be given the benefit of the working preference [24 CFR 960.206(b)(2)].
4. **Near Elderly**
5. **Domestic Violence Victims**

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

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA’s fiscal year. ELI families are those with annual incomes is the greater of the federal poverty level or at or below 30% of the area median income. To ensure this requirement is met, the CHA may skip non-ELI families on the waiting list in order to select an ELI family. Low income families admitted to the program that are “continuously assisted” under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.20 1(b)(2)(v)].

CHA Policy

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

Order of Selection

The PHA system of preferences may select families either according to the date and time of application, or by a random selection process [24 CFR 982.207(c)]. When selecting families from the waiting list PHAs are required to use targeted funding to assist only those families who meet the specified criteria, and PHAs are not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

ADMISSIONS AND CONTINUED OCCUPANCY POLICY
FOR THE
CHARLOTTE HOUSING AUTHORITY
PUBLIC HOUSING PROGRAM

Revision Date	
July 2013	

Approved by the PHA Board of Commissioners: July 16, 2013

preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources [24 CFR 960.206(a)].

PHA Policy

The PHA will use the following local preferences:

1. Homeless Families participating in a self reliance, supportive service program that assists families in a shelter or in short term transitional housing programs (maximum of 90 days).
2. Veteran Families.
3. Working Families. The PHA will establish a preference for "working" families, where the head, spouse, co-head, or sole member is employed at least 15 hours per week, participating in an economic self sufficiency program, full time students in a job training or accredited institution, receiving unemployment benefits or actively seeking work. As required by HUD, families where the head and spouse, or sole member is a person age 62 or older, or is a person with disabilities, will also be given the benefit of the working preference [24 CFR 960.206(b)(2)].
4. Near Elderly
5. Domestic Violence Victims

Income Targeting Requirement [24 CFR 960.202(b)]

HUD requires that extremely low-income (ELI) families make up at least 40% of the families admitted to public housing during the PHA's fiscal year. ELI families are those with annual incomes at or below 30% of the area median income. To ensure this requirement is met, the PHA may skip non-ELI families on the waiting list in order to select an ELI family.

If a PHA also operates a housing choice voucher (HCV) program, admissions of extremely low-income families to the PHA's HCV program during a PHA fiscal year that exceed the 75% minimum target requirement for the voucher program, shall be credited against the PHA's basic targeting requirement in the public housing program for the same fiscal year. However, under

**Memorandum of Understanding
North Carolina Statewide HMIS
North Carolina Continua of Care and the Michigan Coalition Against Homelessness
July 1, 2016 – June 30, 2017**

Objective: This MOU is designed to provide a frame for North Carolina’s multi-jurisdiction HMIS implementation as presented in Section 508.7 of the Federal Register / Vol. 76, No. 237 Homeless Management System Requirements. It is recognized that operation of the Statewide HMIS requires ongoing collaboration from member Continua of Care.

Continuum of Care (CoC): Charlotte-Mecklenburg (NC-505) agrees to adopt the North Carolina Statewide shared HMIS platform vendor, Bowman Systems Inc. ServicePoint. The CoC agrees that administration of the shared platform will be provided by the North Carolina HMIS Project, operated by the Michigan Coalition Against Homelessness. The CoC further agrees to operate the local CoC Implementation in compliance with HUD Data Standards and the North Carolina Statewide Operating Policies and Procedures.

Roles and Responsibilities:

Michigan Coalition Against Homelessness:

1. Management of the Statewide Vendor Contract with Bowman Systems, Inc.
2. Host the Statewide coordination meeting – the Monthly SA Call-In.
3. Define privacy and security protocols that allow for the broadest possible participation.
4. Provide Statewide Operating Policies and Procedures that represent the minimum standards for participation. Local CoCs may add additional requirements as negotiated locally.
5. Designate ex-officio staff member for NC HMIS Governance Committee
6. Provide for system administration and analyst staffing of help desk services between 9am and 5pm workdays and after-hours emergency response.
7. Negotiate the cost for local licenses to the Statewide System via contracts with Bowman Systems.
8. Provide training and ongoing collaboration regarding cross-jurisdiction system operation, measurement and research activities including:
 - a. Negotiation and training basic workflows for all users and specialized workflows for cross-jurisdiction funding streams.
 - b. HUD mandated activities including Point In Time, Housing Inventory Count, Annual Performance Report and the Annual Homelessness Assessment Report.
 - c. Provide data for Statewide and CoC-specific unduplicated homeless counts.
 - d. Research projects that involve statewide data sets.

- e. Maintain a suite of data quality, demographics, and outcome reports available to all CoCs on the System.
 - f. Support for local Continuous Quality Improvement efforts.
9. Execute Contract for Services with CoC-designated fiduciary entities.
 10. Provide the NC HMIS Governance Committee monthly reports updating the status and accomplishments of the NC HMIS project.

North Carolina Continua of Care:

1. Designate HMIS system
2. Designate CoC members and CoC alternates to NC HMIS Governance Committee
3. Ensure consistent participation of recipients and sub recipients in the HMIS
4. Uphold Cost-sharing agreement set by Governance Committee, including no/late-payment consequences
5. Plan the local HMIS implementation to maximize the greatest possible participation from homeless service providers.
6. To the extent permitted by the law, comply with North Carolina Statewide Privacy Protocols as specified in the Administrative and Sharing Qualified Services Organization Business Associates Agreements (QSOBAAs), Participation Agreements and the User Agreement Code of Ethics.
7. Adopt any additional standards of practice beyond those identified in the Statewide HMIS Operating Procedures.
8. Staff at least one local System Administrator and assure that each participating agency has identified an Agency Administrator. The System Administrator will:
 - a. Demonstrate competence in required training in privacy, security and system operation (e.g. provider page, workflows and reports).
 - b. License local users and support data organization and completion of Provider Pages for participating agencies.
 - c. Assign licenses to Agency Administrators and/or users.
 - d. Host local HMIS operations meeting(s) and/or assure that Agency Administrators are attending the Statewide User Meetings.
 - e. Assure that all users are trained in privacy, security and system operation.
 - f. Participate in HUD mandated measurement including PIT, HIC, APRs and the AHAR as appropriate.
 - g. Participate in the annual PIT count process and support publication of local reports.
 - h. Support the CoC's Continuous Quality Improvement efforts.
9. Through the Governance Committee, CoCs will:
 - i. Review, revise and approve Privacy, Security and Data Quality Plans
 - j. Ensure HMIS is administered to meet HUD standards
 - k. Approve MCAH budget and technical agreements

10. Designate fiduciary responsible for entering into a Contract for Services with HMIS Lead Agency

11. Designate eligible applicants to receive HMIS funds that will best allow them to participate in the statewide HMIS

Signed:  Date: 7/11/16
HMIS Lead Agency: MCAH Title: Exec. Director

Signed:  Date: 28 June 16
CoC Representative: Josef H Penner Title: Chm., Housing Advisory Board



HOUSING ADVISORY BOARD OF CHARLOTTE-MECKLENBURG



Chronic Homeless Prioritization for Permanent Supportive Housing

All recipients of Continuum of Care (CoC) Permanent Supportive Housing (PSH) are required to follow these written standards required by their grant agreement.

I. Purpose

These written standards reflects the new definition of chronically homeless as amended by the Final Rule on Defining "Chronically Homeless" (herein referred to as the Definition of Chronically Homeless final rule) and updates the orders of priority that were established under the prior Notice. CoCs that previously adopted the orders of priority established in Notice CPD-14-012, which CPD-16-11 supersedes.

PSH must be targeted to serve chronic homeless persons with the highest needs and greatest barriers toward obtaining and maintaining housing.

II. Goals of the Orders of Priority

The overarching goal of this Notice is to ensure that those individuals and families who have spent the longest time in places not meant for human habitation, in emergency shelters, or in safe havens and who have the most severe service needs within a community are prioritized for PSH. These written standards revises the orders of priority related to how persons should be selected for PSH as previously established in Notice CPD-14-012 to reflect the changes to the definition of chronically homeless as defined in the Definition of Chronically Homeless final rule.

Two goals achieved through these standards:

1. Establish a recommended order of priority for dedicated and prioritized PSH that ensure persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority.
2. Establish a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized.

III. Key Terms

Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

Chronically Homeless. The definition of “chronically homeless”, as stated in Definition of Chronically Homeless final rule is:

- (a) A “homeless individual with a disability,” as defined in section 401(g) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(g)), who:
 - i. lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - ii. has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;
- (b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;
- (c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2.(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Severity of Service Needs refers to persons who have been identified as having the most severe service needs.

- (a) For the purposes of this Notice, this means an individual for whom at least one of the following is true:
 - i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or

- ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments which require a significant level of support in order to maintain permanent housing.
 - iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
 - iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an alternate criteria used by Medicaid departments to identify high- need, high cost beneficiaries.
- (b) Severe service needs as defined in paragraphs i.-iv. above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

IV. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons

A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness.

Dedicated PSH beds are those which are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the NC505 geographic area that meet that criteria. If there are no persons within the NC505 geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non- dedicated PSH established in these standards. However, that bed will continue to be a dedicated bed so when it becomes vacant, again it must be used to house a chronically homeless person unless there are still no persons who meet that criterion within the NC505 geographic area at that time. These PSH beds are also reported as on the NC505 Housing Inventory Count (HIC).

B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness.

Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. During the CoC Program competition project applicants for CoC Program-funded PSH indicate the number of non-dedicated beds that will be prioritized for use by persons experiencing chronic homelessness during the operating year of that grant, when awarded. Projects are then required to prioritize chronically homeless persons in their non-dedicated CoC Program-funded PSH beds for the applicable operating year as the project application is incorporated into the grant agreement.

All recipients of non-dedicated CoC Program-funded PSH shall change the designation of their PSH to dedicated, however, at a minimum are encouraged to prioritize the chronically homeless as beds become vacant to the maximum extent practicable, until there are no persons within the NC505 geographic area who meet that criteria. The total number of non-dedicated beds designated as being prioritized for the chronically homeless may be increased at any time during the operating year and may occur without an amendment to the grant agreement.

V. Order of Priority in CoC Program-funded Permanent Supportive Housing

A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. These written standards include an order of priority for CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's or family's service needs. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness are required to follow this of priority when selecting participants for housing, in a manner consistent with their current grant agreement.
2. Where there are no chronically homeless individuals and families within the NC505 geographic area recipients of CoC Program-funded PSH will follow the order of priority in these standards.
3. Recipients of CoC Program-funded PSH will follow the order of priority above while also considering the NC505 goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority to the extent in which persons with serious mental illness meet the criteria. If there were no persons with a serious mental illness that also met the criteria of chronically homeless within the NC505 geographic area, the recipient should follow the order of priority under Section III.B for persons with a serious mental illness.
4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. Persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable. Therefore, a person experiencing chronic homelessness should not be forced to

refuse an offer of PSH if they do not want to participate in the project's services, nor should a PSH project have eligibility criteria or preconditions to entry that systematically exclude those with severe service needs. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these chronically homeless persons must continue to be prioritized for PSH until they are housed.

B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoC Program-funded PSH that are not dedicated or prioritized for the chronically homeless would be required to follow this order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

(a) First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months **and** has been identified as having severe service needs.

(b) Second Priority—Homeless Individuals and Families with a Disability with Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(d) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

2. Recipients of CoC Program-funded PSH should follow the order of priority above, as adopted by the CoC, while also considering the goals and any identified target populations served by the project. For example, non-dedicated or non-prioritized CoC Program-funded PSH that is permitted to target youth experiencing homelessness should follow the order of priority under Section III.B.1. to the extent in which youth meet the stated criteria.
3. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following the order of priority as adopted by the CoC. Some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH. Recipients of CoC Program-funded PSH will follow a Housing First approach to the maximum extent practicable. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and these individuals and families must continue to be prioritized until they are housed.

VI. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List

A. Coordinated Entry Requirement

Provisions at 24 CFR 578.7(a)(8) requires each CoC to establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. These written standards incorporate a coordinated entry process to ensure there is a single prioritized list for all CoC Program-funded PSH within NC505.

B. Written Standards for Creation of a Single Prioritized List for PSH

All CoC Program-funded PSH will accept referrals only through a single prioritized list that is created through the NC505 coordinated entry process and informed by the CoC's street outreach and other administrative data systems. Adoption of this referral process into the NC505 policies and procedures for coordinated entry will further ensure that CoC Program-funded PSH is being used most effectively. The single prioritized list should be updated frequently to reflect the most up-to-date and real-time data as possible.

C. Standardized Assessment Tool Requirement

Agencies must utilize the standardized assessment tool and referral requirements as described in the NC505 Coordinated Assessment Policy and Procedure Manual and in accordance with 24 CFR 578.3 and these written standards.

D. Nondiscrimination Requirements

Recipients of CoC Program-funded PSH must continue to comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

VII. Recordkeeping Recommendations the Orders of Priority

Documentation requirements are outlined in 24 CFR 578.103(a)(4) for all recipients of dedicated and non-dedicated CoC Program-funded PSH for determining whether or not an individual or family is chronically homeless for the purposes of eligibility. In addition to those requirements, recipients of CoC Program-funded PSH will maintain evidence of implementing these priorities. Evidence of following these orders of priority may be demonstrated by:

- A. **Evidence of Severe Service Needs.** Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case- conferencing decisions.
- B. **Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance.** Recipients must follow these written standards for prioritizing assistance, as adopted by the CoC. In accordance with the written standards for prioritizing assistance, recipients must document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.
- C. **Evidence that there are no Households Meeting Higher Order of Priority within NC505 Geographic Area.**

(a) When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the NC505 geographic area. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. The recipient of PSH may refer to that list as evidence to satisfy this evidence.

(b) When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the NC505 geographic area. The recipient of PSH may refer to the priority list as evidence that there were no households identified within the NC505 geographic area that meet a higher order of priority.

Performance Measurement Module (Sys PM)

Summary Report for NC-505 - Charlotte/Mecklenberg CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		5488		74			37	
1.2 Persons in ES, SH, and TH		6179		113			49	

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	-	-	-	-	-	-	-
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-

Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	22	3	14%	0	0%	2	9%	5	23%
Exit was from ES	594	48	8%	31	5%	49	8%	128	22%
Exit was from TH	343	16	5%	5	1%	9	3%	30	9%
Exit was from SH	0	0		0		0		0	
Exit was from PH	259	13	5%	15	6%	10	4%	38	15%
TOTAL Returns to Homelessness	1218	80	7%	51	4%	70	6%	201	17%

Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2014	2001	-13
Emergency Shelter Total	1045	1183	138
Safe Haven Total	0	0	0
Transitional Housing Total	805	638	-167
Total Sheltered Count	1850	1821	-29
Unsheltered Count	164	180	16

Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		6330	
Emergency Shelter Total		5579	
Safe Haven Total		0	
Transitional Housing Total		979	

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

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		315	
Number of adults with increased earned income		8	
Percentage of adults who increased earned income		3%	

Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		315	
Number of adults with increased non-employment cash income		64	
Percentage of adults who increased non-employment cash income		20%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		315	
Number of adults with increased total income		71	
Percentage of adults who increased total income		23%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		212	
Number of adults who exited with increased earned income		86	
Percentage of adults who increased earned income		41%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		212	
Number of adults who exited with increased non-employment cash income		38	
Percentage of adults who increased non-employment cash income		18%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		212	
Number of adults who exited with increased total income		120	
Percentage of adults who increased total income		57%	

Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		5715	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		1634	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)		4081	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		6463	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		1876	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)		4587	

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

This Measure is not applicable to CoCs in 2016.

Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		73	
Of persons above, those who exited to temporary & some institutional destinations		5	
Of the persons above, those who exited to permanent housing destinations		42	
% Successful exits		64%	

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

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		5087	
Of the persons above, those who exited to permanent housing destinations		1516	
% Successful exits		30%	

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

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		758	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		726	
% Successful exits/retention		96%	

**Charlotte-Mecklenburg Continuum of Care
Ensuring Access to Educational Services Guidelines**

Charlotte-Mecklenburg Continuum of Care is dedicated to ensuring that all homeless children are provided the resources necessary to stabilize their housing, support their growth and development, and minimize the trauma of homelessness. To that end, the immediate assessment of children's needs and connection to all early intervention and educational supports available and assisting guardians in advocating for their rights under the McKinney-Vento program is key. Therefore, Homeless service providers should incorporate information from the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH Act) related to education assurances into program intakes.

Providers receiving Continuum of Care and Emergency Solution Grant funding for shelter, transitional housing, and permanent housing for families are encouraged to follow these practices in order to meet the developmental needs of homeless children and youth as defined under McKinney-Vento (42 U.S.C § 11434a(2)):

Program staff should provide the parent or guardian with information on:

- The district school that is the appropriate for the age/grade level of the child.
- The rights under the McKinney-Vento legislation to remain at the school of origin, if feasible; and to be immediately enrolled regardless of the availability of previous school records, health records, birth certificates, or proof of residency.
- The contact information for the school social worker and the Charlotte-Mecklenburg Schools McKinney-Vento Liaison.

Additional guidelines:

- Parents or Guardians choosing to home school children should provide program staff with grade appropriate curriculum or web-based programming being used to support an adequate home-school program and proof of ongoing progress in mastering grade-level material, either via progress reports and/or testing results in accordance with North Carolina General Statutes.
- If requested by the parent, guardian or unaccompanied youth to facilitate engagement in school-based services, programs will assist with make arrangements with the appropriate school's transportation service coordinator.

Attendance and Success

School attendance is critical in realizing academic success. Program staff should encourage parents to follow school policies regarding excused absences and medical documentation necessary to return to school after an illness or injury.

Every parent, guardian or custodian having charge or control of a child between the ages of seven and 16 years must be enrolled in school (see, N.C.G.S. § 115C-378). Program participants must be enrolled in school within 5 business days of admission to the program.

Programs are encouraged to develop relationships with community partners to offer educational support on-site, such as tutoring, reading programs, and access to supplemental learning material.

Early Childhood Development

Programs are encouraged to inform families of all available options for child care and developmental support, including evaluation when a delay is suspected.

Programs are encouraged to assist families in enrolling children in health care coverage and accessing annual wellness evaluations to support understanding of age-appropriate developmental milestones and immunization choice.

Training and Professional Development

Program staff are encouraged to attend the annual HUD, McKinney-Vento, or CoC sponsored trainings on access to education and supporting childhood development.

Resources

The following is a list of online resources with additional information on supporting homeless children and youth in accessing all available education resources:

National Association for the Education of Homeless Children and Youth

www.naehcy.org

National Center for the Homeless Education

www.serve.org/nche

North Carolina Homeless Education Program

center.serve.org/hepnc

National Network for Youth

www.NN4Youth.org

NC Department of Education

www.ncpublicschools.org

National Coalition for the Homeless

www.nationalhomeless.org

[Edit this form](#)

CMPD Referral for Homeless Outreach Services

* Required

What is the nature of your referral? *

- Diversion (avoiding arrest or citation)
- Contact made - for example, officer met someone experiencing homelessness who was NOT engaging in illegal/divertable behaviors
- Other:

What is the first and last name of the individual you are referring? *

What is the individual's DOB?

How long does this individual report experiencing homelessness? *

- Less than one week
- Less than one month, but greater than one week
- Several months
- A year or more
- Individual is unsure
- Individual did not answer
- Other:

If you can, please provide a cell phone number for the individual or someone who could put us in contact with the individual.

On a regular day, where and when is an outreach worker most likely to find this individual? *
Be specific and include as many locations as applicable.

Please provide a physical description of the individual, highlighting any unique characteristics. *

What are the descriptors that will most enable the Outreach Team to find this individual?

Please give a brief description of how you encountered the individual. *

Include details of the offense.

Describe any signs of mental illness you observe.

Describe any signs of physical disabilities or substance use you observe.

Provide any other details below:

What is your name and contact information (email and/or phone)? *

Information will be used to keep you, the referrer, updated on your referral.

Submit

Never submit passwords through Google Forms.

VIEWPOINT AUGUST 22, 2016 3:26 PM

CMPD gets it: Being homeless is no crime



BY ROBERT NESBIT

Special to the Observer

You have no place to sleep at night. You search for work, but it's not easy when employers see you haven't showered. You're sent in different directions, walking between social service agencies, shelters and soup kitchens to get your basic needs met. You need to use the bathroom, but the few public restrooms are reserved for paying customers, so you pee outside, wherever you can find a little privacy.

You get a ticket for the most basic bodily function. Now you're pulled into the legal system. You can't afford the fines. You're ashamed of how you look so you miss your court date. A warrant is placed for your arrest and eventually you're picked up by the police. All because you had to go to the bathroom.

For many people experiencing homelessness, this is a common experience. But it doesn't have to be this way. In Charlotte, the Charlotte-Mecklenburg Police Department and Urban Ministry Center's Outreach team are doing something to help people who are homeless avoid our justice system while gaining access to the services they need most.

Quality of Life crimes

When you're homeless, your very existence is criminalized. Peeing becomes public urination. Not having a place to go becomes loitering. Sleeping becomes second degree trespassing. Over time, these charges accumulate on a person's record making it challenging to find housing or employment.

These types of charges are known as "quality of life" crimes. QOL crimes are victimless, low-level misdemeanors that include second-degree trespassing, loitering, open container violations and public urination. During the 1990s, many U.S. cities began to police these behaviors in an effort to keep up appearances while ignoring the root causes of homelessness. As a result, homeless individuals with the fewest resources began to cycle in and out of our legal systems.

Helping the homeless

Recognizing this problem in Charlotte, a group called Helping Homeless to Housing began to advocate for an alternative justice system response.

The Criminal Justice Advisory Group found that the same group of 58 homeless individuals were being arrested frequently. Ninety percent of their offenses were nonviolent, 76 percent were misdemeanors and 49 percent were QOL offenses.

CJAG began to explore how to help people who are homeless avoid the justice system altogether. They designed a model in which outreach workers help people who are homeless access services and housing instead of leaving them to languish in jail or on the streets.

The proposal for this model was not funded, but it led to a diversion initiative between CMPD and UMC Outreach to connect those experiencing homelessness with needed services and housing. Instead of making an arrest or issuing a citation, officers can complete a basic referral form for UMC Outreach, which provides follow-up and support when appropriate.

Since its inception in November, this initiative has diverted 58 people from arrest or citation. Of those referred, 12 individuals not previously known to UMC Outreach were connected with services like case management, health care, disability income, and housing. Seven individuals have been housed either as a direct result of the referral or because of an officer's assistance in completing housing applications and ensuring individuals get to housing appointments.

While still early, this work is creating meaningful change. The initiative has cost no money, but has made a significant difference in the lives of many people experiencing homelessness. It shows that with a little effort and creative collaboration, our community can be changed for the better.

Robert Nesbit is a social justice advocate and musician.



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