Before Starting the CoC Application

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

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

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

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

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

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

 Attachments
 Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed–including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.
 - Attachments must match the questions they are associated with–if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.
 - We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

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

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

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

1A-2. Collaborative Applicant Name: Mecklenburg County

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Mecklenburg County

1B. Coordination and Engagement–Inclusive Structure and Participation

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

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

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	

	In the chart below for the period from May 1, 2023 to April 30, 2024:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted–including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

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

(limit 2,500 characters)

1. The CoC collaborated with underserved communities, particularly Black and Brown communities to design or operate programs that equitably benefit them by listening to gaps in the existing service continuum that particularly impact persons who identify as Black, Indigenous, Persons of Color. At each CoC full membership meeting, there is space on the agenda for attendees to share about gaps in services they are noticing at their agency. From these conversations, three new projects were recommended for State Emergency Solution Grant funding—1 prevention project to an organization led by persons of color and an additional prevention project and rapid rehousing project serving LGBTQ+ youth who also primarily identify as BIPOC to an organization led by LGBTQ+ persons of color. Additionally, one organization that is recommended for CoC funding serves primarily BIPOC men who have sex with men.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1.CoC membership is open to any agency/individual with an interest in working collaboratively to end and prevent homelessness in Charlotte-Mecklenburg. The CoC invites agencies and individuals to join via an open invitation on the CoC website: www.charmeckcoc.org and weekly in the CoC Weekly Digest email. The Digest is sent to over 1,000 individuals and includes CoC information and resources. Members represent nonprofit, faith-based, and private organizations/agencies delivering healthcare, persons with lived experience, social services, and philanthropic organizations.¿
2.The CoC shares information across media types including email, social media, flyers, and public presentations at various service locations to ensure effective communication with individuals with disabilities (visual/hearing impaired, cognitive, and physical disabilities). The CoC also offers a hybrid option for most meetings so the public can choose to participate in- person or remotely. The CoC website and newsletter are ADA compliant.¿
3.Organizations in the community who serve culturally specific communities experiencing homelessness have an open invitation to join the CoC at any time. There has been an increase in the number of CoC member organizations led by persons of color who serve persons of color and they have become more involved in CoC committees and workgroups. All CoC meetings are open to the public.

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

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

(limit 2,500 characters)

1.CoC staff hold quarterly CoC: 101 trainings for all new CoC members & CoC staff. These trainings are designed to offer information about the purpose of the CoC, how it functions locally and eligibility criteria for projects funded through the CoC. Each sessions includes time for open discussion to receive opinions and input on how to end homelessness. Additionally, all CoC meetings are open to the public to include full membership, Governing Board, committees, workgroups, and task forces. Each governing board meeting includes time for public comment. Before full membership meetings, there is a public call for agenda items. At CoC full membership meetings, there is time for discussion on gaps in services in the homeless to housing continuum and time to solicit ideas for uses for planning grant funds to enhance the overall system. CoC staff give updates and ask for input at Homeless Services Network meetings. There is a standing open public comment period for all CoC governing documents.
2.CoC information is communicated during each Board, full membership, committee & workgroup meeting. Each meeting discusses strategies to end homelessness. The public can submit opinions and information to through the CoC website and email. CoC communicates funding opportunities social media.¿
3.Persons with disabilities are encouraged to attend all meetings of the CoC. If special accommodations are needed, the CoC makes the necessary arrangements available. All CoC communication and websites are ADA compliant.
4.Based on information gathered in public meetings, the CoC implemented the following strategies
1.Offered more training opportunities that benefit the entire system including housing first, motivational interviewing, Housing Problem Solving, OrgCode case management & street outreach training and ensuring more CoC members are able to attend national conferences to learn about best practices.
2.Based on feedback from the full membership, the CoC is working to build stronger partnerships with healthcare providers to ensure clients have the services they need whether they are unhoused or housed and continuing to ensure that persons with lived experience are involved in our CoC in every way possible.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	

	Describe in the field below how your CoC notified the public:
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
2.	about how project applicants must submit their project applications–the process;
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

(limit 2,500 characters)

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	

	In the chart below:	
	1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
	2.	select Nonexistent if the organization does not exist within your CoC's geographic area.

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

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

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

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

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated?	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure family members are not separated?	Yes
3.	Worked with CoC and ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients?	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance?	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers?	No

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

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

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

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

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

(limit 2,500 characters)

Charlotte-Mecklenburg Schools (CMS) is the school district that covers our CoC's geographic area. All CMS schools have a McKinney-Vento (MCV) liaison to work with students and families experiencing homelessness. This includes families at shelters, hotels, transitional living programs, living with friends and family, and unsheltered. A full-time MCV Social Worker works with children and families to conduct assessments for MCV eligibility and create work plans. CMS has MOUs with several member and non-member agencies of the CoC including Thompson Child & Family Focus Services, Steve Smith Foundation, Freedom School, INLIVIAN (PHA), and the YMCA to provide services and support to students experiencing homelessness including after school care and connection to education resources. CoC- and ESG-funded agencies ensure students are connected to schools and have access to transportation and other support needed to support students.
The CoC Governance charter outlines an appointed seat for CMS on the CoC Governing Board. CMS is also active in committees and workgroups.
CMS also has an appointed seat on the Coordinated Entry Oversight Committee, both currently held by the MCV Manager. One of the MCV Social Workers participates in the monthly Youth Case Conferencing. Annually, the MCV Manager shares current data (number of homeless students) during the CoC Governing Board meetings.

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

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

(limit 2,500 characters)

As adopted in the CoC's Written Standards, the Education Liaison Policy requires CoC funded providers that serve households with children, that an individual(s) is designated to ensure children are enrolled in school and connected to appropriate services in the community, including Head Start and McKinney-Vento education services. Contact information for the school social worker/school system McKinney-Vento Liaison is provided. Staff ensure that individuals and families are following school policies regarding absences and have the medical documentation necessary to return to school after an illness/injury and are encouraged to develop relationships with community partners to offer educational support on-site (i.e. tutoring, reading programs) and access to supplemental learning material.

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

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

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

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

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

	Organizations	
1.	State Domestic Violence Coalitions	No
2.	State Sexual Assault Coalitions	No
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.		Yes

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

Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:

| 1. | update CoC-wide policies; and |
| 2. | ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors. |

(limit 2,500 characters)

1.CoC & ESG funded providers who serve survivors such as Safe Alliance, Mecklenburg County Community Support Services and Salvation Army participate in the process to update CoC Written Standards to ensure any DV-specific policies are updated to include survivor-centric policies and procedures. Additionally, victim services providers work with the CoC to ensure CE policies & procedures make resources available to survivors through coordinated entry while protecting the safety of the survivor. Our CE process to send referrals to DV housing resources continues to utilize the CE BNL. Our HMIS has a process to include survivors on the BNL if they do not want to be in HMIS so they are still considered for housing resources. Additionally, per our CE policy, based on feedback from providers, DV RRH providers have the flexibility to take 50% of their referrals outside of the CE referral process to help them to quickly house clients they are serving. Our Coordinated Entry team continues to have one team member who serves survivors of domestic violence.

2.The CE team member dedicated to serving survivors splits her time between the Survivor's Resource Center and Safe Alliance to complete Coordinated Entry assessments for this population. This ensures that CE resources are available to survivors in a trauma-informed way in places they are already presenting for services especially if survivors would prefer to access services in person. During the project monitoring process, Collaborative Applicant staff consults with leadership of agencies to determine if all services delivered across the CoC are trauma-informed and can meet the needs of survivors. CA staff makes recommendations for improving services during the monitoring process, CE match process, case conferencing and transfer process by reminding providers how they can assist survivors from moving if needed and ensuring survivors have access to all services.

1C-5b.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

	Describe in the field below how your CoC's coordinated entry addresses the needs of DV survivors by including:
1.	safety planning protocols; and
2.	confidentiality protocols.

(limit 2,500 characters)

1.The CE workflow is designed to first ask if the caller or drop-in client is fleeing DV and to determine if they need to be offered DV-specific resources. Additionally, when CEs are conducted via phone, the CE script prompts the assessor to ensure the client is in a safe space to speak confidentially. With the addition of the DV-CE position that serves persons fleeing DV, survivors benefit from the expertise and knowledge around developing a safety plan and connecting to the most relevant resources expeditiously. If a survivor needs to move to a new unit due to fleeing DV and subsequent safety risks, the specific program will work with the participant to move. If they need to facilitate a transfer to another program, they will consult CE to assist with the transfer. If a survivor from outside of the geographic area of the CoC needs to transfer into NC-505, CE staff will work with the client and original CoC to facilitate the transfer into NC-505

2.For all clients seeking Coordinated Entry, CE staff thoroughly explain the Release of Information (ROI) including the benefits and risks of sharing information. They explain that the system is secure and that all providers who have access to the system have been formally trained and are held to the highest standard of confidentiality and ethics including severe consequences if confidentiality is violated. Assessors explain the CE process prior to beginning the assessment including the note that sensitive questions will be asked, to ensure that callers and drop-ins are in a confidential space to have the conversation. CE staff likewise confirm that clients understand their information is protected by law, they have the right to access their file, make amendments therein and revoke their consent at any time.

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

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

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

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

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

(limit 2,500 characters)

1.Appendix II of the CoC Written Standards outlines the emergency transfer plan policies and procedures.
2.Providers inform clients of their right to request an emergency transfer with clients at intake, regardless of known survivor status. Clients can also contact the CoC or Coordinated Entry for assistance with requesting an emergency transfer. The process clearly explains when a client should request an emergency transfer and how to make the request.
3.A tenant who is the victim of domestic violence, dating violence, human trafficking, sexual assault and/or stalking and reasonably believes that there is a threat of imminent harm from further violence if the tenant remains in the same unit, can request an emergency transfer by submitting a written request to their case manager or to the administrative office. The housing provider will assist the tenant in securing documentation as described in HUD Form 5382. A participant has 14 business days to provide the documentation and can request extensions if needed.
4.In response to emergency transfer requests received, the CoC ensures providers work to transfer clients to a new unit. If a unit is available within the same program, the program will work to move the client within 48 hours. If there is not a unit immediately available, providers work with clients to identify a safe place for the client to go while they identify a new unit. If it is unsafe for clients to remain in the same program, the CoC, via its CE transfer process, works to transfer clients to another housing program either within the CoC geographic area or to another CoC's geographic area, when feasible. While an agency cannot guarantee how long a transfer request will take, the agency will act as quickly as possible to move the tenant. Throughout the transfer process, providers are responsible for assisting household members as they work to meet their needs safety needs and advocating on the client's behalf to the property provider to ensure clients do not face eviction due to being a survivor of DV only. If the provider denies the client's emergency transfer request, participants can file a grievance following NC-505's Participant Grievance and Termination procedure outlined in the CoC's Coordinated Entry Policies & Procedures.

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

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

(limit 2,500 characters)

Clients fleeing DV have access to housing resources specifically for survivors of DV and to all other housing resources. The CoC facilitates safe access to these resources by utilizing the CE match & referral process to match clients to DV-specific housing resources first and all other housing resources as available. Clients fleeing DV are informed of the risks of having their information stored in HMIS and the benefits. If clients choose not to have their information in HMIS at CE, to ensure their safety, they will be added to the community's by-name list anonymously so they will still be considered for available resources. Clients that call CE and report they are fleeing DV are assisted with immediate safety planning to address their physical and emotional safety needs.

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

		Describe in the field below how your CoC ensures survivors receive safe housing and services by:	
	1.	identifying barriers specific to survivors; and	
	2.	working to remove those barriers.	

(limit 2,500 characters)

1.The CoC proactively identifies systemic barriers within our homeless response system through feedback from survivors and through CoC project monitoring. Survivors reported frustration with only being able to remain at the CoC's only DV shelter, which due to funding eligibility, has to use the imminent danger definition and can only allow survivors to remain at its location for 90 days. The barrier identified is resource allocation as there is not enough housing assistance available to survivors.
2.CoC staff worked with this agency to expand its service offerings to include housing and the agency is applying for a DV bonus project. The CoC utilized planning grant funds to provide the agency with training opportunities to expand its housing services. The CoC also worked with the City of Charlotte to allocate HOME-TBRA funds to programs that commit to serving survivors. Additionally, the CoC worked to ensure survivors of DV had access to services in all RRH & PSH projects.

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

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

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

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

(limit 2,500 characters)

1.Our CoC's updated Anti-Discrimination Policy, which addresses HUD's Equal Access Final Rule and HUD's Gender Identity Final Rule, was adopted by the CoC Governing Board on 9/26/2024 with the CoC's written standards update. The written standards were open for public comment prior to the Board approving the updates and Board members were invited to attend sessions to review the CoC written standards prior to being asked to approve them. CoC Board members are members of the LGBTQ+ community and work at agencies that specifically serve this population. All feedback was incorporated before being approved by the CoC Governing Board. The policy will be reviewed and updated based on stakeholder feedback.
2.Through the CoC Equity & Inclusion Committee (EIC), the CoC provides assistance to agencies in revising their project-level anti- discrimination policies so that they are consistent with the CoC-wide anti- discrimination policy as requested. The EIC required each project to complete HUD's Equal Access Rule assessment to identify areas that agencies need additional training. Agencies submit their policies for review by the EIC during quarterly monitoring.
3.The EIC identifies policies that are not in compliance with the CoC's anti-discrimination policy The CoC evaluates compliance with the anti-discrimination policies when programs deny referrals from CE. For example, recently, a CoC-funded organization denied a referral based on criminal background. CoC staff followed up with the agency to inquire further as to why the referral was denied. CoC staff informed the agency that they could not deny the referral but should be transparent with the client about housing availability and how all strengths and barriers that client presents with may impact the housing search.
4.The CoC's process for addressing noncompliance with our CoC's anti-discrimination policy is that clients or anyone who feels they have been discriminated against by an agency in the CoC's geographic area can follow the CoC grievance process outlined in the CoC written standards. Agencies should first follow their own grievance process and if the client is not satisfied with the outcome at the agency level, they can file a grievance with the Coordinated Entry Oversight Committee who will review information from the client and the program and make a final decision, which is binding.

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

	You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
	Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with–if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
INLIVIAN	78%	No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	

	Describe in the field below:
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference–if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,500 characters)

PHA eliminated the homeless preference for HCV in 2019 because their preference was for households experiencing homelessness that had support services. They found that when families came up on the waitlist, they were no longer connected to their support service provider, thus were no longer eligible under the homeless preference so the vouchers went unutilized. CoC staff has asked PHA what it would take to bring back the homeless preference and PHA's Board would have to agree and then the Administrative Plan would need to be updated including a period for public comment. PHA currently does not plan to re-instate or start any homeless or moving on preferences. CoC staff will stay informed of PHA's process to update their admin plan and encourage the CoC Board to issue a request that both homeless & Moving On preference would be added.

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

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

1.	Multifamily assisted housing owners	No
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

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

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

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section V.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes

1D. Coordination and Engagement Cont'd

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

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

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

| | Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. | |

1.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	No
4.	Foster Care?	Yes

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	19
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition that have adopted the Housing First approach.	19
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.
Describe in the field below:

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

(limit 2,500 characters)

1.CoC CA utilizes Pathways to Housing's Housing First Fidelity checklist.
2.This evaluation looks at how projects operate in the following areas: Housing Choice & Structure, Separation of Housing & Services, Service Philosophy, Service Array, and Program Structure. CoC staff evaluates if clients have access to peer support services either directly through the program or with an outside agency that the program has an agreement with.
3.During quarterly monitoring, CoC staff conducts onsite visits with project staff to have in depth conversations about the project's fidelity to the Housing First model. These conversations include innovative ways projects uphold Housing First fidelity, areas of concern from CoC staff and barriers to increasing fidelity that project staff identify. Then the group identifies practices projects can implement over the next quarter. Additionally, CoC staff attend case conferencing meetings and provides real-time feedback if programs demonstrate criteria for accepting clients into programs outside of minimum eligibility criteria. This forum includes ES, SO, PH-RRH and PH-PSH providers who are committed to adhering to housing first and work to assist each other to address barriers in implementing a true Housing First model. CoC leadership follows up with agencies that consistently exhibit extra entry criteria or who are not demonstrating a true housing first approach to offer TA and identify solutions that will strengthen the Housing First implementation.
4.To improve fidelity to Housing First, our CoC offered training via OrgCode for housing case managers. The CoC also implemented a peer to peer group for providers to come together to staff cases they are struggling with. Additionally, projects continue to complete self-evaluations each quarter as they complete the Housing First fidelity checklist and identifying changes they have implemented.

1D-3.	Street Outreach–Data–Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	

Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

Street Outreach teams assist all individuals experiencing unsheltered homelessness through a trauma informed, harm reduction model. They meet each person where they are supporting the client's needs while encouraging them to access shelter and housing resources without regard to a client's race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability. Many individuals who do not want to engage with housing will engage around resources such as mobile showers and food. Staff work to continue to build rapport over any length of time to hopefully eventually connect them with housing. Outreach staff communicates with clients in a variety of ways to ensure services are accessible. One agency in our CoC serves as the street outreach lead agency. This agency receives referrals from the public including law enforcement, hospitals, businesses and citizens. They screen the referrals and send them to outreach teams in the assigned areas where the client is experiencing unsheltered homelessness to engage with clients with the goal of completing the coordinated entry assessment and ultimately get connected to shelter or housing resources. One of the agencies providing housing-focuses case management services is dedicated to serving persons who identify as LGBTQ+ and/or are living with HIV/AIDS. The lead agency has two new teams to target areas of concern: the city center business district and the airport.

Each street outreach team is multi-disciplinary and includes a case manager, clinician and peer support specialist. Street outreach teams stay involved with clients to facilitate a gradual, comfortable transition to shelter or housing.

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

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

	Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1.	Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	No
2.	Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	No
3.	Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	No
4.	Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2023	2024
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	968	1,027

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

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

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

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

	Describe in the field below how your CoC:
1.	works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and
2.	promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1.CoC Governing Board has a healthcare provider seat and a Substance Use (SU) special population seat. The healthcare seat works to improve linkages to healthcare services. Community Health Workers from both large hospital systems are engaged with CoC full membership meetings, Coordinated Entry Oversight Committee, Housing & Healthcare Workgroup and Unsheltered Workgroup. The SU special population seat works to bring the perspective of clients that struggle to access substance use to the CoC to remove barriers. One team from one of the hospital systems currently utilizes HMIS. SU & Mental Health service providers present information about services and referral process changes to the CoC full membership and Homeless Services Network. The CoC currently has 2 projects funded under the CoC Bonus leveraging healthcare services, which has helped improve access to services across the system.

Information on all mainstream benefits (MB) is sent to CoC providers and the Homeless Services Network (HSN) via email. It is verbally shared at CoC Full Membership, committee and workgroup meetings and HSN meetings. Information includes new benefits, updates and training opportunities. MB programs (i.e., substance use programs, DSS) present at meetings on how clients can access benefits. NC CARE 360 continues to be used by providers as an up-to-date resource and referral platform that provides a coordinated, community-oriented, person-centered approach for delivery of MB information. CoC-funded projects ensure clients are screened for Medicaid/Medicare eligibility. Projects have partnerships with Alliance Health, the Managed Care Organization, to ensure clients are referred and connected to appropriate services. Some projects offer services such as substance use treatment and primary healthcare services in house to clients they serve.
2.CoC-funded projects either have SOAR-trained staff in their agency or partner closely with SOAR-trained staff in the community by streamlining referrals and regular communication to ensure appropriate follow up. During the September CoC Governing Board meeting, the CoC's Homelessness & Housing Data Research Coordinator shared that as of August 30, 2024, out of the 3,169 persons experiencing homelessness, 1,657 self-reported a disability and 845 reported having no income at all. During the presentation, SOAR staff highlighted the need for more SOAR-trained staff in our community.

	ID-7.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
		NOFO Section V.B.1.n.	

		Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:
	1.	respond to infectious disease outbreaks; and
	2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1.In the event that any outbreaks occur, agencies within the CoC remain in close contact with the Public Health Department to ensure the effects of the outbreak is mitigated. The CoC can utilize HMIS to leave alerts for clients that need to follow up with Public Health for treatment. The CoC encourages each agency to develop policies and procedures to respond to infectious disease outbreaks that align with the way their facilitate & programs operate and the clients they serve. Agencies have adopted policies that promote vaccinations. Agencies provide education to clients and staff about the vaccine and how to access it. Agencies also promote utilizing Personal Protective Equipment to reduce the spread of infectious disease. Those agencies that operate congregate settings (shelters, etc.) are in close contact with Public Health and have screening processes in place to prevent the spread of diseases.
2.Some congregate living programs require a negative COVID test upon entry to prevent outbreaks and still have PPE available. Public Health is willing to provide training and education to staff and clients to help reduce the probability of any outbreaks.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.n.	

	Describe in the field below how your CoC:
1.	effectively shared information related to public health measures and homelessness; and
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.

(limit 2,500 characters)

1.Through the CoC Email Digest Newsletter, the CoC shares information received from HUD, Public Health and NCDHHS about how to protect the people they serve from a public health concern. Additionally, the North Carolina Coalition to End Homelessness holds monthly calls for CoC & provider staff and one month the topic was a public presentation around the impact of public health and homelessness.
2.Public Health is in regular contact with shelter providers, street outreach providers and housing providers to ensure they have access to the most recent, correct information concerning infectious disease outbreaks and how they can be prevented.

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

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

(limit 2,500 characters)

1.The CE hotline is accessible to 100% of the CoC's geographic area and enables CE staff to reach those who may not be available during traditional work hours, or who otherwise have transportation barriers. CE is also offered on-site for in-person assessments. Street Outreach teams conduct CE assessments with clients who are living unsheltered in encampments.
2.The standardized CE assessment is a phased process that reflects the Housing First philosophy. In phase 1, CE assessors establish client safety and explore prevention when appropriate and diversion. If a prevention or diversion solution cannot be identified, assessors complete phase 2 by collecting HUD required data elements and information related to the immediate housing crisis, service needs, and housing barriers. In addition, community identified and developed vulnerability assessment tools are administered to evaluate an individual or family's vulnerability. These tools in combination with locally identified criteria are used to prioritize available resources when resources are limited.
3.CE assessors collect personal information in a trauma-informed way. Clients are reminded that they can opt out of the assessment at any time and are not required to answer questions to receive services. Agencies can request to be trained to offer CE at their agencies. This ensures that clients have the option of completing the assessment & supplemental tools, which often ask sensitive questions, with staff that they already have a working relationship with.
4.The CE process and assessment is reviewed regularly through the CoC's Coordinated Entry Oversight Committee based on feedback from households participating in CE and from participating projects and agencies.

	1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
		NOFO Section V.B.1.o.	

		Describe in the field below how your CoC's coordinated entry system:
	1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	2.	prioritizes people most in need of assistance;
	3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and
	4.	takes steps to reduce burdens on people seeking assistance.

(limit 2,500 characters)

1.Street outreach workers, including peer support specialists, complete CE with clients experiencing unsheltered homelessness. In-person assessments are available at emergency & DV shelters, homeless day services center, Veterans Services Office, youth day shelter and local LGBTQ+ youth organization. Expanding the number of locations that conduct CE assessments ensures that staff that have existing relationships with clients conduct the assessment. Criminal Justice Services staff conducts CE with justice-involved persons. Individuals who are not in need of shelter or outreach are connected as needed.
2.All PSH and most RRH resources are prioritized for chronically homeless households with the highest vulnerability and longest periods of homelessness. If a program slot can serve youth, families, Veterans or singles, youth are prioritized. NC-505 implemented a supplemental tool to pair with the VI-SPDAT due to racial inequities identified in the VI-SPDAT.
3.The prioritization process ensures that the most vulnerable according to the prioritization tool can access resources at the time they present for assistance. The BNL is not a waitlist, but a dynamic prioritization list. The CE Match team & CoC staff monitor agencies that take referrals from CE on how long it takes them to enroll clients once they are matched (should not be more than 7 days) and then how long it takes programs to house clients once they are enrolled (goal is 30-90 days or less). Providers can staff specific systemic barriers to housing during case conferencing meetings to brainstorm possible solutions. Client choice is always central to the housing process. Clients are offered the resource that is first available and can choose to wait until a resource that is more preferable to their needs is available (example single site vs. scattered site). Clients are offered shelter or other transitional resources as available while they wait.
4.CE is accessible via phone removing transportation barriers and in person requirement. It is also available in person at existing service locations and population-specific agencies where clients, particularly youth, can complete the assessment with a case manager with whom they may have an existing relationship. The CE assessment is periodically reviewed to add or subtract questions based on community priorities and how the data is collected.

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
	NOFO Section V.B.1.o.	

	Describe in the field below how your CoC through its coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;	
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and	
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.	

(limit 2,500 characters)

1.CE staff share all known resources for which clients might be eligible. They ensure each caller leaves the assessment with something they can follow up on even if it is not a specific housing resource.
2.CE staff support clients in navigating filing complaints as requested. Through the HMIS privacy script, clients are informed of their rights.
3.The CoC reports actions that impede fair housing choice to the City of Charlotte, the jurisdiction responsible for the Consolidated Plan, via the Community Relations Committee, a joint committee appointed by the Charlotte City Council and Mecklenburg County Board of County Commissioners.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/26/2024

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

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

(limit 2,500 characters)

1.Our CoC utilized the following data to analyze whether any racial disparities are present in the provision or outcome of homeless assistance: disaggregated Longitudinal System Analysis data using the Stella tool, and when possible, the System Performance Measures; Coordinated Entry and system inflow & outflow data disaggregated by race (monthly). We also examine these disaggregated data by sub-population (veterans, chronic, single adult, unaccompanied youth) and household type. Finally, we examine our housing match process metrics by race and program denials by race to determine if disparities exist in that data. 2.The monthly CE data analysis includes evaluating the racial breakdown of households who had a Coordinated Entry Housing Needs Assessment and an examination of the overall system inflow (persons who are newly homeless, returning from housing, returning from inactive) and outflow (persons exiting to permanent housing and exits to inactive). The housing match process analysis includes analyzing LOT from match to enrollment, LOT from match to housing, LOT from enrollment to housing on a quarterly basis. All of these metrics are compared to local demographic data and to the racial breakdown of the overall homeless population to identify areas of disproportionality. Together, these analyses provide insight into where disparities exist.

The aforementioned analyses have illuminated disparities in returns to homelessness and length of time homeless. Black, African American persons return to homelessness within 2 years of being housed at a rate higher than their prevalence in the population 84% compared to 75%. The median length of time Black, African American persons are in shelter/ safe haven is 30% higher than the system median (61 days vs. 47).

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

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

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes
5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity?	Yes
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes

11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
	Other:(limit 500 characters)	
12.		

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

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

(limit 2,500 characters)

The goal of the CoC is to adopt processes, policies, and procedures that not only center race equity but also prevent or eliminate racial disparities in CoC outcomes. The CoC Staff and the CoC Equity and Inclusion Committee (EIC) are in the process of adapting the Seattle Race and Social Justice Initiative Racial Equity Toolkit for use in evaluating CoC policies, processes, and procedures using a race equity lens. The Toolkit includes guidance on a 6-step process to evaluate desired outcomes and mitigate racial equity impacts on the development, implementation, and revision of policies, processes, and procedures. The EIC hopes to finalize adapting the tool by the beginning of 2025. Once the tool is finalized the EIC will assess the CoC Written Standards and the CE Policies & Procedures. After the initial review of the policies, procedures, and processes, adopted CoC Policies will be reviewed on at least an annual basis using the evaluation tool. In addition, the adapted Racial Equity Toolkit will be used to assess all new policies or changes to existing policies in the CoC Written Standards or CE Policies & Procedures. The CoC will also train all CoC and ESG funded agencies on using the adapted toolkit to evaluate their own agency-specific policies and develop template policies that can be implemented at the agency and program level to ensure provider racial equity policies align with system level policies. CoC staff will also monitor programs on the implementation of these policies during monitoring and during funding competitions to facilitate broad adoption of aligned policies across the continuum. There will be multiple points of evaluation. At baseline, community data will be used to establish pre-plan racial disparities. Once the initial policy analysis has been completed, community data will be used to establish pre-intervention levels of disparity. To assess impact, one year post implementation of aligning the CoC Written Standards and the CE Policies & Procedures to prevent and mitigate disparities and one year post template implementation, community data will be assessed to determine if this system level plan had an impact on how equitably different race/ethnicities are served by the homeless services system.

	1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
		NOFO Section V.B.1.p.	

	Describe in the field below:
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1)Our CoC will continue to track progress on ensuring that the racial breakdown of persons presenting for a CE assessment align with the racial breakdown of the overall population of persons experiencing homelessness. During quarterly monitoring, in partnership with the CoC's Equity & Inclusion Committee, CA staff will continue to evaluate CoC & ESG funded agencies on whether or not the racial makeup of their staff aligns with the race of clients they serve, program diversity & equity policies and their program denials by race, and LOT from match to housed by race.

2) Tools we will use to track this progress: reports from HMIS & agencies. We will also examine SPMs by race as much as we can utilizing Stella P.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.	
	NOFO Section V.B.1.q.	

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

(limit 2,500 characters)

The CoC's main outreach efforts to engage those with lived experience of homelessness in leadership and decision-making roles include targeted outreach by current lived experience committee members. Providers also refer current and former clients to participate in the group. Each committee and workgroup have representation from persons with lived experience. The Youth Action Board members are active in other CoC committees and workgroups, attend CoC Governing Board meetings and CoC Full Membership meetings. One member of the LEC holds an elected seat on the Coordinated Entry Oversight Committee. A member of the YAB served on the Ranking Committee and was directly involved in scoring and recommending projects for funding. Agencies receive points on their CoC competition scorecard if they refer clients to the Lived Experience Committee or Youth Action Board who end up participating. The CoC Weekly Digest email has an open call for people to join the YAB and the CoC.

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Routinely included in the decisionmaking processes related to addressing homelessness.	5	7

2.	Participate on CoC committees, subcommittees, or workgroups.	5	7
3.	Included in the development or revision of your CoC's local competition rating factors.	5	7
4.	Included in the development or revision of your CoC's coordinated entry process.	5	7

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

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

(limit 2,500 characters)

Utilizing planning grant funds, the CoC pays persons with lived experience in homelessness for the time they spend participating in CoC activities. The CoC also provides training opportunities and pays registration fees for persons with lived experience to attend external trainings. Agencies within the CoC pay for clients and former clients to receive peer support specialist training, which would allow them to gain employment as a Peer Support Specialist. Earlier this year, the CoC offered to pay for a Certification in Social Justice and Community Organizing program that a member of the LEC assisted in organizing. The goal of the program is to develop a network of community organizers who can continue to be supported with the training and organizational structures they need to expand the impact of their work.

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

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

(limit 2,500 characters)

1.Our CoC gathers feedback from people experiencing homelessness, through the CoC Lived Experience Committee (LEC), Youth Action Board (YAB) and CoC meetings including governing board, full membership and committee and workgroups. Agencies elevate feedback received from participants they serve.
2. Our CoC gathers feedback regularly. The Lived Experience Committee meets monthly; the Youth Action Board meets every other week; the CoC full membership meets quarterly. Each of these meetings provides an opportunity to gather feedback from people experiencing homelessness.
3.CoC- and ESG-funded agencies utilize surveys, town hall meetings, focus groups and 1:1 meetings with clients. Feedback is reviewed by program leadership and used to inform modifications to program design and service delivery. On the quarterly monitoring & annual funding competition scorecards, projects are given points for the extent they go to implement feedback received by clients they serve. CoC agencies employ persons with lived experience to serve in a variety of roles including shelter specialist, shelter supervisor, case manager, housing navigator, peer support specialist, facilities technician and thus incorporate their view & suggestions in program design. Additionally, CoC agencies reserve seats on their Boards for persons with lived experience.
4.CoC- and ESG- funded projects gather feedback from clients at minimum annually and often more regularly.

5.Agencies established partnerships with furniture banks after clients expressed concern regarding no access to furniture when moving into housing. Another agency updated and clarified its grievance and appeal process after clients gave feedback that it was not clear. One single site PSH program added a grilling area and a garden to its property in response to client feedback. One program offers weekly van rides to grocery stores after hearing from clients it was difficult to utilize public transportation to get groceries.

| 1D-11. | Increasing Affordable Housing Supply. | |
| | NOFO Section V.B.1.s. | |

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

(limit 2,500 characters)

1.CoC members submitted comments to officials via a survey that asks how Housing Trust Fund dollars should be spent in our community
2.CoC Board members met with elected officials to discuss zoning for affordable housing and spoke in favor of affordable housing development at City Council and Board of County Commission meetings.

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

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

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

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

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	08/31/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	08/31/2024

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

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.
Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

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

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes

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

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	285
2.	How many renewal projects did your CoC submit?	14
3.	What renewal project type did most applicants use?	PH-PSH

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

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

(limit 2,500 characters)

1.During the CoC competition, the CoC utilizes a scorecard to collect and analyze data from HMIS & comparable database regarding projects that have successfully housed program participants in permanent housing. The scorecard includes the following performance outcomes: % of referrals enrolled from the community By-Name List (most vulnerable households prioritized), length of time to housing, exits to permanent housing, increase in earned and unearned income, % of clients served who have severe barriers to housing.
2.To set the thresholds for length of time to housing, the MeckHMIS Governance Committee looked at overall system performance measure performance and considered barriers to housing such as severe mental health, lack of income and criminal background barriers. On each CoC quarterly monitoring submission and in the CoC competition submission, projects can share any context about factors that might have prevented them from getting full points in the performance metric scoring. This context can be related to severe barriers to housing clients.
3.MeckHMIS Governance Committee set different benchmarks for length of time to housing, exits to permanent housing and increase in income for RRH and PSH projects due to the severity of vulnerabilities present in PSH vs. RRH program participants.
4.Severe barriers the CoC considered: clients with mental health & substance use challenges, criminal histories and survivors of DV.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.		
	NOFO Section V.B.2.e.		

	Describe in the field below:	
1.	how your CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
3.	how your CoC rated and ranked projects based on the degree that proposed projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and steps the projects took or will take to eliminate the identified barriers.	

(limit 2,500 characters)

1.The MeckHMIS Governance Committee recommends system performance improvement targets to the CoC Board. Collaborative applicant staff works with the ranking committee to ensure the rating factors reflect the approved targets. The CoC Equity & Inclusion Committee recommends rating factors that work to improve equity within agencies providing services. The Lived Experience Committee recommends rating factors to ensure agencies receiving funding rely on the perspective and experience of clients they serve to improve services. Each of these committees and the CoC Governing Board includes representation from persons of different races, particularly those over-represented in the local homelessness population (persons who identify as Black, Indigenous, Persons of Color, which make up 75% of the overall population of persons experiencing homelessness vs. 33% of the overall population in the County).

2.Three of the six Ranking Committee members identify as Black. One member has experienced homelessness. One member is a member of the LBTQ+ community. All 6 members reviewed new & renewal applications and completed scorecards. They then engaged in discussion about how to allocate available funding utilizing the CoC Board approved ranking policy.

3.The ranking committee evaluated proposed projects on the following equity measures: how the race of project staff aligns with the race of clients served in the project, the percentage of agency leadership that belongs to underrepresented communities, the project Diversity, Equity & Inclusion policies, that a minimum of 10% of the agency Board of Directors has lived experience in homelessness, that the project has referred current or former clients to the CoC Lived Experience Committee or Youth Action Board and how the project has incorporated feedback from clients served into changes in service delivery.

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

	Describe in the field below:	
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	

2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 characters)

1.The CoC Governing Board approved the ranking committee's recommended reallocation policy on 5/23/2024. The three most recent performance years of each project grant was evaluated to determine if there was chronic underspending or chronic underperformance. Chronic underspending occurs when a renewal project that has not already been reallocated fails to expend 90% or more of its grant funds during each of its three most recently closed out grant years prior to the measurement date OR fails to expend 90% or more of its grant funds during each of its first two completed grant years. Chronic underperformance occurs when a renewal project fails to serve 90% or more of the projected number of households during each of its three most recently completed grant years prior to the measurement date OR fails to serve 85% or more of the projected number of households during each of its first two completed grant years, per its APR. Chronic Underperformance can also occur when a renewal project does not consistently meet performance benchmarks in the monitoring process. Once a project has been identified as chronically underspending or underperforming, the policy states the reallocation amount may be the greater of average amount of underspending for the two most recently completed grant years or 10% of the annual project funding. If there is chronic underperformance, but there is no underspending, the collaborative applicant, together with the ranking committee may recommend a reallocation amount.
Projects could also voluntarily reallocate funds.
2.The CoC did identify low performing projects through this process during our local competition this year.
3.Two projects were subject to reallocation during this year's local competition due to chronic underspending. Additionally, one project voluntarily reallocated their entire project due to their inability to meet the match requirement.
4.The CoC did reallocate project funding.

1E-4a.	Reallocation Between FY 2019 and FY 2024.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	Yes

1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	Yes
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/14/2024

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/14/2024

1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes

1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	10/28/2024

1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	

You must upload the Notification of CoC-
Approved Consolidated Application attachment
to the 4B. Attachments Screen.

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	10/28/2024

2A. Homeless Management Information System (HMIS) Implementation

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

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

2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus

2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC

2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2024 HIC data into HDX.	05/10/2024

2A-4.	Comparable Databases for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

(limit 2,500 characters)

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

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

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	1,140	125	1,247	99.00%
2. Safe Haven (SH) beds	20	0	20	100.00%
3. Transitional Housing (TH) beds	593	0	404	68.00%
4. Rapid Re-Housing (RRH) beds	1,027	0	1,027	100.00%
5. Permanent Supportive Housing (PSH) beds	1,409	0	1,409	100.00%
6. Other Permanent Housing (OPH) beds	895	0	895	100.00%

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

	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1.On the 2024 PIT, we were able to include a large TH provider that had never previously shared PIT data. If their 122 beds for the night of the PIT were in HMIS, our coverage rate would exceed 85%. We plan to reach out to the provider to continue conversations about joining HMIS. Part of the hesitancy in joining is the capacity to enter historical data.
2.We are currently exploring how we may be able to utilize our Data Import Tool in Bitfocus to take this burden off providers at project setup. We have requested sample data from our non-HMIS PIT partners to test the DIT capabilities.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	Yes

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

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

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

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2024 PIT count.	01/24/2024

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024

2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

(limit 2,500 characters)

The CoC engaged unaccompanied youth and youth serving organizations in our PIT count planning process by inviting them to serve on our PIT planning committee. Two agencies, The Relatives and Time Out Youth, who specifically serve youth, participated in the PIT planning process. They attended all meetings and provided input specific to youth. The Youth Action Board gave input on the local survey questions.

2. Youth and youth serving organizations identified places they knew they could talk directly to the youth, including local alternative schools, the On Ramp Resource Center, Charlotte Transit Center, and other locations in the Uptown area. Time Out Youth and The Relatives hosted PIT count events at their offices. The Relatives advertised their PIT event as a party. There was food and fun available for youth who visited their office that day.
3.Youth who had experienced homelessness served as counters during the unsheltered PIT count. They attended the volunteer training, asked appropriate questions and did an excellent job surveying those who were experiencing homelessness on the day of the PIT count.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

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

(limit 2,500 characters)

1.From 2023 to 2024 we were able to engage an existing TH program and received their PIT night data for the first time. The CoC conducted a census (complete coverage) consistent with HUD standards and guidance. The CoC verified that sheltered homeless persons identified in the count are sheltered on the night designated for the count. The CoC used client data collected in HMIS as the primary data source for the sheltered Count for ES, SH and TH projects that participate in HMIS. All non-HMIS ES, SH and TH projects will utilize a comparable database (secure spreadsheet) to send their complete census count, utilizing the methodology for non-HMIS Agencies as recommended by HUD and outlined by the HMIS System Team. Following HUD guidance, the CoC coordinated the sheltered PIT Count closely with the HIC. All homeless services providers in the sheltered count were included in the HIC even if they do not participate in HMIS and all persons served in those projects on the night of the PIT will be included in the sheltered count. Prior to submission to HUD, the final data set was reviewed by the MeckHMIS Governance Committee, which is a data-focused group of the CoC that includes the HMIS Team and other providers.

2.The CoC completed the unsheltered count on the morning of 1/25/24 via a CoC-wide community canvasing count that covered the CoC's entire geographic area. To ensure there was no duplication, the PIT unsheltered survey included questions asking about where individuals slept on the designated count night and asked whether the person has already been counted as part of this year's count. In addition, after the Point-in-Time Count event was completed, staff reviewed all entries, including all observation counts, to ensure that all data entered was accurate and to remove any duplication or persons who were unable to be identified. Per HUD recommendations, Charlotte-Mecklenburg will maximize remote trainings, including for use of the Outreach Grid App, which is used to complete some of the Point-in-Time Count surveys. Data from the Outreach Grid App will be entered into a specific unsheltered project in HMIS to ensure there is no duplication across the census; and prior to submission to HUD.

3.Our CoC's PIT count was not affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in our CoCs' geographic area.

2C. System Performance

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

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

	2C-1.	Reducing the Number of First Time Homeless–Risk Factors Your CoC Uses.	
		NOFO Section V.B.5.b.	

		In the field below:
	1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;
	2.	describe your CoC's strategies to address individuals and families at risk of becoming homeless; and
	3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time

(limit 2,500 characters)

1. The CoC continues to use a screening tool to target homelessness prevention resources. Risk factors include prior evictions, previous homelessness, disability status, criminal background, large family size, age (unaccompanied youth and/or 50+), lack of GED or HS diploma, BIPOC and/or LGBTQIA household members, and living doubled up with another household.
2. Strategies include continue diversion funding & prevention resources at CE & emergency shelters and training providers on Housing Problem Solving conversations. Diversion funding assists with transportation to housing solutions. In FY24, 293 individuals were diverted from emergency shelters. Mecklenburg County utilized ARPA funds and flexible funding from Community Solutions to provide funding for persons calling CE looking to enter the shelter to help with problem solving to prevent homelessness. Veterans Bridge Home continues to utilize ARPA funds to help with prevention efforts for Veteran households. Additionally, one Veteran provider is utilizing predictive analytics to identify households at risk of falling behind on rent and is seeking additional funding to scale the work to non-Veteran providers. The CoC continues to apply for YHDP funding to be able to serve youth who are homeless or at-risk of homelessness to quickly resolve their housing crisis. Additionally, the CoC will seek opportunities to integrate data across systems (healthcare, criminal justice, education, etc.) to determine risk factors of persons entering homelessness from other systems to improve coordination and ensure people aren't exiting institutions into homelessness. The CoC engaged with Ed Boyte to develop a train the trainer model for Housing Problem Solving. All Coordinated Entry, Emergency Shelter and Street Outreach case managers will participate in the training led by persons with lived experience. The CoC will also align its prevention work to the recently released USICH Prevention Framework.

3. Mecklenburg County, Karen Pelletier, Housing Innovation and Stabilization Services Division Director & Megan Coffey, Coordinated Entry Supervisor are responsible for overseeing our CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.

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

| | Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to: | |

| 1. | natural disasters? | No |
| 2. | having recently arrived in your CoC's geographic area? | No |

| 2C-2. | Reducing Length of Time Homeless–CoC's Strategy. | |
| | NOFO Section V.B.5.c. | |

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

	3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1.Housing navigation & property provider engagement is currently de-centralized, but the goal is to centralize the efforts. Property Provider Engagement is a pillar of A Home for All. They are currently working with TA to build out a pilot program of centralized landlord engagement. The pilot will include numerous incentives that property providers will have access to. The pilot is projected to start in December 2024. At bi-weekly and monthly By-Name List (BNL) meetings, the CoC monitors length of time from match to enrollment to housing move in date. Case conferencing for clients taking the longest to house assists with identifying system barriers that prevent clients from quickly moving into housing. System barriers identified (criminal background) are brought to the agency that does property provider engagement, the CoC Governing Board, CoC committees and workgroups to develop strategies to address the length of time individuals and persons in families remain homeless. CoC staff meet with shelter providers to better understand the needs of long stayers at shelters and work with providers to identify housing options to move people out of emergency shelter.

2.Our CoC identifies persons with the longest length of time homeless through HMIS reports based on client's self-report of when their current episode of homelessness began. This is a factor in our CE prioritization process, which means a client's prioritization score is higher the longer they have been experiencing homelessness. During bi-weekly and monthly case conferencing meetings, individuals who are matched to a housing resource and not housed are enrolled are staffed to identify any barriers that are impacting their rapid exit to housing. The CoC will examine relevant data disaggregated by race and ethnicity to identify existing disparities.

3.PH providers are responsible for fostering relationships with landlords, so they continue to take clients with barriers to housing. Housing Collaborative and the A Home for All Property Provider pilot program is responsible for ensuring more units come online to the system by utilizing property provider incentives, holding fees and risk mitigation funds.

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

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

(limit 2,500 characters)

1.Emergency shelters, safe haven, transitional housing and RRH providers strategically explore all available resources to ensure clients exit into permanent housing. This includes utilizing RRH subsidies for those who are eligible following the community prioritization process when required, exploring the feasibility of shared living with clients and helping remove barriers to clients permanently residing with family or friends. Providers ensure clients apply for income-based housing and help clients access resources to increase their income. The CoC is actively recruiting new property provider partners. The CoC is continuing to partner with the PHA and PCWA to increase utilization of FUP vouchers and encourage the PHA to request an exception to be able to apply for non-competitive FYI vouchers to fully utilize those resources so CoC, ESG and local funding can be targeted to clients on our BNL.

2.To ensure clients in permanent housing projects retain housing, the CoC holds a meeting every other week to identify households that need to transfer from a scattered site PSH program to a single site PSH program and vice versa based on the changing needs of the household. The meeting also identifies households that need to transfer from RRH to PSH due to increased support service needs. Through case management, programs partner with clients to identify goals centered around maintaining permanent housing and support clients in working toward their goals. The PHA is in the process of purging its HCV list that has been closed for 10 years. Each time they pull a list of names, they send the list to the CoC so we can see if clients are active in HMIS. Providers then facilitate contacting clients to get them connected to a voucher. These are strategies the CoC is taking to increase exits to PH destinations. CoC will examine relevant data disaggregated by race and ethnicity to identify existing disparities.

3.Leadership of PH & ES providers are responsible for ensuring households retain PH or exit to a permanent destination. CoC staff is responsible for making connections to available resources for providers and maintaining the relationship with the PHA.

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

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

(limit 2,500 characters)

1.The CoC identifies individuals and families who return to homelessness through reviewing the community BNL on a weekly basis to identify system barriers to housing. The Veterans workgroup meets monthly to review the Veterans BNL and conducts case conferencing. One agency that conducts street outreach connects with clients who have exited multiple PSH programs and end up back in an unsheltered location to try to advocate for their service needs. Data shows that clients with untreated mental health and substance use disorders return to homelessness due to inability to maintain lease requirements.

2.To address the need for an increase in the number of agency-leased units, the CoC Board identified PSH-Leasing as its first priority for CoC funding. The CoC is working to strengthen partnerships between healthcare providers & housing providers to ensure clients have access to needed services to maintain housing and prevent returns. In the event a client is placed in a housing intervention that seemed appropriate at placement but is not successful (i.e. scattered-site vs. single-site; RRH vs. PSH) and is at risk for a return to homelessness, a case worker will a request for a PSH transfer to avoid the return to homelessness. All clients at risk of exiting a program are required to be added to the CoC transfer queue. The CoC will examine relevant data disaggregated by race and ethnicity to identify existing disparities.

3.Leadership of organizations that provide RRH & PSH are responsible for overseeing this strategy and the CoC Board will work to standardize aftercare interventions through the CoC Written Standards. CoC staff is responsible for monitoring agencies for transferring clients.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	

	In the field below:
1.	describe your CoC's strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,500 characters)

1.The CoC written standards require that programs work to connect clients to employment without making it a condition of program participation. The CoC's strategy to increase employment income includes connecting clients with employment opportunities and workforce development, as available, at CE. Emergency shelters and housing programs have employment specialists that develop partnerships with employers who will work with clients. Agencies have existing relationships with employment and temporary agencies to provide employment opportunities. CoC will examine relevant data disaggregated by race & ethnicity to identify existing disparities.

2.Agencies refer clients to workforce development agencies such as Goodwill, Charlotte Works and Charlotte Area Fund to connect clients to employment opportunities. These agencies maintain relationships with employers and provide job training, coaching and paid training programs. The CoC shares employment opportunities via the CoC Weekly Digest.

3.PH & ES agency directors are responsible for overseeing this strategy to ensure their agencies maintain relationships with employers and workforce development providers. CoC & CE staff are responsible for maintaining relationships with workforce development providers to connect clients to employment at CE. The Collaborative Applicant is also responsible for bringing in more CoC members who are workforce development providers.

2C-5a.	Increasing Non-employment Cash Income–CoC's Strategy	
	NOFO Section V.B.5.f.	

		In the field below:
	1.	describe your CoC's strategy to access non-employment cash income; and
	2.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,500 characters)

. Strategies include increase coordination among SOAR workers to ensure eligible clients are quickly connected to a SOAR specialist at CE. Mecklenburg County Criminal Justice Services has 2 SOAR workers for clients connected to the justice system to help reinstate benefits. DSS has 3 SOAR workers to focus on getting benefits for Medicaid recipients. Individual agencies have SOAR workers. Area hospitals have SOAR workers to connect high utilizers to benefits. The Veteran Service Office connects eligible clients to Veteran-specific benefits. Mecklenburg County Community Support Services' SOAR Coordinator convenes all of the SOAR workers in the community to identify strategies to streamline application processes and to ensure providers are serving the same clients. Case managers are encouraged to connect all clients without income that have a disability to a SOAR worker to determine their eligibility. The CoC will examine relevant data disaggregated by race & ethnicity to identify existing disparities.
2.Mecklenburg County SOAR Coordinator is responsible for overseeing this strategy by ensuring SOAR workers are coordinated in their outreach and engagement.

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
Rapid Rehousing f...	PH-RRH	17	Healthcare
Healthcare & Hous...	PH-PSH	15	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? Rapid Rehousing for LGBTQ People

2. Enter the Unique Entity Identifier (UEI): H9K2TG3J5MK9

3. Select the new project type: PH-RRH

4. Enter the rank number of the project on your CoC's Priority Listing: 17

5. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project? Healthcare & Housing NEW (2)

2. Enter the Unique Entity Identifier (UEI): E13YEC7G16P8

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 15

5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

	Is your CoC requesting funding for any new project application requesting $200,000 or more in funding for housing rehabilitation or new construction?	No

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.r.	

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

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

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

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

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

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No

3C-2.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.
	If you answered yes to question 3C-1, describe in the field below:
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

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

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

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

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

	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.j.	

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

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

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

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

1.	Enter the number of survivors that need housing or services:	1,056
2.	Enter the number of survivors your CoC is currently serving:	946
3.	Unmet Need:	110

4A-3a.	How Your CoC Calculated Local Need for New DV Bonus Housing Projects.	
	NOFO Section I.B.3.j.(1)(c)	

	Describe in the field below:
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

The number of DV survivors that need housing or services was calculated based on HMIS data for non-DV projects (coordinated entry) for the year 7/1/2023 to 6/30/2024, filtering on clients with DV history and removing any duplicate clients. The number of DV survivors currently being served was calculated based on HMIS data for non-DV projects (emergency shelter, safe haven, transitional housing, rapid rehousing, other permanent housing, and permanent supportive housing) who had history of DV and were served in these project types on the day of 6/30/2024. The number of survivors currently at our DV shelter, and survivors in DV RRH programs, was added to the number of those being currently served.

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

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

Applicant Name
Supportive Housin...

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

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

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

1.	Applicant Name	Supportive Housing Communities
2.	Rate of Housing Placement of DV Survivors–Percentage	96%
3.	Rate of Housing Retention of DV Survivors–Percentage	88%

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

	For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:	
1.	how the project applicant calculated the rate of housing placement;	
2.	whether the rate for housing placement accounts for exits to safe housing destinations;	
3.	how the project applicant calculated the rate of housing retention; and	
4.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).	

(limit 1,500 characters)

1. We took total number of households served divided by the number of housing slots in all programs.
2. No, this was not taken into account for placement only for retention.
3. We used the unsuccessful exits divided by total households placed and then subtracted from 100% to get the difference.
4. HUD APR Report was used for prior fiscal year.

4A-3c.	Applicant's Experience Housing DV Survivors.	
	NOFO Section I.B.3.j.(1)(d)	

	Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan;	
3.	determined survivors' supportive services needs;	
4.	connected survivors to supportive services; and	
5.	moved survivors from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

1. Survivors in our other housing programs are connected to housing as quickly as possible with safety plans
2. All of our housing programs follow the CE prioritization process. All clients are made aware of the CoC Emergency Transfer Plan at entry
3. Case managers incorporate trauma-informed safety planning for all survivors
4. Case managers offer to connect clients to DV services
5. All of our housing programs incorporate a housing stability plan for clients working toward when subsidy ends.

4A-3d.	Applicant's Experience in Ensuring DV Survivors' Safety.	
	NOFO Section I.B.3.j.(1)(d)	

	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping survivors' information and locations confidential;
4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

In other programs of SHC, when a survivor or domestic violence was identified, we have locked the user's profile in HMIS, master leased the unit in which the client was placed, ensured staff were trained on how to protect the safety and confidentiality of the client, and we can provide access to an alarm system for the unit in which the survivor is placed. We have arrangements with local hotel locations where we can move clients quickly when the need arises. We also have relationships with other organizations that serve DV survivors who can help with quick and confidential transfers to safe units.

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

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

(limit 2,500 characters)

SHC has not had a specific program in the past that was targeted for Survivors of DV. We have however served survivors of DV in other programs and have used the following protocols to ensure safety. We have locked the user's profile in HMIS, master leased the unit in which the client was placed, ensured staff were trained on how to protect the safety and confidentiality of the client, and we can provide access to an alarm system for the unit in which the survivor is placed. We also have arrangements with local hotel locations where we can move clients quickly when the need arises. We also have relationships with other organizations that serve DV survivors who can help with quick and confidential transfers to safe units.

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

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

(limit 2,500 characters)

SHC has not had a specific program in the past that was targeted for Survivors of DV. We have however served survivors of DV in other programs and have used the following protocols to prioritize housing placement: Client has been moved to the top of the housing search list to ensure that they are moved quickly into a new unit; if it takes more than 72 hours to identify a new unit then the client has been placed in a master leased hotel room while the new unit is being found. Case managers work with school officials to help ensure the confidentiality of the children's living arrangements.

4A-3f.	Applicant's Experience in Trauma-Informed, Survivor-Centered Approaches.	
	NOFO Section I.B.3.j.(1)(d)	

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

(limit 5,000 characters)

The project will implement a non-punitive approach by focusing on supportive interventions that empower participants. Regular workshops will be held to promote equality among staff and participants, ensuring all voices are heard and valued. Feedback mechanisms will be established, allowing participants to contribute to program development, fostering a sense of ownership and collaboration.

• Staff will undergo specialized training on trauma-informed care, equipping them to share resources about the impacts of trauma with participants. Informational sessions will be organized
to educate participants about trauma responses and coping strategies, enhancing their understanding and resilience. • The project will incorporate strength-based assessments and coaching techniques in case management. Participants will engage in goal-setting exercises that focus on their aspirations and strengths, allowing them to create personalized action plans. Regular check-ins will celebrate achievements and encourage growth, reinforcing their sense of agency.

• Cultural competence training will be mandatory for all staff, emphasizing nondiscrimination and equal access. The project will provide language support services, including translation and interpretation, to ensure that all participants can fully engage. Additionally, community partnerships will be developed to address specific cultural needs and enhance the program's relevance.

• The project will facilitate support groups and peer mentorship programs where participants can share experiences and build community. Spiritual care resources will be integrated, offering connections to faith-based support as desired. Social events will be organized to foster informal connections and reduce isolation among participants.

• The project will include trauma-informed parenting classes that focus on the unique challenges faced by survivors. Childcare services will be provided during classes and events, ensuring accessibility. Legal workshops will connect participants with resources for custody and support, equipping them to navigate their parenting journey effectively.

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

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

(limit 5,000 characters)

SHC partners with Legal Aid to help our clients address child custody issues, credit repair, and restraining order navigation. We have 3 full-time housing navigators on staff who will prioritize the housing search and placement in hotel units when needed to ensure client and household safety. SHC case managers will be trained to work to meet the needs of DV survivors and their family members to ensure trauma informed care is provided where and when needed. Case managers work with clients at the start of the program to begin preparing them for exit date and how they can function independently in housing once their time in our program ends. We will ensure that they have information to continue to support their needs by providing contact list for services that may arise after the program ends. SHC works with partnering organizations to address education and employment access for survivors and members of their household. SHC's life skills coordinator will work with DV households to ensure they have access to services for education and employment. Case managers will also ensure connection through McKinney Vento coordinators in children's schools.

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

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

(limit 2,500 characters)

Clients will work with SHC's housing navigator to find safe housing while the search for permanent housing (following a RRH model) is in progress. Clients' preference for the location of their RRH unit will be prioritized. They will immediately begin working with a housing navigator and a case manager to balancing households' needs and how to best address them in a timely manner. Case managers will ensure that households have resources to address their most pressing needs and that of their children.

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

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

5.	provide a variety of opportunities for program participants' connections, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
6.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

This program is designed to support survivors of domestic violence by providing safe, stable housing and personalized services to help participants obtain or recover in rapid re-housing. Our approach prioritizes both immediate housing stability and long-term safety, focusing on the unique needs of survivors. Trauma-Informed Approach We recognize that survivors of domestic violence often face complex trauma. Our program staff are trained in trauma-informed care, ensuring that every interaction is sensitive to the effects of trauma. This approach reduces re traumatization and creates a supportive environment for healing. We will: Offer flexible, individualized services that respect each participant's choices and needs. Provide education and support around trauma, empowering survivors with coping strategies. Create a physical and emotional space that feels safe, non-judgmental, and empowering. Victim-Centered Approach Our victim-centered strategy places survivors at the core of decision-making, ensuring their safety, autonomy, and well-being. The program's services will be designed to honor the lived experiences of each participant. We will: Develop personalized housing plans that incorporate survivors' safety concerns and preferences. Work closely with participants to identify housing options that prioritize safety, stability, and proximity to supportive services. Provide legal advocacy and support to address housing discrimination, eviction prevention, and landlord mediation. By combining trauma-informed care with a victim-centered framework, this program will empower survivors to rebuild their lives in a secure, stable housing environment. Supportive Housing Communities has been providing affordable housing with support services since 1993. We have had Federal, State, City, County, and Private grant funds and have successfully executed each grant according to the parameters of the grant. We have passed audits of each program with no findings. We have an annual financial audit by an external audit firm that has no connection to SHC. We operate as a 501c(3)organization with a governing board that oversees our financial and operational ethics and efficiency. Our governing board has three individuals who have "lived experience" with homelessness and domestic violence. SHC has not had a grant dedicated to serving those fleeing or in recovery from domestic violence, but we have individuals/families in most of our current programs who are current survivors of domestic violence. We also have staff members who have been survivors of domestic violence and who understand the many issues that come with surviving domestic violence.

4A-3j.	Applicant's Plan for Involving Survivors in Policy and Program Development, Operations, and Evaluation in the New DV Bonus Housing Project(s).	
	NOFO Section I.B.3.j.(1)(f)	

	Describe in the field below how the new project will involve survivors:
1.	with a range of lived expertise; and
2.	in policy and program development throughout the project's operation.

(limit 2,500 characters)

SHC has individuals on the staff and board with lived experience in homelessness and DV. These individuals have provided guidance and will continue to do so as we establish policies and procedures for execution of this program. These individuals will represent the best interest of our clients in having a voice on the planning and implementation of the program. SHC will also conduct a survey every 6 months to acquire input and feedback from clients in the program to help reshape program policies and implementation.

4B. Attachments Screen For All Application Questions

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1D-10a. Lived Experience Support Letter	Yes	Lived Experience ...	10/28/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/28/2024
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	10/14/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	10/22/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/28/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/28/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/22/2024
1E-5c. Web Posting–CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	2024 HDX Competit...	10/22/2024
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	10/28/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description:

Attachment Details

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Attachment Details

Document Description: Lived Experience Support Letter

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

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Document Description: Local Competition Selection Results

Attachment Details

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Document Description: 2024 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreement

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

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

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

October 18, 2024

To Whom It May Concern:
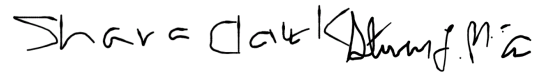
The Lived Experience Committee (LEC) and Youth Action Board (YAB) of the Charlotte-Mecklenburg Continuum of Care (CoC) is pleased to support the CoC in its vision that homelessness is rare, brief and non-recurring in the Charlotte-Mecklenburg community and that everyone has housing choices and prompt access to a variety of housing resources and supports that meet their needs.

We, members of the LEC and YAB, attend full membership, governing board, committee and workgroup meetings of the CoC, including the Coordinated Entry Oversight Committee and Unsheltered Homelessness Workgroup. One of our LEC members holds an elected seat on the Coordinated Entry Oversight Committee. It was because of our advocacy, that we pushed for the need to have more peer support offered in our community and peer support added as a component in our CoC's Written Standards. We also served as volunteers for the 2024 Point in Time Count and plan to do so again in 2025.
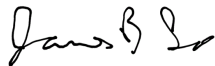
Two members of the LEC holds a seat on the CoC Governing Board where they were directly involved in approving the recommended FY24 CoC NOFO project rankings as presented by the Ranking Committee. One of our YAB members also serves on the Ranking Committee and scored and ranked projects that were recommended for funding.

We look forward to continuing the work of our important committees with the Charlotte-Mecklenburg Continuum of Care through this funding opportunity and beyond.

Sincerely,

Charlotte-Mecklenburg CoC/ESG Program Monitoring Form

Agency Name/Program Name	Roof Above-Moore Place		Date of Monitoring: 1.9.2024
Grant Identification #			
Total Award Amount		**Total Spent**	
Agency Staff Present	Gena Robinson & Stacey Bergeron		
CoC Staff Present	Erin Nixon & Branden Lewis		
Report completed by	Branden Lewis & Erin Nixon		

Permanent Supportive Housing Program Monitoring Form

PROGRAM REVIEW

Review Questions	Comments
What PSH services are provided by the recipient?	Nurse & Tenant Services (programming & events)
Is recipient spending PSH funds on eligible activities for which it was funded? Are all program activities as stated in the contract being carried out?	Yes

Review Questions	Response (Yes/No/NA)	Comments
Review project intake process from match to housed. Does the recipient have an intake process to determine PSH participant eligibility and an understanding of the definition of homelessness commensurate with services provided?	Yes	
Is there evidence that the recipient is correctly identifying and assisting eligible program participants from identified target population?	Yes	
Is recipient and/or subcontract(s) reporting in HMIS or other approved comparable data base?	Yes	
Are grant funded staff in place?	Yes	
Review monitoring scorecard. Is the recipient meeting the outcome goals for which it was funded?	Yes	
Is recipient assisting each program participant in obtaining needed mainstream resources, which will help achieve independent living?	Yes	
Does recipient and/or subcontractor(s) have a process to manage security deposits? (Sub-recipient and/or subcontractor(s) may recover the security deposit, in which case it must be treated as program income and then may be used for a new household. Alternately, sub-recipient and/or subcontractor(s) may allow the household to keep the deposit and use it towards their next unit or allow the landlord or property management company to keep a portion of the deposit if it is needed to pay for costs incurred by the tenant such as damages to the unit.)		
Does recipient and/or subcontractor(s) have an annual recertification process?		
What is the average case load per case manager? Is it reasonable?		
How are Case Managers developing plans with participants to "move on" from PSH?		lack of affordable housing after move out is a challenge; "moving on" continues to be a struggle
Does the recipient have a written process for terminating assistance to a program participant? *Specific to rental assistance* , does process indicate there is written notice to participant, review of decision and prompt notice to participant on final decision? Does program utilize CoC Transfer process? If so, how is it determined which clients are presented for transfer?		
Is there evidence that the program is operating on a Housing First model? What challenges does the program face with implementing Housing First?	Yes	low barrier; able to waive criminal background

PROGRAM FILE REVIEW

Review Questions	Response (Yes/No/NA)	Comments
Are case files/ program records maintained by the recipient?	N/A	
Is the confidentially of case files/program records safeguarded?		

Review Questions	Response (Yes/No/NA)	Comments
Is there evidence client is from target population?		
Is homelessness documented before receiving services?		
Is there documentation of services provided that are in line with the CoC Written Standards for the intervention?		
Is there evidence participants are being served with case management at least monthly? Is level of assistance adequate?		
Are client case plan outcomes appropriate?		
Is the recipient documenting habitability inspections?		
Are financial/rental assistance payments made directly to third parties?		
Does recipient and/or subcontractor(s) have a process to calculate the rent reasonableness and assuring rents are within FMR when providing rental assistance?		
Is a lease in place when providing rental assistance?		
Does recipient and/or subcontractor(s) have a process to determine the level of financial/rental assistance needed? Does this meet client need?		
Are case records up to date?		
Are case files acceptable?		

COORDINATED ENTRY		
Review Questions	Response (Yes/No/NA)	Comments
Is there evidence in the file of CE referral?		
Are program staff on the CE committee? Are program staff knowledgeable of the CE process?	Yes	

GENERAL REQUIREMENTS		
Review Questions	Response (Yes/No/NA)	Comments
Do staff appear knowledgeable about PSH and the program's requirements?	Yes	
Are there any red flag issues? If so, how are they being addressed?		
Are there any compliance issues? If so, what corrective actions are being taken?		
Has this program been monitored by the HMIS administrator, if so, what was the outcome?		
Is the program well integrated into the overall structure of the agency? What other programs are administered by the recipient?	Yes	

OVERALL COMMENTS/SUGGESTIONS/RECOMMENDATIONS

A community-wide effort for strategic "moving on" would be helpful; have difficulty finding inpatient placement for SU & MH treatment; transfer process is going ok--seem to be sending people back and forth, violence; feedback from clients: used to do town halls, focus groups, clients always give them feedback as needed; CoC staff suggested adding peer support to the current treatment model.

Notification of Projects Rejected-Reduced

Notification of Project Accepted

This attachment includes the email sent to all projects showing which projects were accepted and which projects were reduced.

Page 2 shows where the email was sent, but our email system does not populate the email addresses as required by HUD. Thus, page 4 shows where I forwarded the email to myself, which then populates the email addresses.

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TSA- Family Rapid Rehousing	61%	11	Reduced Reallocated	$277,643	($30,849)
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Safe Alliance- Rapid Rehousing for Domestic Violence	76%	18	Accepted	$547,109	$547,109
SHC-DV RRH	68%	19	Accepted	$498,576	
AJC- RRH for DV Survivors	61%	20	Accepted	$582,373	
Housing Collaborative	-	-	Fully Reallocated	$0	$ (435,664.00)

Thank you!

Erin

Erin Nixon, MSW, LCSW
Sr. Social Services Manager-Continuum of Care
Community Support Services | Housing Innovation & Stabilization Services
Mecklenburg County Government
704-497-8700 | MeckNC.Gov

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Laura Caldwell <laura@aplacetoliveagain.org>; Trish Hobson <thobson@therelatives.org>; Tawanna Denmark <TawannaD@carolinascare.org>; Kellee Hicks <Kellee.Hicks@uss.salvationarmy.org>; Gulden, Chelsea <c.gulden@carolinarain.org>; Lawrence, Laura <laura.lawrence@safealliance.org>; Harold Rice <harold.rice@adajenkins.org>

Subject: CoC Application Follow Up

Importance: High

Good Afternoon,

The CoC Governing Board met today to review the recommendations from the Ranking Committee for HUD CoC funding. The CoC Board voted to approve the recommendations (attached), which includes the project(s) your agency submitted.

Next steps:
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Thank you all for your commitment to this process and your work on behalf of our neighbors experiencing homelessness.

Please let us know if you have any questions.

Thank you!

Erin

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Sr. Social Services Manager-Continuum of Care
Community Support Services | Housing Innovation & Stabilization Services
Mecklenburg County Government
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From:	Nixon, Erin
To:	Nixon, Erin
Subject:	CoC Application Follow Up
Date:	Monday, October 14, 2024 3:33:00 PM
Attachments:	NC 505 Local Competition Selection Results.pdf
	image002.png
	image003.png
	image004.png
	image005.png
Importance:	High

From: Nixon, Erin

Sent: Monday, October 14, 2024 3:31 PM

To: Coffey, Megan <Megan.Coffey@mecklenburgcountync.gov>; Sanders, Kimberly <Kimberly.Sanders@mecklenburgcountync.gov>; Robinson, Adia <Adia.Robinson@mecklenburgcountync.gov>; 'Katie Church' <kchurch@roofabove.org>; 'Qianna Simmons, Case Manager –' <qianna@aplacetoliveagain.org>; 'Gena Robinson' <grobinson@roofabove.org>; 'Dewitt Wilson' <dwilson@roofabove.org>; 'Anita Brown' <abrown@roofabove.org>; Lynn Cuddy <lcuddy@therelatives.org>; 'Riley Kilpatrick' <RKilpatrick@therelatives.org>; Dawson, Kenya D. <Kenya.Dawson@mecklenburgcountync.gov>; 'Albrea Crowder' <AlbreaC@CarolinasCare.org>; 'Brooks, Joyce' <J.Brooks@carolinarain.org>; 'Goldstein, Cori' <Cori.Goldstein@safealliance.org>; 'Deronda Metz' <deronda.metz@safealliance.org>; 'Stephanie Wallace' <Stephanie.Wallace@adajenkins.org>; 'Josh Kiser' <josh.kiser@adajenkins.org>; 'Shaunte Dickson' <Shaunte.Dickson@uss.salvationarmy.org>; 'Diane Beecham' <Diane.Beecham@uss.salvationarmy.org>; Nicole <ndewitt@housingcollab.org>

Cc: Pelletier, Karen <Karen.Pelletier@mecklenburgcountync.gov>; 'lclasen-kelly' <lclasen-kelly@roofabove.org>; 'Kaedon Grinnell' <kgrinnell@roofabove.org>; 'Laura Caldwell' <laura@aplacetoliveagain.org>; Trish Hobson <thobson@therelatives.org>; 'Tawanna Denmark' <TawannaD@carolinascare.org>; 'Kellee Hicks' <Kellee.Hicks@uss.salvationarmy.org>; 'Gulden, Chelsea' <c.gulden@carolinarain.org>; 'Lawrence, Laura' <laura.lawrence@safealliance.org>; 'Harold Rice' <harold.rice@adajenkins.org>; Tara Peele <tpeele@housingcollab.org>

Subject: RE: CoC Application Follow Up

Importance: High

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Community Support Services | Housing Innovation & Stabilization Services
Mecklenburg County Government

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From: Nixon, Erin
Sent: Friday, October 11, 2024 4:19 PM
To: Coffey, Megan <Megan.Coffey@mecklenburgcountync.gov>; Sanders, Kimberly <Kimberly.Sanders@mecklenburgcountync.gov>; Robinson, Adia <Adia.Robinson@mecklenburgcountync.gov>; Katie Church <kchurch@roofabove.org>; Qianna Simmons, Case Manager – <qianna@aplacetoliveagain.org>; Gena Robinson <grobinson@roofabove.org>; Dewitt Wilson <dwilson@roofabove.org>; Anita Brown <abrown@roofabove.org>; Lynn Cuddy <lcuddy@therelatives.org>; Riley Kilpatrick <RKilpatrick@therelatives.org>; Dawson, Kenya D. <Kenya.Dawson@mecklenburgcountync.gov>; Albrea Crowder <AlbreaC@CarolinasCare.org>; Brooks, Joyce <J.Brooks@carolinarain.org>; Goldstein, Cori <Cori.Goldstein@safealliance.org>; Deronda Metz <deronda.metz@safealliance.org>; Stephanie Wallace <Stephanie.Wallace@adajenkins.org>; Josh Kiser <josh.kiser@adajenkins.org>; Shaunte Dickson <Shaunte.Dickson@uss.salvationarmy.org>; Diane Beecham <Diane.Beecham@uss.salvationarmy.org>
Cc: Pelletier, Karen <Karen.Pelletier@mecklenburgcountync.gov>; lclasen-kelly <lclasen-kelly@roofabove.org>; Kaedon Grinnell <kgrinnell@roofabove.org>; Laura Caldwell <laura@aplacetoliveagain.org>; Trish Hobson <thobson@therelatives.org>; Tawanna Denmark <TawannaD@carolinascare.org>; Kellee Hicks <Kellee.Hicks@uss.salvationarmy.org>; Gulden, Chelsea <c.gulden@carolinarain.org>; Lawrence, Laura <laura.lawrence@safealliance.org>; Harold Rice <harold.rice@adajenkins.org>
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Thank you!

Erin

Erin Nixon, MSW, LCSW
Sr. Social Services Manager-Continuum of Care
Community Support Services | Housing Innovation & Stabilization Services
Mecklenburg County Government
704-497-8700 | MeckNC.Gov

Click here to schedule a meeting with me

From: Nixon, Erin
Sent: Friday, October 11, 2024 4:19 PM
To: Coffey, Megan <Megan.Coffey@mecklenburgcountync.gov>; Sanders, Kimberly <Kimberly.Sanders@mecklenburgcountync.gov>; Robinson, Adia <Adia.Robinson@mecklenburgcountync.gov>; Katie Church <kchurch@roofabove.org>; Qianna Simmons, Case Manager – <qianna@aplacetoliveagain.org>; Gena Robinson <grobinson@roofabove.org>; Dewitt Wilson <dwilson@roofabove.org>; Anita Brown <abrown@roofabove.org>; Lynn Cuddy <lcuddy@therelatives.org>; Riley Kilpatrick <RKilpatrick@therelatives.org>; Dawson, Kenya D. <Kenya.Dawson@mecklenburgcountync.gov>; Albrea Crowder <AlbreaC@CarolinasCare.org>; Brooks, Joyce <J.Brooks@carolinarain.org>; Goldstein, Cori <Cori.Goldstein@safealliance.org>; Deronda Metz <deronda.metz@safealliance.org>; Stephanie Wallace <Stephanie.Wallace@adajenkins.org>; Josh Kiser <josh.kiser@adajenkins.org>; Shaunte Dickson <Shaunte.Dickson@uss.salvationarmy.org>; Diane Beecham <Diane.Beecham@uss.salvationarmy.org>
Cc: Pelletier, Karen <Karen.Pelletier@mecklenburgcountync.gov>; lclasen-kelly <lclasen-kelly@roofabove.org>; Kaedon Grinnell <kgrinnell@roofabove.org>;

Laura Caldwell <laura@aplacetoliveagain.org>; Trish Hobson <thobson@therelatives.org>; Tawanna Denmark <TawannaD@carolinascare.org>; Kellee Hicks <Kellee.Hicks@uss.salvationarmy.org>; Gulden, Chelsea <c.gulden@carolinarain.org>; Lawrence, Laura <laura.lawrence@safealliance.org>; Harold Rice <harold.rice@adajenkins.org>

Subject: CoC Application Follow Up

Importance: High

Good Afternoon,

The CoC Governing Board met today to review the recommendations from the Ranking Committee for HUD CoC funding. The CoC Board voted to approve the recommendations (attached), which includes the project(s) your agency submitted.

Next steps:

- **Renewal Projects:** please review all of your information in esnaps including your budget to ensure that the total amount requested is what is reflected in the attachment. Once you have reviewed, please submit your project in esnaps by Monday, 10/28/24.
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Thank you all for your commitment to this process and your work on behalf of our neighbors experiencing homelessness.

Please let us know if you have any questions.

Thank you!

Erin

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Sent: Monday, October 14, 2024 3:31 PM
To: Coffey, Megan <Megan.Coffey@mecklenburgcountync.gov>; Sanders, Kimberly <Kimberly.Sanders@mecklenburgcountync.gov>; Robinson, Adia <Adia.Robinson@mecklenburgcountync.gov>; 'Katie Church' <kchurch@roofabove.org>; 'Qianna Simmons, Case Manager –' <qianna@aplacetoliveagain.org>; 'Gena Robinson' <grobinson@roofabove.org>; 'Dewitt Wilson' <dwilson@roofabove.org>; 'Anita Brown' <abrown@roofabove.org>; Lynn Cuddy <lcuddy@therelatives.org>; 'Riley Kilpatrick' <RKilpatrick@therelatives.org>; Dawson, Kenya D. <Kenya.Dawson@mecklenburgcountync.gov>; 'Albrea Crowder' <AlbreaC@CarolinasCare.org>; 'Brooks, Joyce' <J.Brooks@carolinarain.org>; 'Goldstein, Cori' <Cori.Goldstein@safealliance.org>; 'Deronda Metz' <deronda.metz@safealliance.org>; 'Stephanie Wallace' <Stephanie.Wallace@adajenkins.org>; 'Josh Kiser' <josh.kiser@adajenkins.org>; 'Shaunte Dickson' <Shaunte.Dickson@uss.salvationarmy.org>; 'Diane Beecham' <Diane.Beecham@uss.salvationarmy.org>; Nicole <ndewitt@housingcollab.org>
Cc: Pelletier, Karen <Karen.Pelletier@mecklenburgcountync.gov>; 'lclasen-kelly' <lclasen-kelly@roofabove.org>; 'Kaedon Grinnell' <kgrinnell@roofabove.org>; 'Laura Caldwell' <laura@aplacetoliveagain.org>; Trish Hobson <thobson@therelatives.org>; 'Tawanna Denmark' <TawannaD@carolinascare.org>; 'Kellee Hicks' <Kellee.Hicks@uss.salvationarmy.org>; 'Gulden, Chelsea' <c.gulden@carolinarain.org>; 'Lawrence, Laura' <laura.lawrence@safealliance.org>; 'Harold Rice' <harold.rice@adajenkins.org>; Tara Peele <tpeele@housingcollab.org>
Subject: RE: CoC Application Follow Up
Importance: High

Good Afternoon,

As a follow up, we are including the final rankings in the format HUD would like us to follow. Please see attached and below for your reference. Additionally, all new projects have received suggested edits. Please ensure that you submit your projects in esnaps (& click submit) by Monday, 10/28.

Project Name	Project Score	Project Rank	Project Status	Amount Requested from HUD	Reallocated Funds
CoC Planning Grant	-	not ranked	Accepted	$360,316	
Meck Co-Coordinated Entry Renewal	-	1	Accepted	$148,000	
Meck Co-FY23 Mecklenburg HMIS	-	2	Accepted	$240,000	
Meck Co-SPC Consolidated Renewal FY23	75%	3	Accepted	$2,739,840	
Roof Above-Homeless to Homes Consolidated	71%	4	Accepted	$277,444	
SHC-Scattered Sites I and III	68%	5	Accepted	$392,523	
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September 16, 2024

Erin Nixon, MSW, LCSW
Sr. Social Services Manager – Continuum of Care
Mecklenburg County Government
600 E. 4th Street
Charlotte, NC 28202

Dear Erin:

We are delighted to provide this Letter of Support for RAIN's application for a HUD Continuum of Care (CoC) New Project Application for Rapid Rehousing Funding, grounded in Housing First and public health principles – to reduce the homelessness, and improve service engagement, health outcomes, and housing stability for LGBTQ individuals and families.

RAIN's application will provide services for 10 LGBTQ individuals (and their families) who are experiencing homelessness or are at risk of immediate eviction with housing referrals, housing, and medical case management, access to health insurance enrollment through the ACA Marketplace or Medicaid, and health care resources in collaboration with Amity Medical Clinic.

Amity Medical Clinic is a full-service health clinic that provides primary health care, specializing in HIV and PrEP care. For this project, I will commit to providing medical assistance that is at least an amount that is equivalent to 25 percent of the funding being requested for RAIN's project. We will set up systems, in collaboration with RAIN, to track patient access to medical care and the value of these services in order to report to the County and HUD as required.

Thank you for providing this funding opportunity to our community. We look forward to working with you and RAIN to ensure that these vulnerable individuals have access to services that can help restore health and well-being.

Sincerely,

Olivia Bentley

Olivia Bentley
Executive Director
Amity Medical Group

AMITY MEDICAL GROUP