

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
2. Ensuring all questions are answered completely.
3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.

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

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

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: NC-506 - Wilmington/Brunswick, New Hanover, Pender Counties CoC

1A-2. Collaborative Applicant Name: Cape Fear Council of Governments

1A-3. CoC Designation: CA

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

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.

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

Veterans Service Office	Yes	Yes
Veterans Administration	Yes	Yes
Veterans Advocates	Yes	Yes

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

**1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.
(limit 1000 characters)**

The CoC holds monthly open meetings. Attendance by support providers and advocates for the homeless or at-risk is encouraged. Meetings are advertised on the Cape Fear Council of Governments and United Way websites with weekly meeting notices by e-mail. New and returning members are able to discuss and make recommendations on agenda topics which are captured in meeting minutes for further action as needed. CoC Administrator presents at city and county meetings, and community events to inform the public of CoC efforts and solicit participation. CoC meetings include sub-committee updates where changes to projects or initiatives are discussed with opportunities for input. Feedback is taken back to sub-committees for discussion and action. Recently, the Coordinated Entry Committee provided options for structure of assessment and prioritization for a CoC vote. Members suggested a hybrid option and tasked the committee to create a standardized assessment to be offered to crisis service providers.

**1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach.
(limit 1000 characters)**

The CoC invites participation from all service systems and new providers, and advocacy organizations are invited to present and become members. The CoC requires only one meeting for a member to be allowed to vote. CoC staff issues invitations at least monthly for new members. CoC staff includes an invitation to participate during bi-monthly CIT Trainings, and 8 community presentations covering the region. CoC members inform homeless peers about the CoC and invite them to represent the homeless population by participating in monthly meetings, committees and on Point In Time Count teams. The CoC annual PIT appreciation lunch provides an opportunity for members to recruit peers to continue participation in the CoC. The SOAR team encourages homeless peer participation. Three organizations within the CoC have peers as staff who regularly attend CoC and sub-committee meetings, which has provided the CoC with a peer on the Executive Committee.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to

**proposals.
(limit 1000 characters)**

The CoC advertises an open application process via e-mail notification to CoC list-serve on 5/30/17,online posting to CoC Lead website 8/1/17 and at the 8/1/2017 CoC Meeting.Project eligibility requirements and eligible activities are reviewed at CoC Grant Committee meetings;new applicants are encouraged to attend.Meeting schedule is sent via email, announced monthly at CoC meetings & posted on CoC Lead's website to assure submission deadlines are publically known.CoC list-serve includes anyone who attended a CoC meeting within 2 years or requests inclusion.New applicants are encouraged to submit proposals.If the CoC is not reallocating,bonus project applications are solicited.All new projects that meet CoC and grant committee attendance requirements are considered.The scorecard includes project type as a scored element to align with the community needs assessment.New projects were informed on 9/8/17 whether they would be included in the project priority listing and why.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects.

Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient's in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates. (limit 1000 characters)

CoC Lead works with the Statewide ESG recipient as a subrecipient of ESG funds for the region. CoC staff chair monthly ESG meetings where local sub-recipients report performance and regulation compliance. The state uses a Fair

Share formula for funding allocation and prioritizes applications that have more funding dedicated to housing stabilization than crisis response. CoC contributes to the state Con Plan via the ESG CAPER, bi-weekly communication via phone/e-mail to the state ESG Director, and participation in Request For Application preparation workgroup. The CoC collaborates with the City of Wilmington and State Con Plan jurisdictions. CoC contributes written sections on homelessness for the Wilmington ConPlan and CAPER. HMIS and PIT survey data on overall and new homelessness, housing placement and retention rate and income increases are shared with both Con Plan jurisdictions via data posted on the CoC lead website, presentations to Wilmington City Council and meetings with City staff.

**1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants.
(limit 1000 characters)**

The CoC works with victims service providers ensuring that survivors have multiple points of access to crisis services regardless of time or location, and updated housing information, including relocation options. DV survivors access services through DV shelters in each county, a Rape Crisis Center, which have 24/7 call lines, or the Coordinated Entry (CE) hotline. The CE assessment includes questions to identify survivors & make referrals to victim service providers & other crisis response options, promoting choice. Survivors screened by DV shelters or coordinated entry can access dedicated DV TH units, RRH program for DV, and non-DV housing within the CoC. DV referrals are provided a warm transfer, ensuring bed space, based on release of information. Providers offer data security options to survivors, including program-only access, closing the HMIS profile or un-named record. Privacy/security training is offered to anyone, ensuring maximum security of records.

**1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment.
(limit 1,000 characters)**

The CoC has established a quarterly training schedule in coordination with partner agencies and the Managed Care organization to include Trauma Informed Care, Harm Reduction, Motivational Interviewing, Client Centered Practices, and conducting VI-SPDAT assessments. The CoC included in its planning grant for FY16 an online training service through the Corporation for Supportive Housing for additional training related to serving survivors of domestic violence and other special populations. Victim Service Providers regularly participate in the CoC and Coordinated Entry meetings and inform the CE Committee of best practices related to assessing risk, avoiding re-traumatizing questions, seeking safety, and accessing trauma related services.

The CoC Annual needs assessment includes statistics from DV providers and how resources align with need. DV is a priority population for the CoC grant application and for the past two years, RRH programs for DV victims have been proposed as new projects.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Wilmington Housing Authority	5.00%	Yes-HCV
Pender County Housing Authority	2.00%	Yes-HCV
Brunswick County Housing Authority	1.00%	No

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

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)

The CoC coordinates with the Wilmington Housing Authority (WHA) and Brunswick County Housing Authority (BHA) via participation on the CoC Advisory Board and the Brunswick Homeless Task Force. Both groups include access to affordable housing as an agenda item at every meeting. CoC Staff and key stakeholders have met with the WHA Director to advocate for a non-veteran homeless priority, which the Director reports is being taken to the WHA board for consideration. The Brunswick Housing Authority director and Manager participate in the Brunswick Homeless Task force monthly meetings. CoC staff and stakeholders continue to discuss options for short term sheltering and accessing housing resources to move people quickly in to housing. Brunswick County staff have requested consistent data to support the need and CoC staff are working with crisis service providers to create an unduplicated annual homeless count in that county. The CoC has worked with BHA to request VASH vouchers.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular 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, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)

The CoC coordinates with the Cape Fear Housing Coalition to offer Fair Housing Training annually in April which includes information on the Equal Access Rule and how it applies to individuals and families accessing crisis services and housing. The CoC includes LGBT households who present to the CE system and supports access for families and individuals with unique service needs. The CoC Written Standards include equal access requirements. The state ESG office offered training on the Equal Access Rule that the recipient and sub-recipient organizations attended. CoC staff respond to questions that arise from the CE hotline staff related to equal access and reference the rule or submit a question via AAQ on the HUD Exchange to ensure CoC projects are following Equal Access guidelines. The CoC plans to include anti-discrimination policy as part of its update to the Coordinated Entry policies and procedures, which is in process and will be completed by January 15, 2018.

1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="checked" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="checked" type="checkbox"/>
Engaged/educated local business leaders	<input checked="checked" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

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

1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)

Not Applicable.

1D-2. Discharge Planning: Select the system(s) of care within the CoC's geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	<input checked="checked" type="checkbox"/>
Health Care:	<input checked="checked" type="checkbox"/>

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

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

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.

Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities

**CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)
(limit 1000 characters)**

The CoC provides opportunities for projects serving people with specific needs and vulnerabilities to provide input into the scoring of projects and score higher based on the number of special populations they serve or people they serve with more vulnerabilities. CoC looks at chronic homeless and DV as vulnerable populations and included a scored element for special populations in which projects received partial points for serving 65%+ in one special population and full points for 2+ special populations. The scorecard has 2 scored questions related to lowering barriers to entry and retention of housing for those with substance abuse and little to no income, with points earned for lowering or eliminating barriers. CE prioritizes the chronically homeless who are most vulnerable and PSH projects earn points for only accepting referrals from CE. Point values were adjusted to allow for longer time from referral to occupancy as our community transitioned to use of a prioritized housing list.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.

Public Posting	
CoC or other Website	<input checked="checked" type="checkbox"/>
Email	<input checked="checked" type="checkbox"/>
Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC's may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. 09/08/2017

Attachment Required: Copies of the written notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. 09/08/2017

Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.

Reallocation Supporting Documentation

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	NC-506 Ranking an...	09/08/2017

Attachment Details

Document Description: NC-506 Ranking and Reallocation Policy

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

Attachment Required: If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.

2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA. Gov. Charter Pg2 Section 1.2J, HMIS MOU pgs 1-2

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual. Yes

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

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area. Statewide HMIS (multiple CoC)

2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells

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in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	266	52	193	90.19%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	139	17	122	100.00%
Rapid Re-Housing (RRH) beds	16	0	16	100.00%
Permanent Supportive Housing (PSH) beds	174	0	82	47.13%
Other Permanent Housing (OPH) beds	0	0	0	

**2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.
(limit 1000 characters)**

There were 92 VASH beds at the time the HIC was completed. The VA has indicated that they will not enter their beds into HMIS. The CoC Administrator has discussed HMIS participation with HUD VASH and Health Care for Homeless Veterans leadership and presented a no cost for use option and will continue to make that option available to them.

2A-6. Annual Housing Assessment Report (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR? 12

**2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).
(mm/dd/yyyy)** 05/02/2017

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception. 01/25/2017

2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy) 05/02/2017

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results. (limit 1000 characters)

The CoC made a data quality methodology change in the 2017 PIT count. We used only HMIS data for all HMIS participating shelters in the 2017 PIT count instead of a combination of HMIS data and paper surveys used in 2016. This was based on the CoC's improvement in data quality and ability to unduplicate PIT participation. The CoC has seen a consistent reduction in its sheltered PIT count over the last few years which continued with the 2017 PIT Count. Use of HMIS data provided improved coverage of sub-population data, avoiding opting out from surveys, and utilizing volunteers to improve unsheltered count coverage.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count? Yes

2C-2a. If "Yes" was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.

Beds Added:	11
Beds Removed:	0
Total:	11

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count? No

2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017? No

CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

2C-4a. Describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC's unsheltered PIT count results. See Detailed Instructions for more information. (limit 1000 characters)

No Change. Not Applicable.

2C-5. Did the CoC implement specific measures to identify youth in their PIT count? Yes

2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified. (limit 1000 characters)

The CoC reached out to all youth service providers for input on locations where homeless youth might be staying. Youth providers were invited to be part of the unsheltered count as volunteers and to recruit volunteers with lived experience as homeless youth. CoC staff conducted training with volunteers in each county with emphasis on identifying homeless youth and utilizing a youth survey supplement to collect additional information about school participation and involvement in justice and foster care systems. CoC staff worked closely with McKinney-Vento Liaisons who provided de-identified information on homeless youth and families. New Hanover County and Pender County aligned their monthly count with the PIT count to ensure an accurate count of homeless youth in school.

2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)

In the three months prior to the PIT count, the CoC held planning meetings monthly in each county with organizations serving the chronically homeless, veterans and families with children to discuss the process, receive input on any changes necessary to identify areas where people are living in unsheltered situations, and encourage homeless peers to participate on each unsheltered PIT count team. Outreach groups were encouraged to participate based on their familiarity with the chronically homeless. Training on how to conduct a homeless history and identify the chronically homeless was provided. The CoC discussed the process and provided feedback on locations where individuals were known to stay and identified new encampments and feeding sites where surveys should be conducted. On the day of the count, each team had at least one homeless peer and there was a veterans PIT count team that focused on sites where unsheltered veterans were known to stay.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time.

(limit 1000 characters)

30 more people were identified as newly homeless between FY15-16. Coordinated Entry (CE) hotline calls are screened for diversion to determine the cause of the housing crisis and referred to resources matched to their specific risk factors. The CE hotline is advertised regionally via cards/resource sheets available at: libraries, community organizations, county offices so that people can get assistance before falling into homelessness. CE committee reviews most common risk factors at monthly meetings and identifies resources to assist. Most at risk callers seek emergency assistance for utilities, housing costs, affordable housing. County DSS, Salvation Army and The Arc receive funds for rent and utilities to prevent homelessness and participate in CE. The CoC distributes crisis service flyers and affordable housing guides at meetings and events. CoC Lead and the CE committee are responsible for overseeing the CoC strategy to reduce the number of newly homeless individuals.

3A-2. Performance Measure: Length-of-Time Homeless.

CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless.

(limit 1000 characters)

Average ES length of time homeless (LOT) was reduced by 9 days and average LOT in ES, TH, and SH was reduced by 4 days. To reduce LOT homeless we will continue our strategies of case management, with focus on creating and adhering to a housing plan. People are engaged at entry to discuss housing options and strategies to reduce housing barriers; addressing credit and legal

history. Use of RRH has shortened the LOT people remain homeless. CE assessment includes gathering documentation on LOT homeless and ESG/CoC projects use the VI-SPDAT to prioritize highest needs with LOT homeless given priority. The CoC trains on housing first principles, reducing reliance on program enrollment as a determinant in housing readiness. HMIS users run reports for LOT. The HMIS committee reviews LOT data by program type quarterly. Reports will be used to create LOT benchmarks for CoC and ESG programs. CoC Lead, CE and ESG committees are responsible for strategies to reduce length of stay.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing.
(limit 1000 characters)

The CoC saw a 6% increase in PH placement rate from ES, TH and PH-RRH programs and a 3% increase in retention of PH. The CoC works with shelters to provide vacancy information for all PH programs and training on the referral processes for those programs. CoC staff work with HMIS participating shelters to improve capture of exit destination for those who are leaving shelter, especially those who self-resolve their homelessness. Use of the master list process for Veterans and long term homeless individuals has encouraged case conferencing for those in special populations and with higher needs to provide a housing strategy for those individuals and families. PSH providers have lenient termination policies. The CoC will provide at least twice annual training on the VI-SPDAT and housing prioritization process and increase outreach to community organizations on housing resources. The CoC Lead, CE and CoC Grant Committees are responsible for strategies to improve housing placement and retention.

3A-4. Performance Measure: Returns to Homelessness.

Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC's efforts to reduce the rate of individuals and families' returns to homelessness.
(limit 1000 characters)

CoC saw a 10% increase in rate of return to homelessness after 2 years, with greatest increase in rate of return from ES (7%). Most returns occur in the first 6 months of placement (18%). Currently shelters follow up with people placed for 1 year and encourage contact if people are at risk of losing housing. RRH projects follow up for 24 mos. post placement. People are supplied with affordable housing resources and the CE hotline number for prevention. RRH funds are prioritized to help people avoid housing crisis. Next year's focus is on saving for emergencies while in ES, TH and RRH. CoC/ESG recipients will focus on increasing mainstream resources to ensure people leave with maximum

support. After care will focus on the 1st 6 months of housing as a critical time when people are likely to lose housing. RRH providers encourage contribution to expenses at placement to improve client investment in housing. CoC Lead and CE committees are responsible for strategies to reduce returns to homelessness.

3A-5. Performance Measures: Job and Income Growth

Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)

CoC organizations assess income and employability upon individual/household arrival and set income goals as part of a housing plan. The CoC has a SOAR program with 2 caseworkers, and Phoenix Hometown Hires employment readiness and placement program. SOAR is highly successful, with 70 SSI/SSDI wins last year. SOAR staff meet with ES and TH guests right after arrival if they identify with a disability and no income. Phoenix job coaches case conference with ES and TH staff and ensure people have transportation & appropriate attire for interviews and work. CoC meetings include detailed presentations with Q&A on programs such as Voc. Rehabilitation and Division of Workforce Solutions Re-Entry specialist. Families are connected to WIC/TANF and childcare vouchers to reduce costs for food and childcare within all CoC funded projects. People are assisted with SNAP when housed, LIHEAP. The CoC Lead and CoC grant committee are responsible for strategies to increase income and mainstream benefits.

3A-6. Did the CoC completely exclude a geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people, including areas that are uninhabitable (deserts, forests). No

3A.6a. If the response to 3A-6 was "Yes", what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count?
(limit 1000 characters)

Not Applicable.

3A-7. Enter the date the CoC submitted the 06/05/2017

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**System Performance Measures data in HDX,
which included the data quality section for FY
2016.
(mm/dd/yyyy)**

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

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. Compare the total number of PSH beds, CoC program and non CoC-program funded, that were identified as dedicated for yes by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	80	88	8

3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.

Total number of beds dedicated as Dedicated Plus	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	88
Total	88

3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Yes

3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.

History of or Vulnerability to Victimization	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input type="checkbox"/>

Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder)	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

**3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 1000 characters)**

The CoC strategy to rapidly re-house households of families with children is to develop a housing plan, identify family strengths in obtaining and retaining housing, and provide affordable housing choices for the family. The CoC utilizes the Family VI-SPDAT to assess level of need. The CoC had increased success with developing a housing plan, budget, and identifying housing opportunities and resource needs in the first week of stay at ES/TH. Strengths based assessment will be developed in the second week of stay. Weekly follow-up will focus on resource building. This is most effective when families arrive with financial resources and the timeline is often extended when a family arrives with no income or a larger family requires a housing unit that is larger. TH is utilized when a family is the victim of DV or has medical/mental health needs and requires additional support prior to housing. The CoC lead along with ESG and CoC grant committees are responsible for implementing the strategy.

3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	14	15	1

**3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing.
(limit 1000 characters)**

The CoC written standards include the Equal Access rule. The CoC promotes understanding of the equal access rule through discussion at ESG and CoC committee meetings and requiring ESG grantees to attend fair housing training provided by the state office and establishing a fair housing policy including serving protected classes. CE policies and procedures and materials support

keeping families together. CE hotline staff report on any instances in which individuals are denied access by a referral partner based on age, sex, gender, LGBT status, marital status or disability. The CoC partners with the local Center for Independent Living for training on ADA compliance. The CE committee is in the process of updating policies and procedures, which will include policies on anti-discrimination and equal access. CoC members are informed of HUD sponsored fair housing, gender identity and equal access trainings.

3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

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

3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.

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

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC's efforts. (limit 1500 characters)

CoC has a small youth homeless population. Strategy to increase availability of housing and services for homeless youth is ensuring youth can access to existing resources and services are comprehensive enough to support their needs. CoC works with the local youth shelter, school liaisons & at-risk youth service organizations to capture data on youth homelessness and identify resources for sheltering and housing homeless youth. CoC supported a request for a youth TH/Outreach program. Youth providers are informed of RRH funds

and encouraged to refer. CoC coordinates training on resources for youth aging out of foster care. UNCW and Cape Fear Community College are on the CoC Advisory Board. CoC uses HMIS data quarterly to look at increases/decreases to entries from the youth shelter and changes to the LOT youth are homeless. PIT count, school data on homelessness, and the AHAR report are used to measure the annual rate at which youth are placed in PH and reduction in the number of homeless youth.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services. (limit 1000 characters)

The CoC invites McKinney Vento (MV) Liaisons from each county to membership and advisory board meetings. The CoC has at least one meeting annually focused on youth homelessness, in which the CoC receives a presentation on MV regulations and changes impacting homeless youth and families, and other services for homeless and at-risk youth. Liaisons in New Hanover and Pender participated in the 2017 PIT count. The CoC's Written Standards for CoC and ESG programs on accessing education include informing families of rights under MV and encouraging them to inform their school social worker of their homeless status. LEAs inform families of the student's rights and services available through MV. LEAs are informed about the coordinated entry process where unaccompanied youth and families with children are screened for CoC and ESG project eligibility. The youth shelter is active in the CoC and regular notices of RRH funding and PSH openings are shared with the CoC via announcements and e-mail.

3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No".

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

**3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 1000 characters)**

The CoC Homeless Veteran Strategy Team meets monthly and reviews our by-name list twice monthly to identify homeless veterans and develop a housing plan for each veteran. The VA Homeless Social Worker, HUD-VASH, and SSVF staff work closely with ES and TH providers to connect Veterans quickly to those programs. Unsheltered Veterans are identified through the Homeless Veterans Call Line, CE, SOAR and street outreach. VA and SSVF staff participate in the Coor. Entry committee and Homeless Veterans Strategy Team. The CE screening includes questions regarding military service so that homeless and at-risk Veterans are immediately referred to the VA, SSVF, and GPD programs. The CoC participated in a Rapid Results Initiative, which included community outreach via presentations to county commissioners and information sessions for organizations, engaging new landlords with affordable housing, and Pender HA developing a Veteran preference for HCV.

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

Yes

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

Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach?

No

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits. (limit 1000 characters)

CoC invites organizations providing mainstream benefits to participate in meetings and provide presentations and updates for available resources at each meeting. Notices/flyers are also shared via CoC mailing list. Mednorth (HCH provider), DSS, SOAR, Center for Indep. Living, Managed Care Organization (MCO), Catholic Charities, Cape Fear HealthNet, and Coastal Horizons are active CoC partners. The MCO connects people to MH/SA/IDD services via triage line and housing department. The SOAR program assists individuals with SSI/SDDI and Medicaid applications. MedNorth, the HCH provider, and Cape Fear HealthNet offer free and sliding scale fee health services to those who are low-income or indigent. CFHN's enrollment specialists are based out of DSS in all three counties to ensure access to enrollment assistance. Service providers complete a needs assessment to

determine appropriate referrals.DSS for all 3 counties,MCO and HCH are responsible for the CoC strategy for accessing mainstream resources.

4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	11.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	10.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	90.91%

4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	11.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	10.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	90.91%

4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance. (limit 1000 characters)

The CoC funds outreach via an ESG sub-recipient,First Fruit Ministries (FFM), and coordinates outreach conducted by the VA Homeless Social Worker,SOAR and Vigilant Hope (VH) outreach ministry, and covers 100% of the CoCs geo area.Outreach occurs multiple times per week,with a team,including a family nurse practitioner, going to encampments and serving dinner on the street twice per week.FFM opened an outreach and engagement center in partnership with MedNorth to provide a satellite health center for the homeless.FFM provides transportation to/from the center & for other service appointments.VH provides food, clothing and showers 4 days/wk to the homeless in Wilmington.The CoC partners with the Center for Independent Living and UNCW for translation services and services for people with barriers to communication to ensure that all people have access to resources. Outreach begins with engagement and progresses to case management when an individual is willing to work toward housing.

**4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as**

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detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.

Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

The CoC affirmatively furthers fair housing by partnering with the Cape Fear Housing Coalition for the annual Fair Housing Training and working with ESG and CoC grantees to incorporate Fair Housing policies within their organizations. CoC grantees are required to provide their eligibility criteria as part of Coordinated Entry, which ensures that tenant screening aligns with fair housing policy. Forms and other documents are provided in large print and staff are directed to read any information aloud when it appears that a person has limited reading ability. CoC agencies without bilingual staff can access translators through UNCW and Coastal Horizons' Clinica Latina. The CoC utilizes services for the blind to provide copies of documents in braille as necessary. DSS has translated the crisis services flyer into Spanish which is available on the Council of Governments website and is printed for CoC partners monthly.

4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	14	16	2

4A-7. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statutes who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). No

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	Priority Listing ...	09/18/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	NC 506 Scorecard ...	09/09/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	NC 506 Public Pos...	09/22/2017
05. CoCs Process for Reallocating	Yes	NC 506 Tri-HIC Re...	09/18/2017
06. CoC's Governance Charter	Yes	NC 506 Gov Charte...	09/18/2017
07. HMIS Policy and Procedures Manual	Yes	NC 506 HMIS Polic...	09/20/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	NC 506 Housing Au...	09/18/2017
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	NC 506 HMIS MOU	09/18/2017
11. CoC Written Standards for Order of Priority	No	NC 506 Coordinate...	09/18/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	NC 506 SysPM Report	09/09/2017
14. Other	No		
15. Other	No		

Attachment Details

Document Description: Priority Listing Notifications

Attachment Details

Document Description:

Attachment Details

Document Description: NC 506 Scorecard and Ranking Process

Attachment Details

Document Description: NC 506 Public Posting Evidence

Attachment Details

Document Description: NC 506 Tri-HIC Reallocation Plan

Attachment Details

Document Description: NC 506 Gov Charter and Written Standards

Attachment Details

Document Description: NC 506 HMIS Policies and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: NC 506 Housing Authority Admin Plans

Attachment Details

Document Description: NC 506 HMIS MOU

Attachment Details

Document Description: NC 506 Coordinated Entry Policies and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: NC 506 SysPM Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	08/29/2017
1B. Engagement	09/22/2017
1C. Coordination	09/22/2017
1D. Discharge Planning	09/08/2017
1E. Project Review	09/22/2017
1F. Reallocation Supporting Documentation	09/08/2017
2A. HMIS Implementation	09/22/2017
2B. PIT Count	09/22/2017
2C. Sheltered Data - Methods	09/22/2017
3A. System Performance	09/22/2017
3B. Performance and Strategic Planning	09/22/2017

4A. Mainstream Benefits and Additional Policies

09/22/2017

4B. Attachments

Please Complete

Submission Summary

No Input Required



NC-506 Continuum of Care

September 8, 2017

Lee Anna Stoker
Executive Director
First Fruit Ministries
2750 Vance Street
Wilmington, NC 28412

Dear Ms. Stoker:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Wilmington Dream Center Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$8,600. In a vote that took place at the Tri-HIC meeting on September 5, 2017 the ranking committee voted to include your new project in the CoC's priority list for the FY17 HUD CoC Competition, and based on your project score your project is ranked 3rd out of 11 approved projects.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and the commitment to furthering the CoC's goal of creating more permanent housing opportunities for the homeless.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers". The signature is written in a cursive, flowing style.

Cecelia Peers
Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

Lee Anna Stoker
Executive Director
First Fruit Ministries
2750 Vance Street
Wilmington, NC 28412

Dear Ms. Stoker:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the New Wilmington Dream Center Rapid Re-Housing Housing Bonus Project has been approved by the CoC ranking committee at the requested amount of \$42,054. In a vote that took place at the Tri-HIC meeting on September 8, 2017 the ranking committee voted to include your new project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project score your project is ranked 6th out of 11 approved projects.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and the commitment to furthering the CoC's goal of creating more permanent housing opportunities for the homeless.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers". The signature is fluid and cursive.

Cecelia Peers
NC 506 Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

First Fruit Ministries
2750 Vance Street
Wilmington, NC 28412

Dear Ms. Stoker:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Wilmington Dream Center Transitional Housing Project Renewal has been approved by the CoC ranking committee at the requested amount of \$112,116. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project application score your project was ranked 2nd out of 11 approved projects.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and the tremendous effort put forth in preparing your renewal submission package.

Sincerely,

A handwritten signature in cursive script that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator

Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401



NC-506 Continuum of Care

September 8, 2017

Betty Bisbee
Executive Director
Wilmington Housing Finance and Development
3508 Frog Pond Place
Wilmington, NC 28403

Dear Ms. Bisbee:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Hopewood Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$146,245. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition. Based on your project application score, your project ranked 4th out of 11 approved applications.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of providing permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers". The signature is fluid and cursive.

Cecelia Peers
NC 506 Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

Betty Bisbee
Wilmington Housing Finance and Development
3508 Frog Pond Place
Wilmington, NC 28403

Dear Ms. Bisbee:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Driftwood Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$64,150. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project application score your project was ranked 5th out of the 11 projects that were approved.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of providing permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers". The signature is fluid and cursive, with the first name "Cecelia" being more prominent than the last name "Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

Anne Best
Executive Director
Family Promise of the Lower Cape Fear
4938 Oleander Drive
Wilmington, NC 28403

Dear Ms. Best:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the new Families Forward Rapid Re-Housing Project has been approved by the CoC ranking committee at the requested amount of \$16,512. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your new project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project application score your project is ranked 1st out of 11 approved projects.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of creating more permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers". The signature is written in a cursive, flowing style.

Cecelia Peers
NC 506 Continuum of Care Administrator

Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401



NC-506 Continuum of Care

September 8, 2017

Anne Best
Executive Director
Family Promise of the Lower Cape Fear
4938 Oleander Drive
Wilmington, NC 28403

Dear Ms. Best:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Families Forward/Willow Pond Transitional Housing Project Renewal has been approved by the CoC ranking committee at the requested amount of \$70,485. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition. Based on your project application score, your project was ranked 7th out of 11 approved projects.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and the tremendous effort put forth in preparing your renewal submission package.

Sincerely,

A handwritten signature in cursive script that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator

Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401



NC-506 Continuum of Care

September 8, 2017

Broc Bilby
Housing Manager
The Arc of NC
5041 New Centre Dr, Suite 100
Wilmington, NC 28403

Dear Mr. Bilby:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Cottonwood Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$20,020. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project score your project was ranked 10th out of 11 projects approved.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of providing permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in black ink that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

Denver Brown
Executive Director
Cape Fear Housing for Independent Living
1606 Wellington Ave, Suite F
Wilmington, NC 28401

Dear Ms. Brown:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Kathryn Leigh Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$101,876. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition and based on your application score, your project is ranked 9th out of 11 projects approved.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of providing permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in cursive script that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator



NC-506 Continuum of Care

September 8, 2017

Katrina Knight
Executive Director
Good Shepherd Center
811 Martin Street
Wilmington, NC 28401

Dear Ms. Knight:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Ashley Permanent Supportive Housing Renewal Project has been approved by the CoC ranking committee at the requested amount of \$24,367. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition, and based on the project application score, your project was ranked 11th out of the 11 projects submitted.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and to furthering the CoC's goal of providing permanent housing opportunities for the homeless in our community.

Sincerely,

A handwritten signature in cursive script that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator

Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401



NC-506 Continuum of Care

September 8, 2017

Jessica Rasino
Program Director – Adult Residential and Community Treatment Services
Coastal Horizons Center, Inc.
615 Shipyard Boulevard
Wilmington NC 28412

Dear Ms. Rasino:

I am writing on behalf of the Tri-County Homeless Interagency Council, NC 506 Continuum of Care, to inform you that your submission of the Horizons Housing Permanent Supportive Housing Project Renewal has been approved by the CoC ranking committee at the requested amount of \$84,131. In a vote that took place at the Tri-HIC meeting on September 5th, 2017 the ranking committee voted to include your renewal project in the CoC's priority list for the FY17 HUD CoC competition, and based on your project application score your project ranked 8th out of 11 projects approved.

Thank you for your ongoing commitment to ending homelessness in the Cape Fear Region, and the tremendous effort put forth in preparing your renewal submission package.

Sincerely,

A handwritten signature in cursive script that reads "Cecelia Peers".

Cecelia Peers
NC 506 Continuum of Care Administrator

Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401

Cecelia Peers

From: Cecelia Peers
Sent: Tuesday, May 30, 2017 10:23 AM
To: 'Alexis Taylor'; 'Ally Thornton (ally@phoenixhometownhires.org)'; 'Althea Johnson'; 'Amy.Phillips@uss.salvationarmy.org'; 'Anganette Young'; 'Angel Freeman (afreeman@familyendeavors.org)'; 'Anne Best (director@familypromiselcf.org)'; 'Ashanti Gibbs'; 'Barbara Serafin'; 'Beverly Cemino'; 'Brian Fike'; 'Briana Morgan'; 'Bridget Glover (casemgr@familypromiselcf.org)'; 'Charlene Irvin (charlene.irvin@trilliumnc.org)'; 'Charlotte Buckley'; 'Dan Ferrell'; 'De'Corbett'; 'Denver Brown'; 'Domestic Violence Shelter'; 'Don Skinner (dlskinner2027@gmail.com)'; 'Donna Phelps'; 'Ellis Pinder'; 'ethomas@goodshepherdwilmington.org'; 'Frank Roberts'; 'Gary Keyes'; 'Gloria Garton - disAbility Resource Center (gloria.garton@drc-cil.org)'; 'Hannah Martin'; 'hhasst@atmc.net'; 'Howard Delts'; 'Jaumonius Cuffee (J.CuffeeBFA@gmail.com)'; 'Katrina Knight (kknights@goodshepherdwilmington.org)'; 'Lina Casanova (hispadv@atmc.net)'; 'Liz Makley'; 'Liz Sutcliffe'; 'Margaret McBride'; 'Randall (randall@phoenixhometownhires.org)'; 'Jackie Williams'; 'James Marley'; 'James McKinnon'; 'Jason Klein'; 'Jason Mitchell'; 'Jennifer Witkowski'; 'Jeremy Hardy'; 'Jessica Rasino'; 'Jim Everette'; 'Joanne Cain'; 'Joe Byrnes'; 'Jonathan Washburn'; 'Kathryn Winston'; 'Kelly Ollis'; 'Korey Giordano'; 'Lamar Johnson'; 'LaSonia Roberts-Melvin'; 'Lauren Williams'; 'Lee Anna Stoker'; 'Lee Donovan'; 'Leslie Hossfeld'; 'Leslie Smiley'; 'Linda Biddle'; 'Linda Quinonez'; 'Linda Rawley'; 'Mandy Mitchell'; 'Maria Iriarte'; 'Marisa Athey'; 'Marsha Cook'; 'Marshelle Powell'; 'Mary Silvmay'; 'Matt Langley'; 'Michelle Carver'; 'Michelle Gunn'; 'Mike Womble'; 'Molly Daughtry'; 'Nicholas Faherty'; 'Nicole Dozier'; 'Paul D'Angelo (pdangelo@tributecompanies.com)'; 'Randy Evans'; 'Amy Feath'; 'Amy Modlin'; 'Brian Mansfield - GSC (bmansfield@goodshepherdwilmington.org)'; 'Brittany Marshall (brittany.marshall@rhanet.org)'; 'Carolyn Moss (carolyn.moss@nccommerce.com)'; 'colin.bracey@nhrmc.org (colin.bracey@nhrmc.org)'; 'Demetrious Williams (dwilliams@arcnc.org)'; 'Don Vigus (dvigus@fbcwilmington.org)'; 'Elizabeth Owens (admin@familypromiselcf.org)'; 'hatten, marcell'; 'Jenny Griffin'; 'Kathy Newcomb'; 'Lisa Ramos (lisa.ramos@nccommerce.com)'; 'Mark Johnson'; 'Rita Blackmon'; 'Robin Hahaj'; 'Robin Nalls (rnalls@nhcgov.com)'; 'Roger Cook'; 'Roy Tucker'; 'Shannon Smith (Shannon.smith2@va.gov)'; 'Stan Oathout'; 'Stephanie Bowen (stephaniebowen.bfa@gmail.com)'; 'Steve Lambros (diamondfoodenterprises@gmail.com)'; 'Suzanne Rogers'; 'Teri M'; 'Terry Shiver'; 'Tracey Ray'; 'Verna Mansfield'; 'Will Rikard (will@phoenixhometownhires.org)'; 'William Conyers'; 'Yolanda Walker (yolanda.walker@uss.salvationarmy.org)'
Subject: HUD CoC Competition and Release of Revised Scorecard for Comment
Attachments: Scorecard.draft.xlsx

Good Morning Tri-HIC Members,

The CoC (Tri-HIC) is registered for the upcoming HUD CoC Grant Competition and it is expected that the Notice of Funding Availability will be released in the next 2-4 weeks. The CoC is responsible for funding decisions related to the HUD CoC Grant Competition.

Each year, the CoC establishes a Ranking Committee from its members who are not funded by HUD and who have attended at least 50% of the meetings during the last calendar year. This year's ranking committee includes a representative from the following organizations:

Brunswick Family Assistance

Brunswick County Homeless Coalition
disAbility Resource Center
Domestic Violence Shelter and Services
Duke Partners in Caring
MedNorth Health Center
New Hanover County Department of Social Services
New Hanover County Schools
NC Division of Workforce Solutions
SOAR
Salvation Army – Wilmington
Trillium
United Way of the Cape Fear Area
Veterans Administration
City of Wilmington
Hope Harbor

The CoC has engaged with Abt Associates, a HUD-contracted national technical assistance provider, to provide assistance in revising our project scorecard and process for reviewing and ranking our projects. The draft revision of our new and renewal project scorecards is attached and is **open for public comment from Tuesday 5/30 until Friday 6/9**. A ranking committee meeting will be held shortly after the public comment period closes to review comments and suggest any revisions. A final vote on the scorecard will take place after the release of the NOFA to allow for any additional revisions as necessary based on HUD priorities.

Please provide comments in writing to me by e-mail. There will be a brief overview of the scorecards and overview of guidance from Abt Associates at the upcoming Tri-HIC meeting.

Thank you,

Cecelia Peers
Continuum of Care Administrator
Cape Fear Council of Governments
1480 Harbour Drive
Wilmington, NC 28401
Main 910-395-4553 ext. 202
Fax 910-395-2684



*Addressing issues that surround homelessness in Brunswick, New Hanover and Pender Counties
Serving as the Wilmington, Brunswick, New Hanover, and Pender County Continuum of Care*

Trillium Health Resources, 3809 Shipyard Blvd, Sloop Point Conference Room,

Tuesday, August 1 2017 @ 9:00 a.m.

AGENDA

I. Welcome and Introductions

- ❖ **Executive Committee: Chair** – Joanne Cain, **Co-Chair** – Lee Anna Stoker, **Secretary** – Gloria Garton
- ❖ **Council** – Individual introductions

II. New Business:

Presentation – Duke Partners in Caring, Robin Hahaj

CoC Scorecard and Rating/Ranking/Reallocation Plan – Review suggested changes based on NOFA release for final vote

III. Committee Reports:

- a. **SOAR** – *Kathryn Winston/Meg McBride*
- b. **Recuperative Care Program** – *Meg Yeates*
- c. **Cape Fear Housing Coalition** – *Paul D'Angelo*
- d. **NCHMIS** – *Cecelia Peers/Anne Best*
- e. **Continuum of Care Grant Committee** – *Cecelia Peers*
- f. **Emergency Solutions Grant Committee** – *Cecelia Peers*
- g. **Coordinated Entry** – *Yolanda Daniels/Cecelia Peers*
- h. **Veterans Strategy Team** – *Cecelia Peers*
- i. **Veterans Stand Down & Homeless Connect** – *Carolyn Moss*
- j. **Brunswick Homeless Task Force** – *Barbara Serafin/Cecelia Peers*

Special Announcements and Agency Events

▸ Meeting Adjourned ◀

Next Meeting: Tuesday, September 5th 2017 @ 9:00 a.m.

Trillium Screening/Triage/Referral Line 1-877-685-2415

Housing Crisis Hotline (Mon-Fri 9-3) 910-444-4998

Tri-County Homeless Interagency Council



*Addressing issues that surround homelessness in Brunswick, New Hanover and Pender Counties
Serving as the Wilmington, Brunswick, New Hanover, and Pender County Continuum of Care*

Meeting/Sub-Committee Meeting Master Grid

Committee/Sub-Committee	Committee Leadership	Frequency	Meetings Scheduled		Location
			Day	Time	
SOAR Strategy Team	Cecelia Peers Cape Fear COG	Monthly	3rd Monday	11:30 AM	Cape Fear COG 1480 Harbour Drive
Tri-County Homeless Interagency Council (Tri-HIC)	Joanne Cain, Chair	Monthly	1st Tuesday	9:00 AM	Trillium Health Resources 3809 Shipyard Blvd., Sloop Point Conference Room PLEASE ENTER THRU REAR
Emergency Solutions Grant Fiscal Agents (ESG)	Cecelia Peers Cape Fear COG	Monthly	2nd Tuesday	2:00 PM	Cape Fear COG 1480 Harbour Drive
Coordinated Entry	Cecelia Peers Cape Fear COG	Monthly	4th Tuesday	9AM	Salvation Army 820 North 2nd Street
Homeless Veterans Strategy Team	Cecelia Peers Cape Fear COG	Monthly	2nd Wednesday	2:00 PM	UWCFA, 5919 Oleander Drive, Arboretum Bldg. II, Suite 115
Re-Entry Task Force (LINC)	Frankie Roberts	Quarterly	2nd Wednesday	11:00 AM	222 Division Drive
Homeless Recuperative Care Team	Cecelia Peers Cape Fear COG	Monthly	Last Thursday	1:00 PM	UWCFA, 5919 Oleander Drive, Arboretum Bldg. II, Suite 115
Veteran's Stand-down and Homeless Connect	Frank Roberts, Brian Fike, Jason Klein	Monthly	1st Wednesday	9:00 AM	Trillium Health Resources 3809 Shipyard Blvd.
HMIS Agency Administrators	Cecelia Peers, Cape Fear COG	Monthly	1st Friday	10AM	Cape Fear Council of Governments 1480 Harbour Drive
Brunswick Homeless Task Force	Cecelia Peers Cape Fear COG	Monthly	3rd Monday	9AM	Brunswick County Administration Bldg 30 Government Center Drive, Bolivia 2nd Floor Training Room
Continuum of Care Grant (CoC NOFA)	Cecelia Peers, Cape Fear COG	Monthly until NOFA release	1st/3rd Tuesday	10:00 AM	TBD
Pender Interagency Committee	Eunice Bannerman, Pender DSS	Alternating months	2nd Monday	10AM	Pender County DSS 810 S. Walker Street, Burgaw

Funding

HUD Continuum of Care Competition

Through the McKinney Vento Act and it's re-authorization with the HEARTH Act, HUD provides funding for homeless assistance and housing. On July 14th, 2017, HUD released the annual CoC Notice of Funding Availability which begins the Continuum of Care grant competition.

The Tri-HIC is eligible to apply for renewal funding and new projects based on the total amount awarded in the FY16 competition plus an additional permanent housing bonus based on our region's federally determined Pro-Rata Need.

The Tri-HIC Governance Charter designates organizations as eligible to apply for HUD CoC Grants if they have attended at least 75% of Tri-HIC meetings in the most recent calendar year, and 75% of CoC Grant Committee meetings during the last grant competition. New project applications must also show that they are meeting a need in the community.

The FY2017 HUD CoC Grant Competition is **NOW OPEN!**

The Preliminary Pro-Rata Need for Tri-HIC is \$700,907. The **Annual Renewal Demand** (amount of funds allocated in FY16 to all projects) is **\$648,502**, and the amount available for a **Bonus Project** is **\$42,054**.

The **Tier 1** amount is **\$609,592** and the **Tier 2** amount is **\$80,964**.

Please contact the CoC Administrator for more information or to be included in the CoC Competition mailing list.

Resources

To view the scorecards used to evaluate new and renewal applications click Scorecardv3.

To view the Tri-HIC Ranking, Review and Reallocation Policy (approved 8/1/17) click Tri-HIC FY17 Reallocation Plan.

To view the Tri-HIC's 2016 Collaborative Application click FY16 Collaborative app summary.final.



Tri-County Homeless Interagency Council
Governance Charter
For the Wilmington, Brunswick, New Hanover and Pender County Continuum of Care

Article I

Name of Organization, Purpose and Offices

- 1.1 The HUD approved continuum of care, NC-506 covering the geographic areas of the City of Wilmington, Brunswick County, New Hanover County and Pender County shall be the Tri-County Homeless Interagency Council, hereafter referred to as "Tri-HIC."
- 1.2 The mission of the Tri-County Homeless Interagency Council is to assist local governmental jurisdictions, homeless service providers, and community groups in the development of policies, plans, resources, and programs for reducing homelessness and its accompanying conditions. The general membership of the Tri-HIC serves as the CoC's primary decision making group and oversight board of the HUD CoC funding process for Brunswick, New Hanover and Pender Counties.

The Tri-HIC's purview of concerns includes all the elements of an effective housing crisis response system; including but not limited to: outreach, safe haven, emergency shelter, transitional housing, permanent supportive housing, rapid re-housing, supportive services, coordinated entry and assessment, and emergency assistance for homelessness prevention.

The purpose of Tri-HIC is to implement a coordinated, strategic, and evidence-based approach to the issues that surround homelessness and provide solutions for ending homelessness through being at the forefront on advocacy and education, and collaborating with a broad range of resources and organizations in the area.

As the governing board for the CoC's geographic area, the Tri-HIC is responsible for:

- a. Holding meetings of the full Tri-HIC general membership, with published agendas, at least quarterly;
- b. Issuing a public invitation for new members within Wilmington, Brunswick, New Hanover and Pender Counties, at least annually;
- c. Following the written process to select executive committee members, including leading the Tri-HIC in reviewing and updating the executive committee selection process for approval of the Tri-HIC general membership at least once every 5 years;
- d. Establishing an Advisory Board and additional committees, subcommittees, or workgroups;

- e. In consultation with ESG recipients within the region, and with the assistance of the CoC Grant Committee, establishing and consistently following written standards for providing CoC assistance. At minimum, these written standards must include:
 1. Policies and procedures for evaluating eligibility for assistance under the CoC Program (24, CFR Part 578) for individuals and families;
 2. Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;
 3. Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid re-housing assistance and how the process of determining the level of assistance will be managed;
 4. Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and
 5. If the Tri-HIC is designated as a high-performing community, policies and procedures set forth in 24 CFR 576.400 (e) (3) (vi – viii) and (e) (3) (ix);
- f. With the assistance of the CoC Grant Committee and consistent with 24 CFR §578.15(b), designating an eligible applicant to submit an application for grant funds in response to a NOFA published by HUD under 24 CFR §578.19, which will be the designated collaborative applicant;
- g. In consultation with the Collaborative Applicant and Structure Committee, further develop, follow, and update as necessary or at least every 3 years, a governance charter which includes all procedures and policies necessary to comply with CoC program requirements, as prescribed by HUD; and maintain a code of conduct and recusal process for the Governing Board, its chair(s), and any person acting on behalf of the Governing Board;
- h. With the assistance of the HMIS Committee, consult with recipients and sub-recipients of CoC funding to establish performance targets appropriate for population and program type, monitor performance, evaluate outcomes and take action with regard to low performing projects;
- i. In consultation with recipients of ESG program funds within the region, and with the assistance of key stakeholders from crisis support service organizations, operate a coordinated entry and assessment system that uses a standardized screening tool to determine appropriate interventions for housing crises, including shelter and diversion, and a needs assessment to prioritize individuals for the most effective housing intervention based on the level of support they need to return to housing. Develop a specific policy to guide the operation of the coordinated entry and assessment system in complying with any requirements established by the HUD notice, including meeting the needs of households that are fleeing or attempting to flee domestic violence.
- j. In collaboration with the North Carolina Homeless Management Information Systems Governance Committee, and in consultation with the HMIS Committee, design and operate a HMIS (24 CFR §578.7b) which:
 1. Will designate a single HMIS for the Tri-HIC in accordance with recommendation from the NC HMIS GC, which will be known as the HMIS lead;
 2. Designate an eligible applicant that will manage Tri-HIC's HMIS, which will be known as the HMIS system administrator;
 3. Ensure consistent participation of recipients and sub-recipients in the HMIS;
 4. Ensure that HMIS is administered in compliance with HUD requirements;
- k. With the assistance of the Advisory Board, develop a Continuum of Care plan consistent with 24 CFR §578.7©, that includes:
 1. Prevention of homelessness;

- 2. Outreach, engagement and assessment;
 - 3. Shelter, housing and supportive services;
 - l. Planning and conducting an annual Point In Time count of homeless sheltered and unsheltered individuals and families, as per 24 CFR §578.7(c)(2);
 - m. Conducting an annual gaps analysis of the homeless needs and services within the region;
 - n. Providing input and information needed to complete the consolidated plan for every jurisdiction in the region;
 - o. Consulting with Emergency Solutions Grant program recipients on the plan for allocating ESG program funds and reporting on and evaluating the performance of ESG program recipients and sub-recipients.
- 1.3 The Cape Fear Council of Governments is the local government agency that has been designated by the Tri-HIC to provide administrative support to the Tri-HIC.

The known place of business of the Tri-HIC (hereinafter the “principal office”) shall be initially located in Wilmington, NC at the offices of the Tri-HIC Administrative Agency (*refer to Article IX*).

Article II

Membership and Voting

- 2.1 Membership within the Tri-HIC is open to organizations, agencies and individuals that share the vision of service to our communities within the North Carolina Counties of Brunswick, New Hanover and Pender. General Membership is defined as having attended at least one Tri-HIC meeting or Sub-Committee meeting within the current calendar year.
- 2.2 The Tri-HIC membership has the following responsibilities:
- a. Adopt and follow a written process to select a board (the Governing Board) consistent with 24 CFR §578.5 (b), 578.7 (a)(3) and this Charter, and review update and approve the process for selection of the board at least once every 5 years;
 - b. Comply with the conflict of interest requirements in 24 CFR §578.95;
 - c. Act in a spirit of collaboration, problem solving, and with the goal of not duplicating services and meeting unmet needs;
 - d. Abide by the Tri-HIC Governance Charter
- 2.3 There will be two types of membership within the Tri-HIC, individual and organizational membership:

Individual members will represent themselves and not any particular organization. Individual members not associated with an agency may be voting members of the Tri-HIC, as long as they meet the attendance and responsibility requirements as outlined in the Governance Charter.

Organizational membership is open to any organization within the Tri-HIC service area (see Section 2.1). Each member organization shall have one vote to cast in any matters that require a vote, except in any matter in which they have a financial interest, and having met the attendance and responsibility requirements as outlined in the Governance Charter.

To be a member of the Governing Board and receive voting rights, services and other benefits through the Tri-HIC, a member - organization/agency, or individual, must be a resident of the tri-county area, or an agency must operate within the tri-county area, and must attend 50% of scheduled meetings within the previous calendar year. Attendance at any local level homeless coalition meeting may be used to satisfy attendance requirement. Any organization or agency will only be allowed one vote on any voting matter.

The Tri-HIC is committed to ensuring that it's members are representative of the diverse geographic area and community composition of the Tri-HIC.

- 2.4 Each voting member serving on a committee shall have one vote in meetings of that committee.

Committees may develop their own procedures that permit absentee, proxy, telephone or e-mail votes to effectively conduct their work.

- 2.5 Quorum

Fifty-one (51%) percent of any Governing Board, full Tri-HIC general membership, or committee members entitled to vote must be present at the meeting to constitute a quorum. If less than a quorum is present, a meeting may be conducted by no votes on action items or other motions can be taken.

- 2.6 Simple Majority

A simple majority of votes cast shall carry the motion in the meetings of the Governing Board, full Tri-HIC general membership, and committees, except as otherwise provided in this Governance Charter.

- 2.7 Open Meetings

Governing Board and full Tri-HIC general membership meetings shall be open to the public, except as otherwise provided for in this Governance Charter.

Article III

Officers

- 3.1 Each October the Tri-HIC shall elect from its number a chairperson, vice-chairperson, and secretary. The 10 Year Plan to End Chronic Homelessness Strategic Director shall be an appointed officer of the Tri-HIC for the duration of the plan, unless otherwise specified by the Tri-HIC members. All officers shall serve at the pleasure of the entire committee for a term of two years, beginning the January following their election. The Tri-HIC members may create such other offices as it may determine and appoint officers to fill such offices; fill vacancies in any office; delegate to one or more officers any of the duties of any officer or officers; and prescribe the duties of any officer.
- 3.2 The Executive Committee, consisting of the Chairperson, Vice-Chairperson, Secretary and Ten Year Plan Strategic Director, when the Tri-HIC is not in session, shall have and may exercise all the powers of the Tri-HIC with reference to the conduct of the business of the Tri-HIC.

- 3.3 The Chairperson of the Executive Committee shall be the chief executive officer of the Tri-HIC and shall have responsibility for the general direction of the affairs of the Tri-HIC, except as otherwise prescribed by the board. S/he shall preside as chairperson at all meetings of the Tri-HIC.
- 3.4 The Vice Chairperson will be responsible for meeting room preparation and in the absence of the chairperson, shall preside over meetings of the Tri-HIC.
- 3.5 The Secretary shall be responsible for taking the minutes of the Tri-HIC meetings and e-mailing them to the Tri-HIC CoC Administrator for distribution.
- 3.6 The Executive Committee shall be the officers of the Tri-HIC.

Article IV

Fiscal Year

- 4.1 The fiscal year of the Tri-County Homeless Interagency Council shall be January 1st through December 31st.

Article V

Meetings

- 5.1 The Tri-HIC shall hold a regular meeting at least 11 times each year at such time and place as the officers may prescribe.
- 5.2 Special meetings of the Tri-HIC may be called by the Chairperson or, in his/her absence or incapacity, by the Vice-Chairperson. The Secretary shall provide notification to members of the Tri-HIC of special meetings of the Tri-HIC when requested in writing to do so by any three members thereof, or when ordered to do so by the Executive Committee. Members shall be provided with a minimum of forty-eight hours notice of a special meeting.
- 5.4 Regular meetings of the Executive Committee may be held without call or notice at such times and places as the Board of Directors from time to time may fix. Other meetings of the Executive Committee may be called by any member thereof either by oral, electronic, or written notices not later than the day prior to the date set for such a meeting.
- 5.5 At any meeting of the Executive Committee two members shall constitute a quorum.
- 5.6 The secretary shall record the minutes of the meetings of the Tri-HIC and cause them to be recorded and kept in possession of the Cape Fear Council of Governments for that purpose. These minutes shall be presented to the Tri-HIC at their next regularly scheduled meeting.

Article VI

Parliamentary Authority

- 6.1 The rules contained in the current edition of Robert's Rules of Order Newly Revised shall govern the procedures of the Tri-HIC where applicable and in which they are not inconsistent with these by laws or any special rules or procedures of the Tri-HIC.

Article VII

Amendments

- 7.1 These by-laws may be altered or amended by the Tri-HIC at any regular meeting by a simple majority vote provided the changes have been reviewed and explained at a previous meeting.

Article VIII

Committees

- 8.1 The Tri-HIC will establish committees to address specific needs of the organization as needed. Standing Committees will include:

Veterans Stand Down and Homeless Connect Steering Committee

Meets monthly from November to June to plan and implement an annual Veterans Stand Down and Homeless Connect in the Wilmington area. The Committee will select a date, obtain a suitable location, raise the necessary funds, obtain the services of needed participants, and make all required arrangements for a successful stand down.

Continuum of Care Grant Committee

Meets at least twice monthly once the HUD NOFA is released until submission, and as needed throughout the remainder of the year. All applicants for the HUD Homeless Continuum of Care grant must have attended 80% of the CoC grant committee meetings and at least 75% of Tri-HIC meetings during the previous calendar year to qualify to submit an application with the Continuum of Care. This committee contributes to the HUD Homeless Continuum of Care Collaborative Application, prepared by the CoC Administrator, and prepares Project Applications for renewal grants and new grants as funding is available each year.

Homeless Management Information System Agency Administrators

Meets as needed. The chairperson of this committee shall be the NC HMIS Local System Administrator. This committee is responsible for monitoring the CoC's HMIS data quality, HUD Data Standards, other HMIS system requirements and changes, and review all requests for release of regional data. All applicants for the HUD Homeless Continuum of Care grant must participate in at least 75% of all HMIS committee meetings held in the previous calendar year.

Coordinated Entry Committee

Meets at least 10 times per year and more as needed. The committee is responsible for reviewing the activity related to the Housing Crisis Hotline, prioritization of homeless people for CoC and ESG funded housing options, and barriers to system entry and placement into housing. CoC and ESG grantees must participate in at least 75% of all Coordinated Entry committee meetings held during the previous calendar year.

Continuum of Care Advisory Board

Meets quarterly. The Board includes all previous members of the 10 Year Plan Executive Board and includes representative from the following agencies or groups: Local Governments, College and University System, School System, Hospitals and Medical Centers, Law Enforcement, Housing Coalition, Tri-HIC Chairperson, LME-MCO, up to 2 Homeless Service Agency Directors, Local Bank, United Way, Local Business Owner, Housing Authorities, Veterans Organization, Center for Independent Living, Local Community Member-at-Large. The committee may invite additional members from groups not already represented or ad-hoc advisors as needed. The committee is responsible for overseeing the regional community response to homelessness including understanding and communicating Tri-HIC strategic plans and initiatives with the greater community, providing community feedback to assist in developing homeless service strategies, identifying funding and collaboration opportunities for Tri-HIC initiatives, and areas where the response to homelessness and other service systems require greater coordination.

Ranking Committee

The ranking committee shall be responsible for the ranking of all HUD CoC Project Applications and to advise the Tri-HIC of any recommended changes to the Ranking Form as they relate to Tri-HIC goals and funding priorities, HUD identified special populations, or alignment with federal guidelines and best practices. The committee shall consist of all Tri-HIC members who have attended at least 50% of meetings during the last fiscal year and who do not represent an agency applying for funds. Members must decline if they have a conflict of interest. The ranking committee will follow HUD guidelines for ranking as issued in the HUD CoC NOFA annually. The ranking committee shall use the ranking form approved by the Tri-HIC to rank HUD CoC Project Applications in order of funding priority. The Ranking Committee shall request from Project Applicants any HUD and Tri-HIC approved documents including, but not limited to: Tri-HIC attendance records, HMIS Data Quality Reports, APR Reports, Project Renewal Applications, and project leveraging documents.

Structure Committee

The Structure Committee will meet on an as-needed basis to oversee the by-laws and relevant rules of the Tri-HIC.

Other committees or workgroups may be established as needed.

Article IX

Administration

- 9.1 The Tri-HIC shall have an administrative staff, operating at an agency voted on by the membership, who shall fulfill the following responsibilities:

Serve as the Tri-HIC local HMIS System Administrator, providing technical assistance to all HMIS participating agencies within the CoC and outreach to all agencies whose mission aligns with that of the Tri-HIC and whose participation would add value to our local data collection and reporting.

Ensure that Tri-HIC HMIS participating agencies are following all policies and procedures as issued by the NCHMIS Governance Committee, including facilitation of any meetings related to data quality and reporting.

Serve as the Tri-HICs primary representative to the NCHMIS Governance Committee and ensure that our CoC adheres to participation requirements as outlined in the GC by-laws.

Act as the Continuum of Care Grant Collaborative Applicant and coordinate all CoC Grant Committee activities necessary to support the continuation of HUD funded programs and application for any additional CoC Grant funded activities approved by vote of the Tri-HIC ranking committee.

Coordinate the annual Point In Time Count and Housing Inventory Chart and submit data to HUD via the HUD Data Exchange System (HDX).

Act as Fiscal Agent for the continuum's Emergency Solutions Grant; coordinating all fiscal agent meetings and preparing the annual grant renewal application as per ESG guidelines.

Provide the necessary support to ensure the ongoing functioning of the Tri-HIC and all active sub-committees and maintaining CoC compliance with all applicable HUD rules and regulations.

- 9.2 The Executive Committee will coordinate with the administrative agency for recruitment and hiring, and supervision of the CoC Administrator. The Executive Committee shall provide regular feedback and direction to the CoC Administrator to ensure that the duties assigned by the Tri- HIC are being fulfilled.

Article X

Conflicts of Interest

- 10.1 All voting members of the Tri-HIC must act in accordance with the conflicts of interest requirements as described in 24 CFR §578.95 (b), namely that no voting member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents. Members shall review

the Tri-HIC's conflict of interest policy before invoking their voting privileges. Officers of the Tri-HIC will review the conflict of interest policy before or at the time of taking their seat.

10.2 Recusal Process

Recusal is the process by which a person disqualifies himself or herself from a matter because of prejudice or a conflict of interest.

Officers, voting members, or anyone acting on behalf of the Tri-HIC (including committee members) must recuse themselves from participating in or influencing discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents, and must recuse themselves in matters as otherwise applicable under 24 CFR §578.95.

Article XI

Dissolution

- 11.1 Dissolution of the Tri-HIC requires a 75% majority vote of all members. Dissolution of the Tri-HIC will not constitute a dissolution of any contracts or grants associated with the Continuum of Care and held by either the Administrative Agency or other members. Upon dissolution of the Tri-HIC, the administrative agency shall be responsible for ensuring that all contracts for which the administrative agency is lead applicant, fiscal agent, or collaborative applicant are fulfilled through the remaining contract period. The administrative agency shall ensure that all Tri-HIC assets shall be distributed for one or more exempt purposes within the meaning of sections 501 (c)(3) of the Internal Revenue Code, it shall be distributed to the Federal Government, or to a state or local government, for a public purpose. Any such asset not so disposed of shall be disposed by the Court of Common Pleas of the county in which the principle office of the corporation is then located, exclusively for such purposes or to such organization or organization, as said court shall determine, which are organized and operated exclusively for such purposes.



Tri-County Homeless Interagency Council Written Standards for CoC and ESG Programs

The mission of the Tri County Homeless Interagency Council (NC-506) is to assist local governmental jurisdictions, homeless service providers, and community groups in the development of policies, plans, resources, and programs for reducing homelessness and its accompanying conditions.

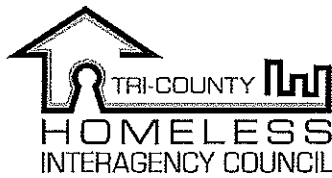
We are committed to creating the systemic and attitudinal changes necessary to prevent and end homelessness. At the same time, we work to meet the immediate needs of people who are currently experiencing homelessness or who are at risk of being homeless.

In March 2015, to better align our Continuum of Care with the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, members of Tri-HIC voted unanimously to approve the Cape Fear Council of Governments to provide CoC Administration and serve as the Lead Agent and Collaborative Applicant for the ESG and HUD CoC grants. With the release of the ESG Interim Rule, the CoC has adopted the following standards to ensure: a fair and transparent process in vetting projects for funding, efficient and effective delivery of crisis services, and reduction in the number of individuals that enter the shelter system, and reduction in the amount of time that households spend in crisis services before placement into housing.

Emergency Shelter

Shelters funded through federal or state funds and operating within the CoC are expected to work toward the federal goal of helping individuals and families resolve their housing crisis with 30 days. Shelters and transitional housing providers receiving ESG funds are required to participate in the coordinated entry process. Our CoC's crisis response system is designed to:

- **Divert** those who are at-risk of becoming homeless by assessing their needs and referring them to appropriate resources necessary to maintain their housing.
- **Streamline** the referral process for those who are literally homeless, providing a no-wrong door approach to screening for the most appropriate and immediately available shelter or transitional housing program.
- **Prioritize** those referred from the coordinated entry Housing Crisis Hotline to shelter beds.
- **Connect** homeless individuals and families to mainstream resources and services as soon as possible, by providing case management within 5 days of arrival to the shelter. This includes quickly assessing needs, developing a housing plan, and identification of barriers to housing.
- **House** individuals and families in the shortest time possible, striving for 30 days from the date of entry into the shelter. Shelters employ the housing first model in working towards housing placement and place client choice at the forefront when determining housing placement.



Tri-County Homeless Interagency Council
Written Standards for CoC and ESG Programs

Equal Access

ESG funded shelters are expected to follow the Equal Access Rule which is described in HUD FAQ 1529:

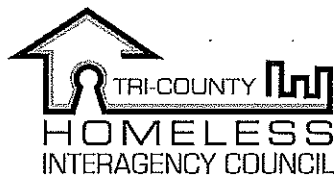
Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, the following:

1. A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or,
2. A group of persons residing together, and such group includes, but is not limited to:
 - a. A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family);
 - b. An elderly family;
 - c. A near-elderly family;
 - d. A disabled family;
 - e. A displaced family; and,
 - f. The remaining member of a tenant family.

In general, this definition of “family” applies to both the ESG and CoC Program rules. However, the McKinney-Vento Act, as amended by the HEARTH Act, distinguishes individuals from families. Therefore, paragraph (1) of the definition of family under the Equal Access Rule is considered an individual under the CoC and ESG programs and the definition of family for these programs is defined as follows:

Family includes, but is not limited to, regardless of marital status, actual or perceived sexual orientation, or gender identity, any group of persons presenting for assistance together with or without children and irrespective of age, relationship, or whether or not a member of the household has a disability. A child who is temporarily away from the home because of placement in foster care is considered a member of the family.

What this means is that any group of people that present together for assistance and identify themselves as a family, regardless of age or relationship or other factors, are considered to be a family and must be served together as such. Further, a recipient or subrecipient receiving funds under the ESG or CoC Programs cannot discriminate against a group of people presenting as a family based on the composition of the family (e.g., adults and children or just adults), the age of any member’s family, the disability status of any members of the family, marital status, actual or perceived sexual orientation, or gender identity.



Tri-County Homeless Interagency Council Written Standards for CoC and ESG Programs

Rapid Re-Housing

There are 2 agencies providing Rapid Re-Housing assistance within our region, The Salvation Army and Good Shepherd Center. The Salvation Army provides RRH assistance solely to their shelter clients and Good Shepherd Center provides assistance to the entire region.

With a broad range of needs in our homeless population and lack of turnover in the available permanent supportive housing programs in our region, RRH has become an integral intervention in our efforts to ensure that shelter stays are brief and non-recurring. Our RRH providers engage in the following activities to ensure that RRH funds are effectively utilized: identification of housing that is safe, adequate and will continue to be affordable to the households being served beyond the availability of financial assistance; provision of sufficient financial assistance to ensure placement to permanent housing; continuation of case management for households to ensure that their needs are met and that they are attain the most immediate financial independence possible while maintaining housing stability.

Prioritization of clients to receive rapid re-housing financial assistance:

- Both providers use available rapid re-housing funds to assist those eligible households who are literally homeless, living in shelter or a place not meant for human habitation and can not be diverted through another resource to immediate housing.
- The Salvation Army provides RRH funds to their shelter clients according to the following guidelines:
 - Families are prioritized for RRH, followed by veterans.
 - All other individuals not falling into those categories are assisted on a first come, first serve basis, according to whether they have income.
- Good Shepherd Center qualifies individuals and families for RRH assistance on a first come first serve, regardless of income. They use a housing first approach to eligibility.

Determination of the percentage or amount of rent and utility costs each program participant must pay while receiving rapid re-housing financial assistance:

- The Salvation Army will provide initial move-in costs at 100% unless another agency/program is available to assist (Veterans Administration, Section 8 etc.). After the first two months, clients are expected to pay 100%.
- Good Shepherd Center attempts to provide the least amount of assistance necessary for the most limited period of time with the goal of providing enough support for the recipients to maintain housing on their own. Good Shepherd does not have a standard amount required for participants to pay because of the expectation that each client's needs will be different and flexibility with the intervention is the key to supporting people where they are at in their housing stabilization.

Determination of the length of rental assistance through rapid re-housing programs:

- Both RRH provider agencies comply with the ESG restrictions of up to 24 months of assistance.



Tri-County Homeless Interagency Council
Written Standards for CoC and ESG Programs

- The Salvation Army will provide two months of financial assistance at 100%. If additional months are needed, funding may be awarded to a recipients for up to 6 months based on an assessment of need each subsequent month.
- Good Shepherd Center encourages flexibility on the number of months assistance is provided, based on the goal of assisting for the shortest time necessary while ensuring maintenance of the housing placement. The goal of the program is to serve the largest number of households while supporting housing retention for those enrolled in the program. A minimum of monthly assessment of a household's stability is used to determine the duration of funding.

Prevention

Prevention is a key component of our Coordinated Entry system. We have implemented a Housing Crisis Hotline, which responds to callers who are within two weeks of losing their housing as well as those who are literally homeless. The coordinated entry screening assessment includes a series of diversion questions with corresponding community resources available to assist in supporting callers in maintaining their current housing or seeking alternate housing arrangements. When an individual or family has another safe option to go, rather than entering shelter the coordinated entry staff will make prevention referrals rather than shelter referrals.

Prioritization of financial assistance and services:

While no agency is seeking funding through ESG for prevention services, The Salvation Army is the primary provider of prevention funding for our region. TSA receives approximately \$49,000 through grants from United Way of the Cape Fear Area, Emergency Food and Shelter Program, and private donations.

- TSA prioritizes referrals from coordinated entry to receive prevention funds. Proof of need is required for eligibility. Multiple referrals from CE are handled on a first come first served basis.
- Additionally mainstream resources, such as LIEAP funds and faith-based emergency assistance funds are accessed and are sometimes utilized in conjunction with TSA assistance to meet multiple needs. Other prevention providers have been informed about the coordinated entry process and agree to accept referrals through the housing crisis hotline when funds are available.

Determination of percentage/amount of rent and utility costs each program participant must pay:

- The amount of assistance that can be provided depends on the funding source used to assist: either \$150 or one full month of assistance can be provided to a household every 12 months.
- Most faith-based prevention providers have a set amount that they will provide a household and thus the household is expected to make up the difference in the amount needed to avoid loss of utilities/housing, either through their own resources or by combining multiple sources of assistance.

Determination of the length of prevention assistance:



Tri-County Homeless Interagency Council
Written Standards for CoC and ESG Programs

- Those receiving assistance through The Salvation Army can only receive funds once every 12 months.
- Most mainstream sources of prevention offer assistance every 12 months, although some assist twice per year when the household can show proof of need.



Tri-County Homeless Interagency Council Written Standards for CoC and ESG Programs

Ensuring Access to Educational Services

The CoC is dedicated to ensuring that all homeless children are provided the resources necessary to stabilize their housing, support their growth and development, and minimize the trauma of homelessness as much as possible. This is accomplished through immediate assessment of children's needs and connection to all early intervention and educational supports possible and assisting guardians in advocating for their rights under the McKinney Vento program. Because this is such an integral part of supporting homeless families, the McKinney Vento liaisons from each county are encouraged to participate in the CoC and on the Advisory Board.

Providers receiving federal funding through the CoC and ESG programs for shelter, transitional housing and permanent supportive housing for families are required to follow these practices in order to meet the developmental needs of homeless children and youth:

School Enrollment

- Providers will ensure adherence to NC State Statute Article 26, Attendance, Part 1 §115C-378(a) *Every parent, guardian or custodian in this State having charge or control of a child between the ages of seven and 16 years shall cause the child to attend school continuously for a period equal to the time which the public school to which the child is assigned shall be in session. Every parent, guardian, or custodian in this State having charge or control of a child under age seven who is enrolled in a public school in grades kindergarten through two shall also cause the child to attend school continuously for a period equal to the time which the public school to which the child is assigned shall be in session unless the child has withdrawn from school.*
- Program staff must provide the parent/guardian with information on:
The district school that is the appropriate for the age/grade level of the child.

The rights under the McKinney Vento legislation to remain at the school of origin, if feasible; and to be enrolled regardless of availability of previous school records, health records, birth certificates, or proof of residency.

The contact information for the school social worker and the county McKinney Vento Liaison.

- Parents/Guardians choosing to home school children must provide program staff with grade appropriate curriculum or web-based programming being used to support an adequate home-school program and proof of ongoing progress in mastering grade-level material, either via progress reports and/or testing results.
- Programs are strongly encouraged to provide transportation whenever possible to facilitate the family's engagement in school-based services.



Tri-County Homeless Interagency Council
Written Standards for CoC and ESG Programs

Attendance and Success

- Attendance is critical in realizing success in school. Providers will ensure adherence to NC State Statute Article 26, Attendance, Part 1 §115C-378(b): *No person shall encourage, entice or counsel any child of compulsory school age to be unlawfully absent from school.*
- The parent, guardian, or custodian of a child shall notify the school of the reason for each known absence of the child, in accordance with local school board policy
- Program staff are required to ensure that parents are following school policies regarding excused absences and medical documentation to return to school after illness/injury.
- Programs are encouraged to develop partnerships with community partners to offer educational support on-site, such as tutoring, reading programs, and access to supplemental learning material.

Early Childhood Development

- Programs are required to inform families of all available options for child care and developmental support, including evaluation when a delay is suspected.
- Programs are encouraged to assist families in enrolling children in health care coverage and accessing annual wellness evaluations to support understanding of age-appropriate developmental milestones and choice in immunizations.

Training and Professional Development

- At least once CoC meeting per year will focus on information and materials related to educational and developmental support for children and youth. Attendance at this meeting is required for at least one staff from each program that serves families with children.
- Program staff are encouraged to attend all HUD, McKinney Vento, or CoC sponsored training on access to education and supporting childhood development.



Tri-County Homeless Interagency Council
Written Standards for CoC and ESG Programs

Resources

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

National Association for the Education of Homeless Children and Youth
www.naehcy.org

National Center for the Homeless Education
www.serve.org/nche

North Carolina Homeless Education Program
center.serve.org/hepnc

National Network for Youth
www.NN4Youth.org

NC Department of Education
www.ncpublicschools.org

National Coalition for the Homeless
www.nationalhomeless.org

Wilmington Housing Authority - Admin. Plan

Chapter 4

ESTABLISHING PREFERENCES AND MAINTAINING THE WAITING LIST [24 CFR Part 5, Subpart D; 982.54(d)(1); 982.204, 982.205, 982.206]

A. WAITING LIST

Except for Special Admissions, applicants will be selected from the WHA waiting list in accordance with policies and preferences defined in this Administrative Plan.

The WHA will maintain information that permits proper selection from the waiting list.

Per HUD regulations, the waiting list contains the following information for each applicant listed:

- Applicant Name
- Family Unit Size (number of bedrooms family qualifies for under WHA subsidy standards)
- Date and time of application
- Qualification for any local preference or HUD targeted funding
- Racial or ethnic designation of the head of household
- Income for targeted program qualifications

The waiting list will be maintained in accordance with the following guidelines:

- The application will become part of the case file.
- All applicants must meet "Very Low Income" eligibility requirements as established by HUD. Exceptions to these requirements, other than those outlined in this document must have been approved previously by the HUD Field Office.

Special Admissions

Applicants who are admitted under Special Admissions, rather than from the waiting list, are identified by codes in the automated system and are not maintained on separate lists.

B. WAITING LIST PREFERENCES

The WHA will use the lottery order in order to determine placement on the Waiting List. The WHA will use the following local preference system for displaced families as a result of government action. All applicants will be treated as equal status for the processing of preferences due to being displaced through government action, for example as a result of demolition and disposition of a Public Housing development by the WHA.

permission of the person with a disability.

WHA will not deny admission to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for admission.

If an application is denied due to failure to attend the full application interview, the applicant will be notified in writing and offered an opportunity to request an informal review.

Applicants and all adult members will be required to sign specific verification forms for information as well as the HUD form 9886 and may be asked to provide additional information or documents as needed. Failure to do so within the given timeframe will be cause for denial of the application for assistance.

After the verification process is completed, the WHA will make a final determination of eligibility. If the family is determined to be eligible, the WHA will notify the applicant of their eligibility and issue a voucher at a scheduled program orientation.

Pender County Housing - Admin. Plan

SCREENING AND REFERRAL PROCESS FOR EMERGENCY ASSISTANCE – Domestic Violence

PCHD will accept referrals from Safe Haven of Pender, a shelter and counseling center for Domestic Violence victims. Families must participate in Case Management with Safe Haven. They must be actively working on stability for their families, including finding stable employment. Families must be in good standing with Safe Haven, including case management requirements.

Families must also be in good standing with Federal, State and local housing programs (including PCHD) to be eligible. Generally families who are domestic violence victims receive special consideration from Housing Agencies provided the Housing Agency is made aware of the situation. Therefore, families who flee domestic violence while receiving rental assistance from another housing agency are expected to be in good standing or be able to resolve outstanding issues with the other Agency within a reasonable period of time.

The term “reasonable” means the shortest amount of time considering the circumstances that led to the non-compliance. Families who leave other Housing Programs and are not good standing due to circumstances other than domestic violence may not be eligible for placement in this program.

SCREENING AND REFERRAL PROCESS FOR EMERGENCY ASSISTANCE – Homeless Veterans

PCHD will accept referrals from Continuum of Care partners for eligible homeless veterans who are working with case management to obtain benefits and stabilize their situation. Families must participate in Case Management and must be compliant with case management plans as outlined by the referring agency. Families must also be in good standing with Federal, State and local housing programs (including PCHD) to be eligible.

APPLYING FOR ADMISSION

These are referral only programs. At this time, there is no expectation that PCHD waiting list will be established. The nature of the programs are emergency housing programs, therefore a waiting list is not considered reasonable. Referring agencies may choose to establish a waiting list for their own purposes.

PCHD will be in contact with the referring agencies regularly to ensure they are aware of availability of space within the program and progress of applicants who have been referred. Families referred to PCHD are, hereafter, called applicants.

SELECTION PROCESS

Applicants will be referred by the appropriate partner Agency in accordance with established referral criteria to ensure that the family is eligible under the guidelines for the emergency housing program. PCHD will work with referred families to establish eligibility.

ADMISSION PROCESSING

The order of admission is based on date PCHD receives the referral. Placement is subject both to verification of applicant eligibility, completion of necessary documentation (including a release allowing the partners to share information) and availability of a voucher.

TENANT SCREENING

PCHD's procedures for tenant screening emergency housing referrals are no different than procedures for screening regular HCV program applicants. The procedures are outlined in other chapters of this Administrative Plan.

VOUCHER ISSUANCE, LEASING, ELIGIBILITY AND CONTINUING PARTICIPATION

All other procedures and requirements of the HCV program, as stated in other Chapters of this Administrative Plan, apply to these emergency housing programs unless specific exceptions are cited in this Chapter.

TIME LIMITED PARTICIPATION – Domestic Violence

Emergency assistance provided to DV Families will not be considered to be permanent assisted housing. Rather, families are required to sign an agreement acknowledging the time limit associated with the program. Participation is limited to a maximum of five years. Families are expected to participate in case management in order to reach goals that will help them become independent of the system within the time provided.

CASE MANAGEMENT REQUIREMENT – Domestic Violence and Homeless Veterans

One of the keys to success in both programs is effective case management. Participants are required to participate in and comply with case management for so long as case management is deemed necessary by the referring agency. The goal of this collaborative program is to help families be successful long term. Families must sign an acknowledgement that they understand the importance of complying with case management requirements.

Families who fail to comply with case management requirements may not be eligible for continue participation in the housing assistance program. Because these are programs based on partnerships and collaboration, case managers will have to ability to recommend termination of participation. However, termination of participation of families in the housing program that are not in compliance with case management requirements will be handled on a case-by-case basis to ensure that families do not lose assistance for minor issues that are easily remedied or that issues related to disabilities do not become permanent barriers to housing.

MEMORANDUM OF UNDERSTANDING – SAFE HAVEN OF PENDER

Safe Haven of Pender is the designated partner for the emergency Domestic Violence Voucher program. And Memorandum of Understand (MOU) has been created and will be signed by all parties upon approval of this Administrative Plan. The terms of the MOU are incorporated by reference and will be included in an exhibit to this Plan.

CONTINUUM OF CARE PARTNERSHIP – HOMELESS VETERANS

The Cape Fear Region has an established partnership of service agencies including the Veteran's Administration (VA), Family Endeavors (SSVF Family Services Contractor), Good Shepherd Center, Trillium Healthcare (a Managed Care Organization) who act as partners to house and support homeless veterans. We are making five vouchers available to the Continuum of Care Partnership to be used for eligible veterans who are not able to access VASH Program Vouchers. VASH is a partnership program between HUD and the VA to provide support housing assistance for disabled, homeless/near homeless veterans.

For each veterans placed in our program, will obtain consent from the veteran to work with his/her Case Management Partner for as long as case management is deemed necessary by the partnering agency. The agencies continue to monitor homeless veterans for several years after placement. We feel this partnership offers homeless veterans the highest chance of long term success.

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NC 506

**Memorandum of Understanding
North Carolina Statewide HMIS
North Carolina Continua of Care and the Michigan Coalition Against Homelessness
July 1, 2017 – June 30, 2018**

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

Continuum of Care (CoC): NC-506 Tri-County Homeless Interagency Council agrees to adopt the North Carolina Statewide shared HMIS platform vendor, Mediware Information Systems, Inc. ("Mediware"), using ServicePoint software. The CoC agrees that administration of the shared platform will be provided by the North Carolina HMIS Project, operated by the Michigan Coalition Against Homelessness. The CoC further agrees to operate the local CoC Implementation in compliance with HUD Data Standards and the North Carolina Statewide Operating Policies and Procedures.

Roles and Responsibilities:

Michigan Coalition Against Homelessness:

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

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

North Carolina Continua of Care:

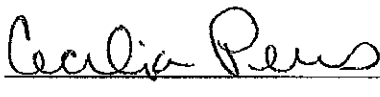
- 1. Designate HMIS system.
- 2. Designate CoC members and CoC alternates to NC HMIS Governance Committee.
- 3. Ensure consistent participation of recipients and sub recipients in the HMIS.
- 4. Uphold Cost-sharing agreement set by Governance Committee, including no/late-payment consequences.
- 5. Plan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

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

The parties hereto have caused this Memorandum of Understanding to be executed by their duly authorized representatives and signed under seal effective as of the date first written above.

Signed:  Date: 8/14/17

HMIS Lead Agency: MCAH Title: Exec. Director

Signed:  Date: 8/9/17

CoC Representative: Cecelia Peers

Title: Continuum of Care Administrator

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for NC-506 - Wilmington/Brunswick, New Hanover, Pender Counties CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more “metrics” used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and “save” before closing.

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	1090	1087	1056	51	51	42	-9	24	24	23	-1
1.2 Persons in ES, SH, and TH	1233	1230	1195	72	72	68	-4	32	32	30	-2

b.

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

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	1063	-	113		-	36	
1.2 Persons in ES, SH, and TH	-	1202	-	141		-	46	

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	33	18	3	1	6%	1	0	0%	0	2	11%	3	17%
Exit was from ES	273	292	32	65	22%	19	22	8%	6	11	4%	98	34%
Exit was from TH	22	45	0	2	4%	0	4	9%	0	2	4%	8	18%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	10	70	0	7	10%	0	2	3%	0	0	0%	9	13%
TOTAL Returns to Homelessness	338	425	35	75	18%	20	28	7%	6	15	4%	118	28%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2016 - Performance Measurement Module (Sys PM)

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

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	390	389	-1
Emergency Shelter Total	198	173	-25
Safe Haven Total	0	0	0
Transitional Housing Total	71	88	17
Total Sheltered Count	269	261	-8
Unsheltered Count	121	128	7

Metric 3.2 – Change in Annual Counts

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	1249	1278	1220	-58
Emergency Shelter Total	1163	1134	1077	-57
Safe Haven Total	0	0	0	0
Transitional Housing Total	119	197	175	-22

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	64	73	52	-21
Number of adults with increased earned income	4	2	6	4
Percentage of adults who increased earned income	6%	3%	12%	9%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	64	73	52	-21
Number of adults with increased non-employment cash income	17	14	9	-5
Percentage of adults who increased non-employment cash income	27%	19%	17%	-2%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	64	73	52	-21
Number of adults with increased total income	19	15	13	-2
Percentage of adults who increased total income	30%	21%	25%	4%

FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	46	40	-6
Number of adults who exited with increased earned income	11	12	10	-2
Percentage of adults who increased earned income	26%	26%	25%	-1%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	46	40	-6
Number of adults who exited with increased non-employment cash income	16	17	12	-5
Percentage of adults who increased non-employment cash income	37%	37%	30%	-7%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	43	46	40	-6
Number of adults who exited with increased total income	24	26	21	-5
Percentage of adults who increased total income	56%	57%	53%	-4%

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1173	1185	1118	-67
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	266	270	173	-97
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	907	915	945	30

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1270	1282	1191	-91
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	287	291	194	-97
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	983	991	997	6

FY2016 - Performance Measurement Module (Sys PM)

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

This Measure is not applicable to CoCs in the FY2016 Resubmission reporting period.

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

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	49	61	0	-61
Of persons above, those who exited to temporary & some institutional destinations	1	5	0	-5
Of the persons above, those who exited to permanent housing destinations	16	17	0	-17
% Successful exits	35%	36%		

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

FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	1047	1097	1025	-72
Of the persons above, those who exited to permanent housing destinations	305	328	374	46
% Successful exits	29%	30%	36%	6%

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	89	90	91	1
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	84	84	87	3
% Successful exits/retention	94%	93%	96%	3%

FY2016 - SysPM Data Quality

NC-506 - Wilmington/Brunswick, New Hanover, Pender Counties CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	260	254	271	229	90	122	122	91	171	182	149	162		21	2	12				
2. Number of HMIS Beds	202	193	234	202	36	36	36	36	81	86	84	86		21	2	12				
3. HMIS Participation Rate from HIC (%)	77.69	75.98	86.35	88.21	40.00	29.51	29.51	39.56	47.37	47.25	56.38	53.09		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1168	1176	1130	1077	70	124	200	175	91	105	98	96	36	138	201	251	23	20	65	0
5. Total Leavers (HMIS)	1054	1009	1017	972	36	66	131	96	18	24	17	24	7	100	83	121	18	16	65	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	598	279	298	191	10	2	0	0	7	3	0	0	0	11	0	2	11	10	36	0
7. Destination Error Rate (%)	56.74	27.65	29.30	19.65	27.78	3.03	0.00	0.00	38.89	12.50	0.00	0.00	0.00	11.00	0.00	1.65	61.11	62.50	55.38	