

System Level Procedures

Virginia BoS CoC (VA-521)

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Governance

The Balance of State CoC has a charter that is updated on an annual basis that outlines the governance structure. This structure includes the collaborative applicant (DHCD), steering committee (governing board), four standing sub-committees (HMIS/Performance Improvement, Coordinated Entry/Assessment, Service Coordination, and Ranking), and ad-hoc committees as needed.

Each of the 12 local planning groups has one representative elected to sit on the steering committee. In addition the steering committee is comprised of one representative from the Department of Housing and Community Development, and a consumer representative (homeless or formerly homeless).

See charter for additional details.

CoC Competition Process

Annually the Virginia Balance of State (BoS) Continuum of Care (CoC) Collaborative Applicant submits a CoC Program application to HUD in accordance with the Notice of Funding Availability and guidance from the BoS Ranking Committee and BoS Steering Committee. The Collaborative Applicant (CA) will adhere to the following approved process to submit the application.

Registration

The application process begins when HUD releases the CoC Program Registration Notice. It is the CA's responsibility to complete the registration process and submit the registration via eSNAPS (HUD's electronic grant management system).

Grant Inventory Worksheet (GIW)

The CA will send a copy of the GIW to each project contact for review and updates. Once each project is updated, the CA consolidates all projects into one GIW spreadsheet and submits the information to HUD. The CA in collaboration with project applicants makes any identified changes to the GIW (once reviewed by HUD) and receives the final approved GIW from HUD.

Intent to Apply for New Projects and Reallocation Process

Once the registration is released, but prior to the release of the NOFA, the CA seeks interest from each of the 12 Local Planning Groups (LPGs) to apply for a new project either PSH for chronic households or RR-H projects. The CA provides this information via the Virginia BoS CoC website (<http://www.dhcd.virginia.gov/index.php/housing-programs-and-assistance/homeless-prevention-and-assistance-services/continuum-of-care/balance-of-state.html>) and through emails to each of the LPG lead contacts and steering committee members. The website and the email provide the pre-application (Attachment A) and instructions for applying for new projects. Instructions also request that all LPG stakeholders are made aware of the CoC competition opportunity.

This pre- application is used by the CA to ensure the new project is eligible, meets a community need, is Housing First, and is viable. After the pre-application is reviewed by the CA, the agency is provided

feedback on any changes or concerns the CA has about the new project. The agency can then make a decision about submitting a final application to the ranking committee once final project applications are due.

Notification of Funding Availability

Once HUD releases the Notice of Funding Availability (NOFA), the Collaborative Applicant sends it to all current CoC grantees, all BoS committee members, and LPG lead contacts. The notice is also published on the BoS CoC webpage hosted by the Virginia Department of Housing and Community Development.

The Collaborative Applicant reviews the NOFA, releases a timeline with instruction for the application process, and a final request for new projects (should the NOFA offer the opportunity for projects other than PSH for chronic households or RR-H projects, ex. expansion projects). The timeline and instructions are sent to the aforementioned recipients and published on the BoS website. If a LPG has an interest in a new project at this time, they submit the same application (Attachment A) to the Collaborative Applicant. The application is reviewed by the CA and the CA provides feedback as to eligibility and any questions or concerns. If eligible, the interested agency is instructed on submitting an application in eSNAPS.

Ranking and Review

The Balance of State Continuum of Care (CoC) convenes a panel of community stakeholders (at least 5) including (but not limited to) homeless service providers, state employees, advocates, housing authority representatives, local government representatives, and formally homeless representatives to review and assess funding requests for the HUD Continuum of Care Program. The panel, known as the Ranking Committee is an independent body (no conflicts of interest) tasked in the CoC charter as the entity responsible for accepting requests for funding and reviewing requests for consistency with meeting the federal, state, and local goals and priorities for addressing homelessness.

Scoring Instructions:

The steering committee of the BoS CoC approved the following scoring instructions to align with the HUD CoC Program Rating and Ranking tool on June 5, 2018 to measure project performance and capacity using objective criteria (see Rating and Ranking Tool – Attachment B).

Renewal and new projects are scored according to three (3) subcategories: 1) Standard Renewals: renewing projects that have operated for a full 12-month period; 2) First Time Renewals: renewing projects that have not yet begun operating or have begun operating but have not yet completed a full 12-month period; and 3) New Projects: projects that have never been awarded CoC Program funds. In order to be considered, all projects must pass Threshold Criteria:

1. Participation in coordinated entry
2. Applies housing first and low barrier principles
3. Identified match sources

4. Cost per permanent housing exit is reasonable (w/in one standard deviation above or below the average of all projects of the same type will be reasonable- outliers will be considered if extenuating circumstances are presented)
5. Financially feasible – has funding to meet the requirements of the project type
6. Applicant is an active CoC participant
7. Application and addendum is complete and data is consistent
8. Data quality is above 90% (in HMIS or if DV project, a comparable system)
9. Bed utilization is above 90% (size of projects will be taken into consideration)
10. Applicant’s audits and financial statements do not contain findings or other indications of accounting problems
11. Previous year’s financial statements demonstrate financial stability for the next operating

If threshold requirements are met, each project will be scored according to the following performance criteria (as measured by the CoC Program Ranking and Rating tool)

1. Length of Stay
2. Exits to Permanent Housing
3. Returns to Homelessness
4. Increase/New Income and Earned Income
5. Serving High Need Populations
6. Project Effectiveness
7. TBD

The Ranking Committee is staffed by the Department of Housing and Community Development (DHCD), the CoC collaborative applicant. The CA supports the work of the ranking committee in reviewing and ranking applications for funding, provides guidance to the ranking committee on the tiering process (if applicable), provides an evaluation matrix based on federal, state, and local priorities, and provides coordination between the project applicants and the ranking committee for all follow up. The collaborative applicant is also responsible for notifying project applicants and the BoS Steering Committee of the ranking committee’s decisions and publishing ranking results to the BoS CoC website.

The Ranking Committee responsibility revolves around the complete review and ranking of CoC applications received through the process that seeks funding for the Continuum of Care Application. There are four (4) primary responsibilities of the committee include:

1. Review all applications for funding: Review any new project submittals. Review any proposed reallocations. Review all existing CoC Programs that are eligible for renewal.
2. Evaluate and assess the proposals based on threshold and performance criteria to meet the Continuum’s existing needs and gaps.
3. Rank all projects according to criteria set out by HUD, CoC needs/gaps, and evaluation score.

4. Make a recommendation for a slate of projects to be funded in order of priority to the steering committee for a formal vote. The ranking is shared with the BoS full membership and posted on the BoS website. Each project receives a copy of their individual scores and is given the opportunity to meet with the Collaborative Applicant to debrief.

eSNAPS Submission

All renewal and new projects submit final applications in tin eSNAPS and the CA completes the collaborative application in ESNAPS and reviews all project applications in ESNAPS to ensure accuracy and completeness. Once all edits are made to the applications the CA submits the application to HUD. The final application is provided to all project applicants, the BoS Steering Committee and posted on the BoS website.

Coordinated Entry and Prioritization – See Coordinated Entry Policies and Procedures

Housing First

The BoS uses a Housing First model to implement a community crisis response to homelessness. Each LPG follows principles outlined in the United States Interagency Council on Homeless' Housing First Checklist (https://www.usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf)

- ✓ Emergency shelter, street outreach providers, and other parts of crisis response system are aligned with Housing First and recognize their roles to encompass housing advocacy and rapid connection to permanent housing.
- ✓ Staff in crisis response system services believes that all people experiencing homelessness are housing ready.
- ✓ Strong and direct referral linkages and relationships exist between crisis response system (emergency shelters, street outreach, etc.) and rapid re-housing and permanent supportive housing.
- ✓ Crisis response providers are aware and trained in how to assist people experiencing homelessness to apply for and obtain permanent housing.
- ✓ Community has a unified, streamlined, and user-friendly community-wide process for applying for rapid re-housing, permanent supportive housing and/or other housing interventions.
- ✓ Community has a coordinated assessment system for matching people experiencing homelessness to the most appropriate housing and services, and where individuals experiencing chronic homelessness and extremely high need families are matched to permanent supportive housing/Housing First.
- ✓ Community has a data-driven approach to prioritizing highest need cases for housing assistance whether through analysis of lengths of stay in Homeless Management Information Systems, vulnerability indices, or data on utilization of crisis services.
- ✓ Policymakers, funders, and providers collaboratively conduct planning and raise and align resources to increase the availability of affordable and supportive housing and to ensure that a range of affordable and supportive housing options and models are available to maximize housing choice among people experiencing homelessness.

- ✓ Policies and regulations related to permanent supportive housing, social and health services, benefit and entitlement programs, and other essential services support and do not inhibit the implementation of the Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require the completion of treatment or achievement of sobriety as a prerequisite.
- ✓ Every effort is made to offer a transfer to a tenant from one housing situation to another, if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided.

Prevention/Diversion

Prevention/diversion assistance can aid households in preserving their current housing situation or assisting households in finding housing outside of shelter while they receive services to stabilize their housing or help them move into permanent housing. These strategies can reduce the number of people entering the homeless assistance system and the demand for shelter and other programmatic housing beds.

Prevention is targeted to those who are most likely to become homeless. LPGs use shelter data to determine what criteria to assess when targeting prevention services. This data improves their ability to prevent homeless episodes by using the characteristics of their sheltered population as the criteria for determining if a household should receive prevention assistance. LPGs look at the following data elements and develop prevention/diversion assessments that best match their local community needs.

- Number of and length of previous homeless episodes
- Household income
- Disabilities in the household
- Criminal records
- Past evictions
- Pregnancy
- Benefits received (Temporary Assistance for Needy Families, etc.)
- Living situation prior to coming to the homeless assistance system
- Employment status
- Household size and membership (presence of children, their ages, etc.)

Eligibility for prevention includes the following:

A household must be at imminent risk of homelessness, have household income below 30 percent AMI, and have no other resources in order to be eligible for prevention assistance.

The household income must be below 30 percent of AMI with no more than \$500 in assets (including all checking, savings, retirement accounts, stocks, bonds, mutual funds, and real estate). The asset limit is assessed after monthly expenses have been paid. This does not include primary, appropriate, and

reasonable transportation, pension or retirement funds that cannot be accessed. [HUD Published Income Limits](#) and [Section 8 income eligibility standards](#) are used for determining AMI.

Prevention providers adhere to the following practices:

Documentation of imminent risk status and prevention assistance eligibility is required and third party verification is used where possible.

Prevention financial assistance beyond three months requires recertification of eligibility. This recertification is then, completed every three months there afterwards. Recertification requires certification and evidence of:

- Program participant household income below 30 percent AMI
- The household lacks the financial resources and support networks needed to remain in existing housing without prevention assistance
- Housing stabilization services are being appropriately implemented
- The household does not exceed the \$500 asset limit

In cases where program participants receive only case management and services, recertification is required every 12 months. Case management is required at least monthly; however, services are not required of program participants.

Prevention financial assistance requires that the program participant head of household have the valid lease with a landlord that is in compliance with tenant/landlord laws in their name. A copy of this lease must be included in the program participant record.

Non-financial prevention assistance is leveraged where possible to divert households from homelessness. Financial assistance (e.g., rent assistance) should be provided as a last resort to prevent homelessness.

Outreach

At the current time, there are not specific programs located in the BoS CoC that provide outreach. However, it is important that outreach is conducted across the geography to identify homeless persons who are not accessing services. The LPG must work with law enforcement, hospitals, EMTs, and other community resources to help identify persons who are unsheltered and unengaged. If an unsheltered/unengaged person becomes known to a LPG, it is the responsibility of the LPG to have the coordinated entry staff conduct outreach (establish a relationship, conduct assessment, make referrals, offer services, and follow up as appropriate) until the person is housed.

In addition to working throughout the year with law enforcement, hospitals, EMTs, and other community resources to help identify persons who are unsheltered and unengaged, each year during the point-in-time count LPGs conduct outreach to identify persons who are unsheltered, complete VI-SPDAT assessments (when appropriate), and begin engagement with the goal of obtaining permanent

housing. Once located, persons who are unsheltered are followed up with regularly until permanent housing is obtained or until they enroll in a homeless service program.

Emergency Shelter

Emergency shelters play a critical role in the crisis response system. Low barrier, permanent housing-focused shelters ensure households have a safe place to stay and that their experience of homelessness is as brief as possible.

Emergency Shelter is defined as any facility, the primary purpose of which is to provide a temporary shelter for the homeless in general or for specific populations of the homeless, and which does not require occupants to sign leases or occupancy agreements. Emergency Shelters provide emergency housing to deal with an individual's or family's immediate housing crisis. Assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and with few to no barriers. The resources and services provided are tailored to the unique needs of the individual or family.

Emergency Shelters exist for both single adults and families. Single adult shelters serve individuals age 18 years and over. Family shelters serve one or more adults who are accompanied by one or more children. Shelters may also serve a specific target population such as single adult men, single adult women, those with medical vulnerability, or victims of sexual and domestic violence.

Family shelters must follow Prohibition Against Involuntary Family Separation- The age of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter and a family must be accepted and sheltered as they present regardless of family composition.

All shelters must follow Equal Access and Prohibited Inquiries- All activities must be made available without regard to actual or perceived sexual orientation, gender identity or marital status. Shelters are prohibited from inquiring about an applicant's or participant's sexual orientation or gender identity for the purpose of determining eligibility or otherwise making shelter or housing available. This does not prohibit an individual from voluntarily self-identifying sexual orientation or gender identity.

Decisions about eligibility for or placement into single-sex emergency shelters or other facilities will place a potential program participant (or current program participant seeking a new assignment) in a shelter or facility that corresponds to the gender with which the person identifies, taking health and safety concerns into consideration. A program participant's or potential program participant's own views with respect to personal health and safety should be given serious consideration in making the placement. For instance, if the potential client requests to be placed based on his or her sex assigned at birth, the provider should place the individual in accordance with that request, consistent with health, safety, and privacy concerns. Providers must not make an assignment or re-assignment based on complaints of another person when the sole stated basis of the complaint is a program participant or potential program participant's non-conformance with gender stereotypes.

Emergency Shelters are housing focused with the goal of every household obtaining permanent housing in 30 days or less. In order to get this outcome, shelters cannot work as standalone programs and must be connected with permanent housing resources such as housing location, housing focused case management, and when necessary rapid re-housing or permanent supportive housing. To obtain emergency shelter, individuals and families must meet one of the following criteria:

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- i. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- ii. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
- iii. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence and cannot be diverted; provided that:

- i. The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; and
- ii. No subsequent residence has been identified; and
- iii. The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; or

(3) Any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; has no other residence; and lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

If a program participant creates a health or safety risk to themselves or others, the provider may terminate the assistance in accordance with a formal process established by the provider that recognizes the rights of individuals affected. If services are terminated appropriate referrals must be made and documented. In addition, whenever possible, termination from one service may not necessitate termination from all services. All emergency shelters must have a documented termination policy. The provider must exercise judgment and examine all extenuating circumstances in determining

when actions warrant termination so that a program participant's assistance is terminated only in the most severe cases. Upon termination, all programs must require the completion of a letter of termination that outlines a grievance procedure.

Shelters must meet all federal, state, and local habitability standards including fire inspection and Americans with Disabilities Act (ADA) compliance. If the shelter itself is not ADA compliant, there must have a plan to meet the needs of households with disabilities.

Transitional Housing

If at all possible, transitional housing (TH) programs should work with the local community to convert to more efficient and cost effective practices such as emergency shelter or rapid re-housing. If it is determined that the TH programs in the local area are the most effective means to house persons, they should be prioritized to meet the needs of those with high barriers, DV survivors, youth, or those with or recovering from substance abuse or mental illnesses. Remaining TH providers must follow a Housing First model and work with each household to assist them in obtaining housing as quickly as possible.

By definition, transitional housing is a facility-based or scattered-site program that offers housing and services for up to two years to individuals and families experiencing homelessness. The majority of people experiencing homelessness do not require lengthy stays in TH therefore, TH should be reserved for those with severe or specific needs and who choose TH over other services that would move them into permanent housing more quickly.

Some households face severe barriers to securing permanent housing, which may lead to longer episodes of homelessness. Although, they may not need the specialized services traditional TH offers, TH may be used to accommodate these households while they receive housing location services to help them exit homelessness as quickly as possible.

Eligibility for transitional housing includes the following:

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

i. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

ii. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or

iii. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) Any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; has no other residence; and lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

If a program participant creates a health or safety risk to themselves or others, the provider may terminate the assistance in accordance with a formal process established by the provider that recognizes the rights of individuals affected. If services are terminated appropriate referrals must be made and documented. In addition, whenever possible, termination from one service may not necessitate termination from all services. All TH programs must have a documented termination policy. The provider must exercise judgment and examine all extenuating circumstances in determining when actions warrant termination so that a program participant's assistance is terminated only in the most severe cases. Upon termination, all programs must require the completion of a letter of termination that outlines a grievance procedure.

TH programs must meet all federal, state, and local habitability standards including fire inspection and Americans with Disabilities Act (ADA) compliance. If the program itself is not ADA compliant, there must have a plan to meet the needs of households with disabilities.

Rapid Re-housing

Rapid Re-housing (RR-H) is a short to medium term housing intervention that quickly moves homeless individuals and families into permanent housing with needed services to maintain stability. Assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety).

RR-H participants must have a lease in their own name. Assistance is provided directly to the landlord and the landlord cannot be the provider organization, affiliate, or subsidiary of the provider organization to ensure there is not a conflict of interest.

The resources and services provided are tailored to the unique needs of the household. The core components of RR-H include housing identification, rent and move-in assistance, and case management and services. While RR-H must have all three components available, it is not required that a single entity provides all three or that a household accesses them all.

Eligibility for rapid re-housing includes the following:

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- i. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;

ii. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or

iii. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) Any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; has no other residence; and lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

For all rapid re-housing assistance, an initial intake is required to determine program eligibility and to document homeless status. Using a housing barrier assessment and participant input, a housing plan is written outlining the steps necessary for permanent housing and stabilization to be achieved.

Providers must have written agreements with both the participant and the landlord that identify the terms of the rapid re-housing assistance. This provides the landlord with guidance for addressing issues which could impact housing stability and must include:

- A provision requiring the owner to give the provider a copy of any notice to the program participant to vacate the housing unit, or any complaint used under state or local law to commence an eviction action against the program participant.
- The same payment due date, grace period, and late payment penalty requirements as listed in the program participant's lease.
- The term of the rental assistance agreement for the period of time they anticipate providing assistance. Noting that this may be updated based on the need of the participant.

Rapid Re-housing providers adhere to the following practices:

- No participant may receive more than 24 months of assistance during any three year period of time.
- Determinations of the amount of rental assistance provided, such as "shallow subsidies" (payment of a portion of the rent), payment of 100 percent of the rent charged, or graduated/declining subsidies are made and reassessed at least every three months.
- Assistance with any portion of rent during a month counts as a month toward the 24 month limit.
- Payment of rent arrears consists of a one-time payment for up to six months in arrears, including any late fees on those arrears. Rent arrears may be paid only if the payment enables the program participant to obtain a housing unit. If funds are used to pay rent arrears, the

arrears must be included in determining the total period of the program participant's rental assistance, which may not exceed 24 months.

- Any individual or family receiving assistance beyond any arrears and two current months of rent and financial assistance must be evaluated and recertified as eligible every three months.

Recertification of eligibility includes the following:

- Program participant household income below 30 percent AMI
- The household lacks the financial resources and support networks needed to remain in existing housing without rapid re-housing assistance
- Housing stabilization services are being appropriately implemented
- The household does not exceed the \$500 asset limit
- Appropriate levels of case management must be provided in order to ensure housing stability and at a minimum monthly case management must be provided.
- Program participant may share in the costs of rent.
- Assistance is "needs-based," meaning that providers determine the amount of assistance based on the minimum amount needed to help the program participant maintain housing stability. This allows communities to use program resources efficiently to serve as many households as possible.
- When households are moved into a unit, the rent must meet rental reasonableness, fair market rent, and until must meet habitability and lead paint standards.

The BoS uses the Performance Benchmarks and Program Standards established by the National Alliance to End Homelessness to create, evaluate, and improve Rapid Re-Housing projects

(<http://www.endhomelessness.org/library/entry/rapid-re-housing-performance-benchmarks-and-program-standards>)

If a program participant is terminated from receiving assistance prior to the determination of housing stabilization occurring, the provider must terminate the assistance in accordance with a formal process established by the provider that recognizes the rights of individuals affected. If services are terminated, appropriate referrals must be made and documented. All RR-H programs must have a documented termination policy. The provider must exercise judgment and examine all extenuating circumstances in determining when actions warrant termination so that a program participant's assistance is terminated only in the most severe cases. Upon termination, all programs must require the completion of a letter of termination that outlines a grievance procedure.

Permanent Supportive Housing

Permanent Supportive Housing (PSH) projects aim to provide sufficient services to help tenants remain stably housed over the long term. The goals of the BoS PSH projects include:

- Increasing income;
- Increasing housing stability by ensuring proper supports and services are attained or provided;
 - Decreasing hospitalizations and ER visits
 - Decreasing arrests and jail stays

- Moving tenants, upon exit, from the permanent supportive housing to equally permanent housing;
- Decreasing rent burden; and
- Developing a housing plan that clearly identifies long-term permanent housing goals.

In addition to supporting individuals and families with special needs in increasing their income and housing stability, among other positive outcomes, permanent supportive housing improves conditions within the larger community.

All BoS Permanent Housing projects either have dedicated beds or give priority to those who are chronically homeless and in 2015, the BoS adopted Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status (<https://www.hudexchange.info/resource/3897/notice-cpd-14-012-prioritizing-persons-experiencing-chronic-homelessness-in-psh-and-recordkeeping-requirements/>)

Chronic Homeless Definition (<https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/>) is an individual or family that is homeless and resides in a place not meant for human habitation, a safe haven, or in a an emergency shelter, and has been homeless and residing in such a place for at least one (1) year or on at least four (4) separate occasions that totals one year in the last three (3) years. In addition, the individual or family head of household must have a diagnosable disability including substance use disorder, serious mental illness, developmental disability, posttraumatic stress disorder, cognitive impairment resulting from a brain injury, or chronic physical condition.

Evaluation and Monitoring

Evaluation and Monitoring take place at multiple levels in the BoS. At the project level, quarterly reports are required for all projects that receive state and ESG funds, which are reviewed by the CoC program coordinator at DHCD (CA). In addition, each LPG meets with DHCD (CA) to review spending rates and to discuss spending challenges (too slow or too quickly) quarterly. If challenges persist, technical assistance is provided to ensure each LPG is spending funds most effectively.

Annually, each LPG submits a Homeless Outcomes Community Report that evaluates the LPG as a crisis response to homelessness including domestic violence providers. The report uses PIT count, numbers served, coordinated entries, subpopulations, first time homeless, length of time homeless, and program participation length of time for the evaluation. This report along with the HUD System Measures reports, are analyzed at the LPG and BoS level. The results are used to make LPG and BoS changes to programs, procedures, and system designs.

The CoC program coordinator at DHCD (CA) also works closely with the HUD CPD representative and receives a “spend rate” spreadsheet that provides information on HUD project spending, LOCCS usage, APR submissions, and any concerns. The CoC program coordinator helps mediate any issues and requires action plans for any concerns that may result in findings or de-obligations.

The CoC program coordinator also evaluates and/or monitors CoC funded projects annually, to be used as part of the CoC ranking process.

Point-In-Time Count

Each LPG conducts a Point-In-Time (PIT) count on the date designated by the Virginia Department of Housing and Community Development. All CoCs in Virginia conduct the count on the same day and the count is coordinated with the Metropolitan Washington Council of Governments (COG).

The CA in conjunction with Homeward (HMIS lead) provides training and instructions each year on the following:

- PIT date
- Participation requirements
- Who is/isn't counted
- Data element requirements and methodology
- Survey tool and surveying techniques
- Submission process and due dates
- Forms
- Changes from previous year

The CA receives copies of the surveys and forms, and along with HMIS reports aggregates all sheltered and unsheltered data. The aggregated BoS data is entered into HDX (HUD's reporting system).

Conflict of Interest

It is the policy of the Balance of State CoC that a conflict or a circumstance that would create the appearance of conflict to a reasonable person shall be avoided. Members of the CoC shall adhere to a conflict of interest policy that meets the standards described by the U.S. Department of Housing and Urban Development (HUD) in 24 CFR 578.95. HUD addresses the requirement of Continuum of Care steering committee(board) members specifically in 24 CR 578.95 (b): *No Continuum of Care steering 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.*

Specifically, organizations receiving state or HUD CoC funding may not make any type or amount of assistance conditional on an individual's or family's acceptance or occupancy of housing owned by the grantee, the sub-grantee, a parent organization, or subsidiary. Grantees/sub-grantees, parent organizations, or subsidiaries may not administer rapid re-housing or prevention assistance and use the assistance for households residing in units owned by the grantee/sub-grantee, parent organization, or subsidiary. An organization may not both participate in decision-making related to determining eligibility and receive any financial benefit.

In addition, an individual who is an employee, agent, consultant, officer, or elected or appointed official of the grantee or its sub-grantee (receiving state or HUD CoC funding) may not both participate in

decision-making related to determining eligibility and receive any financial benefit. This financial benefit may not be received by the specific individual, any member of his/her immediate family or a business interest. The restriction applies throughout tenure in the position and for a one-year period following tenure.

Upon the written request of the organization, DHCD may grant an exception to the restrictions in the paragraph above on a case-by-case basis when it determines that the exception will serve to further the purposes of the program and promote the efficient use of program funds. In requesting an exception, the grantee must provide a disclosure of the nature of the conflict, accompanied by an assurance that there has been public disclosure of the conflict and a description of how the public disclosure was made. In most cases, additional HUD waivers are required.