Before Starting the CoC Application

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

1. the CoC Application,

2. the CoC Priority Listing, and

3. all the CoC's project applications that were either approved and ranked, or rejected.

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

- 1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
- 2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.

3. All information provided to ensure it is correct and current.

- 4. Responses provided by project applicants in their Project Applications.
- 5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It

- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

appeal HÚD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MD-506 - Carroll County CoC

1A-2. Collaborative Applicant Name: Carroll County, Commissioners of

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Carroll County, Commissioners of

1B. Coordination and Engagement–Inclusive Structure and Participation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.
	In the chart below for the period from May 1, 2022 to April 30, 2023:
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

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

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

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

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Project: MD-506 CoC Registration FY 2023

(1) The CoC communicates invitations throughout the year to new and existing non-profits and service organizations to join the CoC. An invitation statement is on the CoC's web page and is open to the CoC's entire geographic area. Bimonthly meetings are open to the public and held in an accessible, central location. During the COVID-19 pandemic, a virtual option was made available, and the meetings continue to be offered in a hybrid format. Two weeks prior to each meeting reminders, previous minutes, and agendas are distributed to the listserv and posted on the CoC's web The CoC reaches out to new and grassroots non-profits that provide services to homeless and at-risk at-individuals and families, inviting them to join the CoC and present their services. In addition, the CoC has begun in-person conversations with participants with lived experience in all homelessness services, extending routine invitations for households to join and actively participate in the process.

(2) The Collaborative Applicant's website complies with all ADA requirements. In addition, all CoC announcements, invitations to join and meeting documents are uploaded to the website as PDFs and are accessible documents. (3) Data specific to the CoC region demonstrates that people of color and those who identify as part of the LGBTQ+ community are over-represented in the homeless population The CoC region currently has no organizations exclusively dedicated to serving culturally specific communities experiencing homelessness. However, several members of the CoC Board representing the Community Action Agency, the local Health Dept, and local government are active members of Carroll Citizens for Racial Equity (CCRE), working to seek and share information regarding culturally specific communities, while promoting equity and justice through advocacy, education, and collaboration. CCRE hosts an annual conference, which this year included a panel discussion with Carroll Kids for Equity, an organization of school-aged students representing historically underserved communities. CCRE members are invited to CoC meetings. In addition, the CoC region has a CLAS (culturally and linguistically appropriate services) workgroup that strives to ensure all health and behavioral health services are offered in a way that promotes inclusivity and equity. The chair of the CLAS group recently provided a CoC-wide training on the intersectionality of race and homelessness.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.
	NOFO Section V.B.1.a.(3)
	Describe in the field below how your CoC:
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

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1) 35-45 agencies, from small grassroots and faith-based organizations to heads of local government agencies, attend bi-monthly public meetings where knowledge, opinions, and resources on everything related to homelessness is shared and discussed. These organizations are also invited to CoC training and strategic planning. Opinions, suggestions, new ideas, and strategies are welcome and encouraged. Not every organization provides direct service to homeless individuals and families but participates to fulfill a mission of service to those in need. Also, many organizations attending CoC meetings participate in other community initiatives, such as the Behavioral Health Council and the Senior Opioid Policy Group, two issues that impact those experiencing homelessness. (2) Information related to or impacting homelessness that is gathered at other public meetings is always communicated back to the CoC. The CoC uses multiple methods of communication, including bi-monthly CoC meetings, email distribution, press releases, and posting information to the local government website. The CoC meetings are held in a location accessible to everyone so that any individual can come and speak or listen. In addition, the CAA and the PHA are in the same public building. Anyone expressing a need or concern about housing or homelessness can walk into their offices. (3) Effective communication is ensured by hosting CoC meetings in a public library with easy accessibility for those with physical disabilities. In addition, the meetings are also available virtually through a platform such as GoToMeeting. All minutes and agendas are available on the local government website and posted in an accessible PDF format. (4) Information gathered from the public about homelessness is always discussed. For example, the CoC's emergency shelters are located on the same campus as the largest senior center in the region. For a brief time, individuals experiencing homeless were congregating behind the Senior Center rather than choosing to utilize emergency shelter. This presented challenges for senior center staff as some patrons of the centers expressed safety concerns around individuals congregating outside of the center and littering. The CoC Chair listened to concerns and put together an ad hoc work group to drive solutions that involved proactive community involvement, increased homeless outreach and service connection, and developed policies ensuring safety and well-being of all.

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

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 All CoC notifications are publicly posted, announced at all CoC meetings, and broadly distributed via CoC listservs, specifically inviting new applicants to apply to CoC funds. Notifications include the funding available for renewal, and reallocation as well as the Bonus and DV Bonus projects. (2) All publicly accessible notifications include the steps necessary to submit project applications to the CoC, a link to HUD's NOFO, the timeline for project submissions, and the local Rank and Review Policy which details the scoring criteria for new applicants and renewal projects. Finally, the notification includes the phone, email, and address of the local CoC contact for any questions. (3) Included in the public notification was a link to the CoC website which included the CoC's Rank and Review Policy adopted by the CoC Board for the 2023 NOFO. The policy includes details about funding levels, selection criteria of the CoC, tiers and ranking of projects, selection and scoring tools including the most recent HUD CoC Rating and Ranking tool, and the Appeals process. (4) The Collaborative Applicant's (local government) website has been updated to comply with all ADA requirements, in addition, all CoC announcements and documents link to PDFs that are in an electronically accessible format.

1C. Coordination and Engagement

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

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

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18. Community Action Ager	ncy	Yes
1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	
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	Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;	
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;	
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and	
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.	

(1) Located in a non-entitlement jurisdiction, the CoC works with the State of MD, a direct recipient of ESG, to plan for and allocate ESG funds. The CoC's Collaborative Applicant (CA) submits an annual competitive application to the State, which is the only application for ESG funds in the CoC's geographic area. The State supports the CoC's needs each year with funds for Emergency Shelters, Outreach, Homelessness Prevention, and RRH for adults and youth. The State provides technical assistance & monitors funds received to ensure funds are spent in the most effective way. The CoC also participates in monthly peer-sharing calls hosted by the state ESG program managers. Annually, as part of the application process, the CA describes the need for homeless services across the CoC's geographic area, detailing shelter and housing data, housing stabilization strategies, and outreach efforts. The CoC's ESG application also includes coordinated efforts such as the Move-on Strategy with the PHA and the partnership with the local community healthcare clinic. The State also reviews the CoC HUD system performance measures. New in FY 24, the State will require the CoC to complete an assessment to determine the quality of emergency shelter services and to potentially reallocate shelter funding to support increased Diversion and permanent housing resources. (2) The CA's staff monitor, evaluate and report to the State of Maryland on the performance of the CoC's ESG sub-recipients. Quarterly, performance is reviewed by the CoC Board. If a project is underperforming, staff meets with the sub-recipient to develop a plan for project improvement. The CoC also provides data to the State of Maryland through the state-wide data warehouse detailing the impact of ESG funds. (3) The CoC provides PIT, HIC, and system performance measure data through MD's data warehouse to inform the State's Consolidated Plan. (4) Annually the CoC reviews the State's Consolidated Plan. and provides feedback regarding local needs and challenges. The CoC is diligent about meeting its local goals while remaining consistent with the State's Consolidated Plan. The CoC also participated in the State's survey on efforts to Affirmatively Furthering Fair Housing in the CoC geographic area and is looking forward to working with the state as that plan is developed and implemented.

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1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	
	Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:	

MD-506

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

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	No
3.	Local Education Agency (LEA)	Yes
4.	School Districts	No

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

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

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The CoC's Governance Charter includes the Local Education Agency (LEA) as an official member. The LEA is the county-wide school system serving over 25,000 students. The LEA provides a dedicated representative, the McKinney-Vento Homeless Liaison, who attends all CoC meetings, CoC Board, and youth homeless subcommittee meetings and provides monthly quantitative and qualitative data on student homelessness, informs the CoC regarding available homelessness funding through McKinney-Vento, and partners with the youth homeless sub-committee in carrying out the region's annual Youth Reach MD count of homeless youth. A formal MOU is in place with the CoC and the State of Maryland's Department of Housing and Community Development detailing the expectations of each CoC's local Youth Reach MD efforts, including a written letter of commitment from the State Education Agency and the LEA to assist in surveying homeless youth within the school system. The local LEA has been instrumental in assisting the CoC's Youth Reach Committee in both counting and engaging homeless youth enrolled in the school system. The McKinney Veto Liaison was also a contributing member YHDP application team, a named partner in the responses and, if the CoC is selected, will participate in the development of the Coordinated Community Plan.

IC-4b. Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.

NOFO Section V.B.1.d.

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

All CoC emergency shelters and housing programs have written policies ensuring homeless children are enrolled in educational services. When a family with school-aged children enters shelter, staff contact the LEA Pupil Personnel Worker (PPW). The PPW works with the family and staff to verify the family's homeless status and expedite the school enrollment process. Students may continue at their current school (school of origin) unless the parent prefers the student transfer to the school where the shelter is located. If requested the PPW also arranges transportation to and from the shelter. Staff notify families about Title I LEA tutoring and counseling services available and encourage families to participate in school-based services and shelter-based services such as tutoring and counseling. Shelter staff and PPWs collaborate during the family's stay at the shelter to ensure services are accessible to families and address any educational concerns that arise. The shelter uses a 2-gen service delivery model assessing the whole family's needs, referring children to appropriate resources and including whole family planning as part of service delivery. When a family transitions out of the shelter the PPW is notified so continuity of services is maintained, and any necessary transitions occur smoothly. If a young child is not school-aged, shelter staff make a referral to early childhood education programs, such as Head Start and the Community Action Agency (CAA)'s Family Center, both two-generation programs. In addition, the CAA's Family Support Center staff participate in inter-agency case management meetings to ensure families with young children in the shelter are engaged in early childhood educational programming, and parents have access to services such as GED preparation, ESOL classes, and workforce development opportunities. Through MOU the CAA also sits on the local Judy Center Steering Committee and the Early Childhood Advisory Committee, both designed to enhance early intervention educational services for young children

1C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

NOFO Section V.B.1.d.

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

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

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

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

	Organizations	
1.	state domestic violence coalitions	No
2.	state sexual assault coalitions	No
3.	other organizations that help this population	Yes

1C-5a	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.
	NOFO Section V.B.1.e.
	Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

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

(limit 2,500 characters)

1. update CoC-wide policies; and

The CoC's domestic violence provider is a voting member of the CoC and of the CoC Board. All CoC policy updates are made at the CoC Board level, with input from the DV provider, to ensure any changes made are through a traumainformed and victim-centered lens for serving DV clients. (2) Annually, the region's DV provider, a member of the CoC Board, provides training on traumainformed practices, including structuring intake processes and assessments designed to not re-traumatize individuals seeking services but to quickly identify those at risk. Throughout the year, additional community-wide learning opportunities around trauma-informed practices are offered by the DV provider and local grassroots organizations. As an example, the children, youth, and family board, housed in local county government, is sponsoring a year-long Trauma-informed Resiliency opportunity (TIRO) learning cohort that includes several agencies that provide services to households experiencing homelessness and/or domestic/intimate partner violence. The training assists organizations in designing and implementing community-wide and organizational cultures and policies that recognize and support the physical. social, and emotional impacts of trauma, including using a victim-centered lens that prioritizes feelings of safety and promotes client self-determination. The cohort also focuses on secondary trauma experienced by staff serving survivors, including promoting healthy working environments and self-care.

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1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(1) The CoC's Domestic Violence (DV) service provider conducts ongoing trauma-informed and victim-centered training for all CoC-funded project staff. At each bi-monthly CoC meeting, a training topic is presented to all attendees, including trauma-informed care, safety protocols, and how to best serve survivors of domestic violence. The CoC has collaborated with the funded agencies that have projects in this competition and have utilized the CoC's primary homeless shelter, RRH and PSH provider Licensed Clinical Social Worker as well as an agency recently awarded a regional sex trafficking system of care grant. All training includes new and existing project staff. (2) The CoC's Domestic Violence (DV) service provider delivers ongoing trauma-informed and victim-centered training to all Coordinated Entry project staff. CE staff are also routinely trained in lethality assessments and how to secure immediate safety for victims. Best practices for service delivery, including trauma informed care and safety planning are imbedded in CE procedures, as well as CE screening tool. CE provider also attends quarterly lethality training partnership meetings, held by the DV provider, collaborating with local law enforcement and first responders to receive continued training and support. The CoC has collaborated with the funded agencies that have projects in this competition as well an agency recently awarded a regional sex trafficking system of care grant. All training includes new and existing Coordinated Entry staff.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

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(1) Springboard Community Services (SCS) operates a Domestic Violence (DV) Safe House (DVSH) and provides trauma-informed, victim-centered services; prioritizing the safety needs of DV, sexual assault, and stalking clients impacted by intimate partner violence (IPV) with residential and nonresidential services using local, state, and federal (HHS and DOJ) funds. To prioritize safety CoC Coordinated Entry (CE) partners are trained to ask clients first about safety and to call the 24-hour DV Hotline to have the survivor and dependents sheltered. CE staff are also trained in lethality assessment protocols. This includes clients connected during CoC street outreach. DVSH services are delivered at no cost and provide meals, clothing, and toiletries. The DVSH is in an undisclosed location to ensure the most secure setting for survivors. The survivors' choice to engage in services does not dictate the safety and support given during the stay. A survivor may choose to not continue safe housing as defined by the CoC; SCS staff then help develop a safety plan. The CoC has planned for DV survivors entering the CE assessment process by immediately screening for DV, sexual assault, and stalking and through training in lethality assessment protocols (LAP). CoC plans include immediate transfer from the CE site to the DVSH, providing free transportation and assistance from local law enforcement if needed. (2) The CoC, via CE written policy, maximizes the survivor's choice for housing and services while ensuring confidentiality. CAA staff are trained annually in agency privacy protocols and do not disclose any information without a two-way release. Participants complete a CE release of information form during the initial appointment, to ensure confidentiality while preserving continuity of service. When a DV-related event occurs, no information is shared regardless of the release request. If a survivor does choose to enter DV services. CAA staff are removed and the individual or household's case is transferred to DV staff to ensure confidentiality. DV staff are trained in the MD Safe at Home Address Confidentiality Program (ACP) which provides a substitute address and free confidential mail-forwarding service.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
		1
	Describe in the field below:	
1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and	
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.	

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(1) Data for domestic violence survivors is collected utilizing a comparable database, Net Smart MyEvolve, while preserving the anonymity of survivors and following the protections put in place by The Violence Against Women Act (VAWA). The comparable database includes all data elements available in HMIS. Monthly reports are submitted to the CoC Co-chair and HMIS lead, including the number of domestic violence survivors served and residing in the Domestic Violence Safe House (DVSH), as well as the demographics of those served. Semi-annual performance measure reports are also submitted to the CoC Board. The CoC Board reviews this aggregate data and reports at large community meetings held by the CoC. (2) The CoC examines the aggregate data to determine the number of households impacted by domestic violence and homelessness and the necessary housing and services to meet the needs. Currently, the CoC and DV provider have identified a shortage of available and affordable housing for DV clients. In addition, disaggregated data shows a steady increase in the number of households seeking assistance, which has resulted in two households occupying a shelter space designed for one and placing households into hotels at a higher rate than in years past. In 2020, the CoC supported the construction of the community's DVSH through the Collaborative's Applicant sponsorship of a Community Development Block Grant. This additional space has been at or over capacity since opening in 2022. The result of this data collection and review is the submission of a DV Bonus Project for RRH for DV Survivors in the 2023 CoC application.

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.
	NOFO Section V.B.1.e.
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:
1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals' and families' emergency transfer requests.

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(1) The emergency transfer plan policies and procedures are adapted from the local PHA's annually updated Administrative Plan, in compliance with the requirements of VAWA and HUD. The transfer plan is also incorporated into the CoC's written standards for assistance. The PHA provides training to CoCfunded project staff, who in turn provide information to individuals and families seeking assistance, through the participants' rights and responsibilities handbook. The plan includes the timing and availability of a transfer and the assurances of confidentiality for the survivor. The PHA annually "sets aside" two HCVs dedicated specifically to survivors of DV, sexual assault, and stalking who are receiving services through the CoC DV provider agency. All information related to emergency transfer is also available publicly on the CA's website and through the public adoption of the PHA's annual Administrative Plan. (2) The process for individuals and families to request an emergency transfer starts with a family or individual believing there is a threat of imminent harm. The individual or family must request transfer documentation forms and complete a written statement expressing the belief of imminent harm or that an assault occurred on the premise during the 90-calendar day period before requesting the transfer, HUD form 5383. or a signed letter by an attorney, service provider, medical or mental health professional, or local law enforcement or agent of the court. (3) Any request for an emergency transfer (CoC or PHA) is handled by the Public Housing Authority. The PHA reviews the information submitted by the household and will attempt to locate another unit and the victim must approve the new unit for safety. The PHA will also assist the victim in communicating the need for a transfer with the landlord, including completing the required documentation. Confidentiality for the household or family is maintained and transfers are completed as quickly as possible. The PHA will also assist the victim, if desired, in connecting to community resources and support.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.
	NOFO Section V.B.1.e.
	Describe in the field below how your CoC:
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

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(1) The CoC ensures that survivors of domestic violence, dating violence, and sexual assault have access to all housing services by providing shelter and housing services screening through multiple community access points, including through the DV provider directly. Survivor households in need of shelter are never placed on a waitlist but are immediately entered into the region's DV shelter, a DV shelter outside of the CoC region, or secure motel placement if local shelter space is not available. After a DV client is placed in a safe location, the standardized Coordinated Entry Universal Needs Assessment is completed with, which objectively ranks the client for placement onto eligibility lists for all CoC and ESG-funded housing projects. Finally, through the PHA's annual Administrative Plan, two HCVs are set aside for DV clients who are experiencing homelessness. (2) - The CoC reviews all barriers to housing for everyone experiencing homelessness; the biggest challenge for DV clients is the lack of affordable rental units and low rental inventory in general. The DV provider has recently increased the number of shelter beds available in the CoC region but struggles to assist clients to identify and secure rental units when ready to transition out of shelter.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and	
2.	accounted for the unique and complex needs of survivors.	

(limit 2,500 characters)

(1)To date, the CoC has not directly involved survivors of domestic violence in the development of CoC policies but has always incorporated feedback from the staff serving survivors. The CoC Board strongly believes the safety of survivors is of the utmost importance and has begun a dialogue with the DV provider to strategize potential approaches to receiving feedback directly from survivors as opposed to having their voices heard through staff. (2) The CoC accounts for the unique and complex needs of survivors by first recognizing the importance of safety and confidentiality. The region has a DV hotline available 24/7, promotes 988 and the Mobile Crisis team, and has supportive working relationships with law enforcement, which affords clients multiple methods for safe communication for assistance. DV staff also create communication methods with each individual client, that ensure maximum safety, based on their unique situation, such as not using the client's cell phone. Several behavioral health organizations can also connect clients to the DV provider, including providing after-hours phone numbers. The Coordinated Entry screening tool also asks first if the individual has concerns for safety. When and if an individual or household's safety is in jeopardy, CE staff instantly contact the DV provider. As the recognized expert in best practices for survivors, DV staff are the most equipped to protect, shelter, and meet the needs of those who have experienced DV and have built relationships across the region so that survivors who cannot be kept safe locally can be safely sheltered in another location outside of the CoC region.

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	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.		
	NOFO Section V.B.1.f.		
1. [Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals at amilies receive supportive services, shelter, and housing free from discrimination?	nd Y	es/
2. t	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal A o Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rul	Access Y	es/
A	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Acce Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Ger dentity Final Rule)?		es/
·		'	
1C-6a			
10 04.	Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.		
 10 Gu.			
10 04.	Compliance-Addressing Noncompliance.		
10 00.	Compliance-Addressing Noncompliance.		
	Compliance-Addressing Noncompliance. NOFO Section V.B.1.f.		
1.	Compliance—Addressing Noncompliance. NOFO Section V.B.1.f. Describe in the field below: how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the		
1.	Compliance—Addressing Noncompliance. NOFO Section V.B.1.f. Describe in the field below: how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families; how your CoC assisted housing and services providers in developing project-level anti-		

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COC REG 2023 204674

Only one org. in the region is dedicated exclusively to LGBTQ+, PFLAG, for parents with LGBTQ+ children. The CoC has org 's committed to employing individuals representing the community and feedback is welcome from staff. In addition, the Local Health Dept leads a CLAS workgroup designed to ensure health and behavioral health services are delivered in a culturally responsive and proficient way through the lens of race, ethnicity, sexual identity, and gender. Almost every org in the CLAS group is also a CoC member, which helps ensure a unified message of acceptance, cultural proficiency, and equity is embedded across the entire CoC. (2) The CAA, primary provider of CoC shelter, RRH, and PSH housing projects, has developed a model for implementing anti-discrimination policies which include language from HUD Equal Access to Housing and Gender Identity Final Rules. The policy is a part of the Employee Handbook and Program Manual and is included in the CoC's Written Standards of Assistance. Staff is trained semi-annually on policy, diversity, and equity and participate in the State's annual equal access training. PFLAG provides LGBTQ+ training to CAA staff. Policies reflect best practices for ensuring LGBTQ+ households self-identify, determine their families, and direct their own services. All project participants receive a copy of the policy. Grievances are reviewed by the Ex. Dir. investigated guickly, and discussed with all parties to resolve the conflict. The CoC also enlists MD Legal Aid to present on fair housing and anti-discrimination policies and practices. (3)The CoC's process for evaluating compliance starts with providing annual training for CoC members on HUD's equal access rules for shelter and housing Although shelter and housing programs are housed in one agency, the CoC policy reinforces compliance for any agency that serves or interacts with households seeking assistance. Annually, the CoC re-affirms its commitment to anti-discrimination by soliciting feedback from CoC members on the written policy. (4) The CoC has a dedicated contact for any noncompliance filed by participants or agencies. The policy covers 3 areas: housing program grievances, fair housing, and coordinated entry grievances. The POC assists in directing the issue of noncompliance to the correct local, state, or federal agency, and ensures timely follow-up. Training and technical assistance are also available for agencies seeking assistance or managing a complaint.

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

NOFO Section V.B.1.g.

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

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

Public Housing Agency Name	Housing and Housing During FY 2022 v	New Admissions into Public Choice Voucher Program who were experiencing sness at entry	Genera	PHA have a I or Limited Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
City of Westminster, Maryland		0%	Yes-HCV		No
Carroll County, Maryland		19%	Yes-HCV		Yes
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1C-7a	Written Policies on Homeless Admission Preferences with PHAs.
	NOFO Section V.B.1.g.
	Describe in the field below:
1,	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(1) Both PHAs in the CoC's geographic area have a homeless admission preference in their annual Administrative Plans. The CoC's largest PHA is also the Collaborative Applicant for the CoC, has a Moving-On Strategy, is the recipient of ESG funding and operates a State-funded RRH program for homeless youth, and administers the HOPWA long-term housing program on behalf of the local Health Department. PHA leadership is active on the CoC Board as well as the local Homelessness Board and its committees. The county PHA (largest) and city PHA work together to ensure voucher holders have a choice in rental units across the entire geographic region, and the smaller PHA also participates in Homelessness Board meetings and is a member of the CoC Board.(2) N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored–For Information Only	
		•
	Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:	

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

E) (0000 0 0 A II		00/00/000
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1.	Emergency Housing Vouchers (EHV)	No
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	No
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
1C-7c	d. Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessnes	ss.
	NOFO Section V.B.1.g.	
	<u>-</u>	
1	I. Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2	2. Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	FUP
1C-7€	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	g
	NOFO Section V.B.1.g.	
Vo	d your CoC coordinate with any PHA to apply for or implement funding provided for Housing Cho puchers dedicated to homelessness, including vouchers provided through the American Rescue an?	ice Yes
1C-7e.1	I. List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program	n.
	Not Scored–For Information Only	
Doe EH\	es your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the Program?	ne No
If yo	ou select yes to question 1C-7e.1., you must use the list feature below to enter the name of every A your CoC has an active MOU with to administer the Emergency Housing Voucher Program.	
PHA		
	This list contains no items	
	The list contains no nome	

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1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

NOFO Section V.B.1.i.

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1D-1	. Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	
	Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are n discharged directly to the streets, emergency shelters, or other homeless assistance program	ot
1. Foster Care	Y	es
2. Health Care	Y	es
3. Mental Health Care	Y	es
4. Correctional Facilities	Y	es
1D-2	. Housing First–Lowering Barriers to Entry. NOFO Section V.B.1.i.	
10-2		
en	ter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinate try, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC ogram Competition.	d 4
en	ter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinate try, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC ogram Competition that have adopted the Housing First approach.	d 4
En the	is number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordin try, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listin FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and oritizing rapid placement and stabilization to permanent housing.	ated 100% g in
1D-2a	Project Evaluation for Housing First Compliance.	

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

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

(1) The CoC evaluates every recipient through the annual project monitoring process. The HMIS lead reviews project case files and CE data for evidence of Housing First principles such as not denying entry into shelter or housing because of substancel use or requiring engagement in services to enter shelter or housing. Housing First compliance is checked as part of the threshold review. Should a new project application be received from an agency that has not previously provided housing services, the CoC would look for documentation of training around the core principles of Housing First, and for specific policies and procedures that demonstrate commitment to Housing First. The CoC would also provide technical assistance and monitor the project closely for implementation. (2) The list of factors includes operating a low-barrier shelter, the ability to directly place those experiencing street homelessness into RRH and PSH, the use of an objective CE assessment tool that ensures those who are most vulnerable receive services the quickest, reviewing lengths of time homeless, retention of permanent housing, and documentation of interagency staff training on Housing First. (3) Outside the competition, the CA monitors all CoC, State, and locally funded projects annually. In addition, the CoC utilizes HUD's Housing First Evaluation tool as part of annual monitoring. Participant files must also show housing provision is not dependent upon engagement in other services. Quarterly, data is analyzed for how quickly participants are placed into housing and that project placement is based on an objective evaluation of participants, with priority for those with severe service needs. Utilization data is reviewed to confirm projects are at capacity and employ the move-on strategy to ensure rapid placement out of RRH and PSH directly to HCVs. The CoC also engages in regularly occurring conversations with individuals and households across all programs, including those experiencing street homelessness, to determine if participants report being denied entry into shelter or housing in violation of Housing First principles. The CoC also maintains a confidential grievance and discrimination process available to all participants. This past year, the CoC Chair and both PHA Dir.'s met quarterly with reps. from the NAACP and Poor People's Campaign to discuss local Housing First concerns, create solutions, and educate advocates about the core components of HF

1D-3.	Street Outreach—Scope.
	NOFO Section V.B.1.j.
	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

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1) The CoC Outreach Committee reports to the CoC Board. Outreach meets monthly with a diverse group of stakeholders and deploys a team of staff and volunteers to conduct routine &on-demand street outreach. The team is led by the Community Action Agency, PATH, and local law enforcement and has developed a rapport with community partners, such as food pantries, soup kitchens, municipalities, and public libraries. Law enforcement is included not to criminalize homelessness, but to help build relationships, triage behavioral crises, and further the "no wrong point of contact", quickly connecting individuals to resources. The CoC region now has two local enforcement agencies implementing Law Enforcement Assisted Diversion (LEAD) which promotes connections to treatment and services for individuals, including homeless, as opposed to incarceration or arrest. Outreach engagement uses a trauma- informed lens, employs peer support staff and is Housing First focused. Street Outreach services cover 100% of the CoC geographic area, with regularly scheduled visits to all encampments. Feedback on new or abandoned encampments is also gathered from local law enforcement, businesses, and property owners. 3) Street outreach is conducted several times per week in the CoC's largest city, and several times per month in outlying rural areas. Outreach staff is also available any time to respond to new street homeless or to those in crisis, wherever they are. The CoC conducts the Point in Time Count, participates in homeless youth counts, and organizes several community resource fairs each year in locations where unsheltered individuals and families face barriers or are resistant to services inside agencies. 4) The CoC outreach plan specifically targets those who are least likely to engage in services, regardless of age, gender identity, disability, DV status, or behavioral health challenges by meeting households where they are staying, providing essential supplies, and working to build relationships by routinely showing up as promised. CoC utilizes best practices in providing effective communication for persons with disabilities including large print materials, staff trained in ASL, and services for persons with LEP including hiring bi-lingual staff, and translation of all fliers and documents. The CoC outreach team has access to a language line, a phone-based translation service and key CoC outreach materials are translated into Spanish.

1D-4. Strategies to Prevent Criminalization of Homelessness.

NOFO Section V.B.1.k.

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		

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LEAD (Law Enforcement Assisted Diversion)	Yes	No
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Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
NOFO Section V.B.1.I.	

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	43	43

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

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

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

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.
	NOFO Section V.B.1.m
	Describe in the field below how your CoC:
1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

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(1) CoC coordinates annual training to provide current information on mainstream resources available to program participants. Training from the Dept of Social Services (DSS) assists agencies in connecting households to mainstream benefits (TANF, TDAP, SNAP, and Medicaid) This has been especially important this year, as SNAP benefits have been reduced and many households may lose Medicaid eligibility. The Community Action Agency (CAA) trains community providers to assist clients in applying for energy assistance, which can potentially divert a household from homelessness The Community Health Center (CHC) provides information on accessing full-time walk-in substance abuse screening & integrated health services, including ambulatory detox and Narcan training as well as offering care coordination that includes securing benefits such as SSDI, SNAP and Medicaid/Medicare and State funded healthcare enrollment (2) CoC Board is comprised of service agencies who routinely work together to educate and provide wrap-around services to the region's homeless population. As an example, the Coordinated Entry Committee hosts semi-monthly inter-agency case management meetings to coordinate participant case plans for participants with complex behavioral and physical healthcare needs. The CAA, responsible for all shelters, RRH and PSH, the local community health clinic, and local health dept collaborate to ensure these vulnerable participants are engaged in coordinated, comprehensive medical and behavioral health resources and connected to critical peer support services. CHC has dedicated a peer recovery staff for the shelter, working twice per week to build rapport, encourage treatment, and support recovery. The new CoC co-chair is also a provider of inpatient SUD treatment, providing an additional resource for the community. (3) The CoC's CA employs 3 Housing Stability staff to increase participant access to mainstream benefits. All three coordinators are SOAR-certified to assist participants with SSDI/SSI applications. The CAA also has SOAR-trained case managers. The Local Health Department trains all SOAR volunteers and employs SOAR-trained staff. Currently, across the CoC 10 staff are certified in SOAR.

1D-7. Increasing Capacity for Non-Congregate Sheltering.

NOFO Section V.B.1.n.

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

Carroll County Government (CCG), the Collaborative Applicant (CA) for the CoC, has purchased a building that will house the CoC's new Family Shelter. The Family Shelter will have a non-congregate space for families and youth experiencing homelessness. CCG is collaborating with the CoC, families, and youth with lived experience, and the CoC's shelter provider, to design a shelter that will adequately meet the needs of homeless families and youth. The design will utilize infrastructure in the existing building including six bathrooms with showers, two locker rooms, a laundry area, multiple access doors, a kitchen, fenced outdoor space, and office space. Plans include private rooms and multiple bathrooms to safeguard against the spread of infectious disease. The new shelter space will enhance safety and security and provide healthy indoor and outdoor temporary places for families. This new space will utilize best practices for non-congregate shelter design, increase bed capacity, and maintain local funding for operations. Over the last four years, 306 adults and 243 children have resided in the current Family Shelter. The shelter is almost always at capacity and routinely has a waitlist. As a semi-congregate setting, the current family shelter lacks privacy and security and does not provide adequate protection from future public health emergencies. Also, in the CoC, unaccompanied youth under 18 currently have no access to congregate or noncongregate shelters. The CoC will continue to utilize hotel stays and an alternative shelter location to provide non congregate shelter for participants who need to isolate due to a positive COVID test, a recent COVID exposure, or other public health crisis requiring quarantine. Finally, the CoC just opened a non-congregate shelter for DV survivors and their children and victims of elder abuse that can house 8 households.

ID-8.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
1.	develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

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(1) During COVID, the CoC's local Health Dept. worked closely with the CoC's shelter provider, and the local community health clinic to develop CoC-wide guidance around masking, testing, and quarantining, and jointly developed strategies to test and vaccinate households living in shelter and in unsheltered locations. Weekly meetings were held with gov. and health agencies to plan for COVID outbreaks and develop flexible policies responsive to the rapidly changing public health guidance. The CoC's shelter provider developed a CoCwide policy for isolating unsheltered high-risk homeless who were susceptible to severe complications from infectious disease, including using hotels, day center, and overnight overflow shelters. For those who remained unsheltered, the CoC worked with the local government's emergency response department to develop protocols for the immediate distribution of hygiene and health products including portable restrooms. As COVID fades, this guidance is now policy and best practice. With the infrastructure in place, the CoC can quickly respond to any future infectious disease outbreaks. As an example, the CoC continues to partner with the Heath Dept. during homeless resource fairs to provide testing, feedback, and linkages to resources for the treatment of infectious diseases such as HIV and Hep C. Nursing staff participate in homelessness outreach events to engage the unhoused. The local community health clinic also offers an Influenza vaccination and testing program. (2) The local HD, the CAA, local county government, and the community health clinic continue to draw on the policies developed during COVID for preventing infectious disease outbreaks including isolation protocols for sheltered and unsheltered homeless who were at high risk for complications from any infectious disease. Prevention efforts occur through the Street Outreach team distributing hygiene and safety supplies such as hand washing stations and masks and through the screening and diversion process that quickly identifies vulnerable subpopulations such as those who are elderly, chronically homeless. experiencing a behavioral health crisis, and or disabled, and then isolating these individuals either through hotels and motels or by opening temporary shelter space. In addition, the local Health Dept. now operates a mobile health on wheels RV that routinely visits unsheltered homeless and can provide vaccinations, testing, and treatment for infectious disease.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
1.	shared information related to public health measures and homelessness, and	
	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

			_
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(1) The CoC equipped providers to prevent and limit infectious disease outbreaks by adopting and sharing the masking, testing, and outbreak/quarantine policies created by the community healthcare clinic and the local Health Dept. Using established communication methods such as the CoC LISTSERV, social media, and local government press releases, local health officials routinely updated homeless and community service providers with new and changing guidance around testing, masking, isolation, and vaccine protocol. In addition, the local Health Dept., a CoC member, now operates a mobile Health on Wheels (HOW) RV that will visit all homeless encampments, providing health services and communicating critical public health information. (2) Facilitated communication between public health agencies and homeless service providers was in place before COVID, as the local HD and community healthcare clinic are active members of the CoC. The local Health Department held weekly, virtual meetings during the pandemic to disseminate best practices and answer provider questions, especially for those serving vulnerable homeless clients. Additional partners such as the local county government's emergency operations department and local law enforcement were included in the planning and distribution of supplies and equipment designed to assist street outreach teams and housing providers in preventing and limiting disease outbreaks. As COVID is no longer an immediate and widespread threat, the CoC, through the local Health Dept., remains the hub for all public health communication and has enhanced new and existing partnerships developed during the onset of the pandemic that continue to ensure service providers are equipped to limit and mitigate infectious disease outbreak. This includes ensuring that all homeless service providers are also equipped with supplies and equipment necessary to prevent disease outbreaks.

1D-9.	Centralized or Coordinated Entry System-Assessment Process.
	NOFO Section V.B.1.p.
	Describe in the field below how your CoC's coordinated entry system:
1.	covers 100 percent of your CoC's geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(1) CoC's CE policy embodies a "no wrong door" approach to services by deploying housing stability coordinators and the outreach team to encampments, soup kitchens, food pantries, and libraries across 100% of CoC's geographic area. Homeless diversion and eligibility screening, part one of the two-step CE process, is also available at the Community Action Agency (CAA), DSS, PHA, the Community health clinic, the DV Provider, outpatient behavioral health agencies, and the Area Agency on Aging. Coordinated Entry intake is also available through Street Outreach efforts, meeting clients in encampments, and ensuring that unsheltered individuals across the entire geographic region are screened and placed on eligibility lists for services. With new State funding, increases in staff capacity at the CAA and PHA continue to ensure easy and swift access to services for the entire geographic area. The CAA continues to increase its access and reach throughout the county, adding new community partners each year. (2) Part 2 of the CE process, after a participant is identified as homeless or without diversion options, uses a comprehensive standard assessment tool. This tool, developed as part of the transition to Housing First, with TA from HUD and input from multiple stakeholders, assesses a participant across 10 domains: housing, health, income, substance abuse, mental health, well-being, education, basic needs, financial, and family status. Participants self-determine their status, but if needed, are assisted in completing the assessment. Responses are numerically scored, yielding an objective score. Participants are placed on each project (shelter, RRH, PSH) eligibility list they qualify for. All participants must complete the assessment before entering any shelter or housing programs (funded by the CoC, state or local govt). This ensures clients are objectively prioritized, serving the most in need first. (3) The CE Committee, the CAA, and other homeless service providers regularly review the Needs Assessment Tool. Feedback is also received from those utilizing CE, and from staff using the tool. For example, families with children are not ranking high on the eligibility list for RRH, with mostly single older adults ranking ahead. This has led to increased LOT in shelter for families, who are frustrated with the process. The CoC is seeking TA from HUD to meet the expectation of serving the most vulnerable first, while not having children linger in shelter.

4.	takes steps to reduce burdens on people using coordinated entry.
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and
2.	prioritizes people most in need of assistance;
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
	Describe in the field below how your CoC's coordinated entry system:
	NOFO Section V.B.1.p.
1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.

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(1) Projects for Assistance in Transition from Homelessness (PATH) workers, dedicated Outreach staff and peer support staff take CE directly to encampments and unsheltered locations so those least likely to come in for services, including youth, chronically homeless, and those with severe service needs are assessed and referred to appropriate services and housing options. With increased State funds, the CoC has retained staff to increase the frequency and locations of outreach. (2) CE assesses clients across 10 domains, providing objective ranking of vulnerabilities. Higher scores indicate greater risk and immediate need for shelter, RRH or PSH, and supportive services. Domain areas include health, housing status, income, substance abuse, mental health, well-being, education, basic needs, financial, and family status. Safety protocols for survivors of violence are included in CE. Housing services are also by participant choice and participants can live anywhere in the CoC region. (3) People most in need of assistance receive permanent housing more quickly by being entered onto multiple project eligibility lists (RRH, PSH HCV), ensuring those with the highest barriers have multiple options for perm housing. As housing becomes available, CE schedule intake within 3 days. Participants identify housing preferences, discuss potential barriers, and create plans for stability. PSH staff connect with local landlords (almost 400 landlord partnerships), provide transportation to available units, and advocate to rapidly secure rental units (4) Burdens to CE are reduced by offering multiple options for completing the process Assessments are done in the field, at the CAA's main office, and by phone. CE staff also routinely visit Night-by-night shelter, to encourage participation. The CAA's Outreach Worker seeks out and engages unsheltered homeless, provides one-on-one support, connections to resources, and transportation, and encourages engagement. CE staff work to meet clients where they are, and ultimately help anyone who needs assistance to complete the CE process. The HMIS system utilized by the CoC has also transitioned to an "open system" allowing better sharing of information, resources, and updates, reducing the need for participants to repeat potentially traumatic or difficult information to multiple providers; a best practice for trauma-informed service delivery.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.
	NOFO Section V.B.1.p.
	Describe in the field below how your CoC through its centralized or coordinated entry:
1.	affirmatively markets housing and services provided within the CoC's geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

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 The CoC affirmatively markets housing and services primarily by providing training to all CoC member agencies and their staff on the tenants, policies, and laws around fair housing. MD Legal Aid presents to the CoC each year and will be providing quarterly expungement clinics through the Collaborative Applicant (CA). With annual training from MD Legal Aid, staff are able to ensure persons experiencing homelessness fully understand the rights and remedies available to them, as part of Fair Housing and Civil Rights laws. In addition, the PHA Director and CAA are members of the region's landlord association and communicate the requirements of fair housing to landlords and tenants. The CA receives and investigates any complaints about the CE process. CCA CE staff are trained in available, countywide services, fair housing, and opportunities throughout the geographic area. All housing options under CE are presented to every participant. Housing services are also client-driven, participants may choose how to engage and where to live without an impact on their services. Our 2 step CE process is completed throughout the county, in the field, by partner agencies, in our centrally located office, and over the phone. Outreach staff and CE staff complete the intake wherever th (2) Participants in all shelter and housing programs are informed of their rights as part of the "Participants Rights and Responsibilities Guide" provided to them as they enter shelter and housing projects. Households who transition from homelessness to a HCV are also informed of Fair Housing principals as part of their required voucher briefing held by the PHA. Additionally, Fair Housing posters and signage is posted across CoC organizations serving homeless households. (3) Project participants, both current and prospective in RRH, PSH, and HVC are informed of the procedures available to them to report violations or impediments to fair housing, as contained in the "Participants Rights and Responsibilities Guide" given to them. The manual contains direct contact information for legal resources, such as MD Legal Aid and contacts for HUD. The local County Government (CA) is responsible for certifying the CoC's Fair Housing principles, practices and policies are in line with the State of MD's Consolidated Plan. As a non-entitlement jurisdiction, the CA also participates in State planning activities as the State develops new policies and plans to Affirmatively Further Fair Housing in MD.

1D-	10. Advancing Racial Equity in Homelessness–Conducting Assessment.	
	NOFO Section V.B.1.q.	
.1		I
1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	08/28/2023
		30/20/2020
	0a. Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	30.20.20
	0a. Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of	
	0a. Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	

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- 1. your CoC's process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
- 2. what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

(1) The process for analyzing racial disparities present in the provision and outcomes of assistance begins with the Data Subcommittee of the CoC Board. The committee utilizes the HUD Racial Equity Tool to examine PIT data demographics, as compared to the general population. However, because the PIT data represents only 15% of the homeless households served in a fiscal year, the committee reviews project-level demographic data through the HDX Stella P site and CoC region data through census.gov This allows the committee to gather more representative disaggregated performance measure data and look for historical trends. Annually, the CoC Board takes an in-depth look at disparities, reviews steps taken and develops action plans to continue to make progress in both understanding and improving disparities. (2) Racial disparities identified in the CoC are primarily in the rate of entry into shelter services. In FFY 2022, 18% of all participants in shelter were Black/African American, while representing 4% of the overall population in the CoC region. Black/African American participants are also over-represented in RRH and PSH projects when compared to the overall CoC region population, however, the CoC believes this is not necessarily a negative. If Black/African American participants were not exiting out of shelter into RRH and PSH at the same rate they enter shelter, this would indicate a disparity in service provision and access to housing for a particular race. In addition, a higher percentage (45%) of Black/AA served exit the system to a permanent destination than White participants (29%). Finally, Black/AA participants are less likely to return to homelessness from a perm destination in the first six months. Finally, there is little to no difference in days homeless or the rate at which households return to homeless for White and Black/AA participants. The focus of the CoC Board is on the CoC's prevention activities and how they are accessed across diverse groups. 12.6% of Black/African American residents in the CoC region are in poverty, compared to just 4.1% of White residents. A higher % of Black/AA accessing shelter could be tied to a lack of resources to prevent homelessness as compared to White residents.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	
	Solant year no in the chart helpy to indicate the strategies your CoC is using to address any	1

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes

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The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
Other:(limit 500 characters)	
	different races and ethnicities in the homelessness sector. The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness. The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity. The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness. The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system. The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The steps the CoC has taken are beginning a deep dive into the demographics of those seeking assistance in Diversion and Prevention; because of the racial disparities seen in those who are identified as literally homeless, both in the unsheltered population and in those utilizing shelter services. Annually, the CoC's CAA receives over 1,300 inquiries for assistance with impending homelessness and/or prevention of homelessness (security deposits and rental arrearages). Last year, of the 603 who accessed the CAA's screening line for homelessness assistance, 328 never came to the agency for help. It is important to understand who these individuals are and ensure no systemic issues are preventing them from continuing to pursue assistance. In the same way, the demographics of the 737 who received homelessness prevention services is also important. The CoC needs to understand if those receiving HP overwhelmingly represent a particular race. Outreach efforts may not be targeted to or effective for those who are ultimately overrepresented in emergency shelters. The CoC potentially could reduce the racial disparities seen in shelter and also reduce the number of households experiencing homelessness by ensuring that prevention services are targeted, equitable, and effective across all racial demographics. The CoC's upcoming strategic planning session is focused on a deep dive into the demographics of those requesting assistance before homelessness occurs. The CAA is in the process of redesigning the screening line process, to help streamline services and increase focus on prevention services, specifically employment and financial education support. CAA has also begun to track all denials of service to ensure data evaluation is inclusive, transparent, and accurate. The CoC anticipates recruiting new faith-based and grassroots organizations into Diversion efforts with the goal of reducing disparities primarily seen in emergency shelter.

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1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.
NOFO Section V.B.1.q.	
	Describe in the field below:
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC uses.

(1) The measures the CoC has in place to track progress on preventing and eliminating disparities include an annual review by the CoC Board of all homelessness services, from emergency shelter through exits to permanent housing. The CoC also measures demographic data for each project versus the demographics of the CoC region. In addition, the CoC looks at additional social determinants, such as poverty, employment, access to healthcare, and housing affordability, disaggregated by race. Although living in poverty does not equal or even predict homelessness, a lack of resources to obtain basic necessities can make households more vulnerable, especially when living in a community with high housing and rental prices. Sources and measurable data used to track progress include Census data, the United Way Alice Report and disaggregated System Performance Measures. (2) The CoC uses the HUD Race Equity Tool and the Stella P dashboard available through HUD HDX 2.0. This tool is the best way to disaggregate race, gender, subpopulations, and household composition data, providing the most comprehensive look at the CoC's homelessness systems gaps and progress, and serves as the most useful tool in annual CoC Board strategic planning efforts. In addition, the CE's Needs Assessment Tool, which objectively rates participants' needs for services also measures participant progress. This objective tool helps ensure participants are served objectively solely based on need.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking–CoC's Outreach Efforts.	
	NOFO Section V.B.1.r.	

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

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Those experiencing homelessness or who were formally homeless are encouraged to participate in the work of the CoC including leadership and decision-making roles. Direct support staff, RRH, and PSH case managers regularly inform participants about the CoC and encourage involvement. Staff offers to accompany and provide transportation to those with lived experience to CoC events, as large meetings can be overwhelming, and participants have in the past reported feeling overwhelmed and out of place, or not sure how to speak up. Even if individuals choose not to attend the CoC, information shared at the meeting is relayed to shelter residents, RRH, and PSH participants and to those in encampments to gather feedback regarding the delivery of homeless services. The CoC meetings are also held in a hybrid format, allowing anyone to attend in person or virtually. A dedicated outreach worker also connects with new agencies, local towns within the region, and local enforcement increasing awareness and visibility of the CoC, which has led to more engagement from those with lived experience. Furthermore, the CoC, using Housing Stability Coordinators embedded in local government and the CAA, is engaged in routine and regularly scheduled visits to all shelters, connecting with participants, asking for genuine feedback, and encouraging continued participation in the process. In addition, the CoC supports a Youth Action Board and aids the YAB in recruiting new members and soliciting feedback on the youth perspective of homeless services. Finally, the CAA and local community health clinic employ individuals with past homelessness who can draw on their experiences to provide concrete feedback on policies and agency decisions.

1D-11a. Active CoC Participation of Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

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

1D-11b. Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.

NOFO Section V.B.1.r.

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

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(limit 2,500 characters)

Examples of professional development and employment opportunities can be seen in the support the Youth Action Board receives from several CoC youthserving agencies. The YAB is provided with state-funded living wage stipends (\$21 per hour) for the Executive Team members, and per diem support for youth who attend meetings. In addition, the YAB and adult mentors participated in two professional development experiences in 2022, attending the National Network for Youth conference in Washington DC, and the State of Maryland's Youth Symposium. One member of the YAB Executive Team was hired as a transitional-aged youth program specialist by the agency providing meeting space, mentorship, and financial management for the YAB. Finally, YAB members participated in the development of a video submission for the Youth Homelessness Demonstration Project. Adults with lived experience are often hired as Peer Support staff through the Local Health Dept and local Community Health Clinic. These peers have the opportunity to participate in ongoing peer support training and certification, as the State of Maryland is embedding more structure and progressively increasing the requirements and pay for peer support specialists. The CAA has also removed the need for college degrees in all case management positions, specifically valuing lived experience as equivalent to formal education. And, as always, individuals with lived experience can participate in the CoC's array of workforce development supports, through both the CAA and the American Jobs Center (WIOA), both of which provide soft skills, interviewing, and ongoing job support. In partnership with the CAA, the local community college also offers educational and vocational certification programs for homeless and formerly homeless individuals.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.
	NOFO Section V.B.1.r.
	Describe in the field below:
1.	how your CoC routinely gathers feedback from people experiencing homelessness;
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

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 The CoC routinely gathers feedback from people receiving homelessness assistance through the work of the outreach team, shelter staff, & Housing Stability Coordinators who work across the system. Also, as part of the ranking process for the CoC, PSH participants are interviewed to gather feedback on the effectiveness of PSH. Daily engagement by shelter staff who have built trusting relationships with participants helps solicit genuine feedback on participants' points of view. This approach resulted in a formerly homeless individual who received shelter services, and homeless veteran services and now has a VASH Voucher, a car, and a job is an active member of the CoC and sits on the CoC Board. This individual credits the patience staff showed in allowing trust to be built at his pace. 2) PSH case managers and Housing Stability Coordinators conduct annual in-person interviews to solicit feedback from participants on their experiences accessing housing projects. CE participants receive a satisfaction survey as part of their transition from CE into shelter or housing. Feedback is then aggregated to provide a comprehensive look at the system through the lens of lived experience. The CoC is also distributing and encouraging participation in a statewide survey of shelter residents. 3) The primary step the CoC has taken in addressing challenges is simply to listen. Many participants, either currently or formerly homeless, may report negative experiences or perceive their experiences in a way that staff and agencies do not understand or even agree with. It is easy for the CoC to want to defend itself or counter negative perceptions with its' good intentions. For example, one currently active person with lived experience encouraged case managers not to disappear when homeless persons enter incarceration, citing the importance of maintaining positive relationships with staff. Initially, responses included how COVID restrictions and jail policies limited access for case managers, rather than acknowledging the impact of inconsistent staff engagement. However, through continuous dialogue and the willingness of this individual to speak genuinely, the CoC now listens without judgment, creating opportunities for building trust and rapport. The suggestion for making every effort to maintain contact and engagement with individuals who may move in and out of the system is now incorporated into system performance measure improvement strategies.

1D-12.	Increasing Affordable Housing Supply.
	NOFO Section V.B.1.t.
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:
1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

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(1) The CoC's CA is the local county government, responsible for creating the county's Master Plan for zoning, residential and commercial development, and coordinating with the towns around municipal growth areas. The County's Director of Planning attends both CoC meetings and is a member of the ad hoc affordable housing committee of the CoC. Feedback gathered will incorporated into the next Master Plan update. In addition, the State of Maryland, through its commitment to AFFH, has mandated the inclusion of affordable options for both workforce housing and very low-income households for any new Master Plan adopted after January 2023. Carroll Government, the CA for the CoC, has hired a consultant to complete a Housing Study to assist in meeting this State requirement as well as identify opportunities to increase housing affordability for first-time homeowners, workforce housing, and housing for low-income residents in the CoC geographic area. (2) The CoC's Collaborative applicant, the local county government, is responsible for comprehensive zoning and land use regulation. One barrier outside the control of the CoC is the state-regulated water allocations available for commercial or residential development within the CoC's largest municipality - where affordable housing development would be most practical. County government has recently partnered with this municipality, allocating a portion of its county State and Local Fiscal Recovery Funds, to support the construction of a new water reuse system that will increase available water allocations for future development. In addition, in more rural areas where landowners may have space for tiny homes or accessory dwelling units, state environmental regulations currently prohibit these possible solutions to increasing affordable housing stock. As a primarily rural CoC, this has a high impact on the County's efforts to increase affordable housing, but efforts are underway to discuss solutions to this barrier across the state. The County (CA) is also an active member of the Baltimore Metropolitan Council and its efforts.

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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11	E-1. Web Posting of Your CoC's Local Competition Deadline-Advance Public Notice.	
	NOFO Section V.B.2.a. and 2.g.	
	You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
1.	Enter your CoC's local competition submission deadline date for New Project applicants to submit their project applications to your CoC–meaning the date your CoC published the deadline.	08/25/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC's local competition—meaning the date your CoC published the deadline.	08/08/2023
	attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	
	You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.	
	Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
	At least 20 percent of the total points were based on system performance criteria for the project	Yes

4. Provided points for projects that addressed specific severe barriers to housing and services.

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Yes

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5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6. Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those overrepresented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.		Yes
1E-2a. Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.		
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
		-
		1

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

1.	What were the maximum number of points available for the renewal project form(s)?	100
2.	How many renewal projects did your CoC submit?	2
3.	What renewal project type did most applicants use?	Tie

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.
	NOFO Section V.B.2.d.
	Describe in the field below:
1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

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(1) The CoC completes formal monitoring annually and monitors project performance throughout the year via HMIS by reviewing utilization, wait lists and participants including when clients were placed on the eligibility list and how quickly they were housed. Monitoring tracks clients' Needs Assessment Scores generated during Coordinated Entry to ensure those most in need are served first, as well as clients' chronic status as all CoC projects are PSH 100% dedicated to chronically homeless. The CoC Board monitors system performance measures – retaining permanent housing and exits to other permanent housing including utilization of the CoC's Move on Strategy. (2) The COC's HMIS lead monitors when clients are placed on the eligibility list and then how quickly they are housed. (3) All CoC projects are PSH 100% dedicated to chronically homeless, so all clients present with a mental or physical health disability and have high barriers to housing success. The CoC uses Housing Stability case managers (added during the pandemic with local and state grants) to reduce barriers to success by assisting with housing search, landlord relationships and supports to maintain housing. Clients are offered classes in Tenant Rights & Responsibilities, Mock Interviews, How to be a Good Tenant, and Coaching. (4) The CoC ranking tool awards renewal, expansion and new PSH projects up to 20 points based on the % of clients served who were chronically homeless. To earn maximum points for these criteria 95% of clients must have a status as chronic

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

(limit 2,500 characters)

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 The CoC Board and its funded partners strive to promote an inclusive board membership and employee base that is reflective of those served by the CoC's homeless services. The CoC Board includes the PHA, the Community Action Agency, the Department of Social Services, Aging and Disability Services, Veteran's Services, DV Providers, Workforce Development, Health Care Services and persons with lived experience. All CoC members had an opportunity to review and comment on the proposed rating and ranking tool and approved the final version used to rank this year's projects. 2) The CoC had 1 PSH renewal, I SSO – CE renewal, 1 Bonus PSH and 1 RRH DV bonus project to rank in this round of funding; all PSH projects prioritized chronically homeless. The CoC tool is driven by the objective criteria contained in the HUD ranking tool including project-level data on # of Days to Housing Placement, Exits to Permanent Housing, Returns to Homeless, Increased Income, Chronic Status, CE participation, and use of Housing First. Project monitoring results also are a factor in scoring. The CoC ranking tool also includes all the Equity categories in the HUD Tool including Agency Leadership, Governance and Policies and Program Participant Outcomes. Together these Equity criteria were worth 35 points and agencies requesting funding were required to submit a summary of their equity efforts with their board and staff. 3) Data around racial disparities and equity was reviewed by the CoC. African American populations are over-represented at entry into the homeless system representing 18% of all entries into CE in FY22 yet are only 4% of the overall population in the CoC region. Although over-represented upon entry, positive exits, including to Permanent Housing destinations, are the same for both persons of color and white participants, indicating no disparities in the ranked and rated projects' track record of serving persons of different races. In addition to using the Equity criteria to rank the projects, the CoC Board is reviewing the Equity Factors with awarded agencies as the CoC strives to better represent the clients we are devoted to serving. Since persons of color enter the CoC's homeless system at higher rates but have positive outcomes when served by the homeless system. the focus of the CoC is turning to prevention. With a new grant award from the state, the CoC Board is guiding efforts to prevent homelessness among all our citizens.

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

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(limit 2,500 characters)

(1) As part of the Governance Charter, the CoC has a written reallocation policy. The CoC Board reviews performance of all renewal projects annually. including a performance evaluation based on Grant spend-down, participants served, HMIS data quality, APRs, Project Applications, and other HUD tools. Projects are also evaluated based on their contribution to HUD Policy Priorities and the System Performance Measures. The Collaborative Applicant monitors all projects annually and presents fiscal, management & capacity issues to the CoC Board. Based on this multifaceted performance review, the CoC Board can recommend corrective action for a grantee, and if there are continuing performance issues after 1-year, involuntary reallocation. Voluntary reallocations are considered with priority given to plans that create new permanent supportive housing. (2) The CoC had 2 renewal projects to evaluate this round – 1 PSH project and 1 SSO – Coordinated Entry Project. Project performance was strong for both and so neither project was recommended for reallocation (3) The CoC Board did not reallocate any projects in this round (4) The CoC evaluated performance and did not have a low performing project to reallocate.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	
	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	Yes
1	E-5. Projects Rejected/Reduced-Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	
		-
1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
4. If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.		
1E	-5a. Projects Accepted-Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	1

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rani	er the date your CoC notified project applicants that their project applications were accepted and ked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified slicants on various dates, enter the latest date of any notification. For example, if you notified slicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/11/2023
	T	T
1E-5b.		
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	
1. F 2. P 3. P 4. F	es your attachment include: Project Names; Project Scores; Project accepted or rejected status; Project Rank–if accepted; Requested Funding Amounts; and Reallocated funds.	Yes
1E-5c.	Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting-CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	
part 1. th	er the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or the CoC Application; and	09/12/2023
	Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
2. F	1E-5d. Notification to Community Members and Key	
2. F		
2.	1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved	
Z. F	1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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2A-1.	HMIS Vendor.	
	Not Scored–For Information Only	
		_
Ente	er the name of the HMIS Vendor your CoC is currently using.	Well Sky
		-
24.2	HMIS Implementation Coverage Area.	<u> </u>
LIVE.	Not Scored—For Information Only	
	Not Scored—For information Only	
Sele	ect from dropdown menu your CoC's HMIS coverage area.	Single CoC
2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	
Ente	er the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
2A-4.	Comparable Database for DV Providers–CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	
		_
	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database–compliant with the FY 2022 HMIS Data Standards; and	
		-

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3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

(1) Data for domestic violence survivors is collected utilizing a comparable database, Net Smart MyEvolve, while preserving the anonymity of survivors and following the protections put in place by The Violence Against Women Act (VAWA). The comparable database includes all data elements available in HMIS. The HMIS Lead has worked with the CoC's Domestic Violence provider to develop the data elements that are comparable with the HMIS data standards and that are reported on other CoC-funded projects. Monthly reports are submitted to the CoC Co-chair and HMIS lead, including the number of domestic violence survivors served and residing in the Domestic Violence Safe House, as well as the demographics of those served. All data reported is deidentified aggregate to protect the anonymity of survivors. Semi-annual system performance measure reports are also submitted to the CoC Board. The CoC Board reviews this aggregate data and reports at large community meetings held by the CoC. The CoC examines the aggregate data in order to determine the size of the population affected by domestic violence and homelessness. (2) Yes, the CoC is compliant with the 2022 HMIS Data Standards.

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

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	97	18	79	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	0	0	0	
4. Rapid Re-Housing (RRH) beds	43	0	43	100.00%
5. Permanent Supportive Housing (PSH) beds	54	0	54	100.00%
6. Other Permanent Housing (OPH) beds	0	0	0	

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.
	NOFO Section V.B.3.c.
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

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(limit 2,500 characters)

N/A

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
p.m. Lot:	

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and

(limit 2,500 characters)

FY2023 CoC Application

- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC conducted its 2023 PIT count.	01/24/2023
2B-2.	PIT Count Data-HDX Submission Date.	
	NOFO Section V.B.4.a	
Ente	er the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	
'		
	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

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COC_REG_2023 204674

(1) The planning process for the 2023 PIT count was informed by the work of the local Youth Reach MD collaborative. Since 2017, the State of MD has conducted a bi-annual count of unaccompanied homeless youth, with each CoC forming a dedicated homeless youth subcommittee. The committee, led the by local board for children, youth, and families, engages stakeholders including the local school system, the local community college, the Dept. of Housing's Housing Stability Coordinators, the local health department, a private university in the CoC region, and youth service providers in order to locate, count, and offer services to homeless youth. The CoC has a long-standing MOU with the State of Maryland's Department of Housing and Community Development to participate in this effort and has been successful in both locating and engaging previously underserved homeless youth. (2) Although the CoC conducts a biannual youth count, youth are also counted during the CoC's PIT Count. Homeless youth identified through Youth Reach and through traditional outreach efforts are asked to assist with the PIT count. In addition, the CoC supports a Youth Action Board who assists in identifying areas throughout the CoC where unaccompanied youth can be found. Stipends are provided to all youth who participate. (3) The CoC makes every effort to include a wide array of counters for each PIT Count. This year the CoC had youth inform the PIT Count committee, but no youth currently experiencing homelessness were used as official counters on the day of the PIT. Youth identified during the count were asked to assist in locating any additional unsheltered youth.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.
	NOFO Section V.B.5.a and V.B.7.c.
	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and
3.	describe how the changes affected your CoC's PIT count results; or
4.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2023.

(limit 2,500 characters)

1) There was no change in the CoC's sheltered count which is generated from HMIS. 2) Changes in the unsheltered count included more outreach teams, participation by local elected officials, starting the county earlier in the morning on the day of the count, visiting new locations such as large retail store parking lots, and utilizing technology from the local government's GIS dept to map in real-time the locations of the unsheltered locations. (3) The 2023 PIT Count efforts resulted in identifying an additional 37 individuals from the last unsheltered count in 2021. The CoC acknowledges that the 2021 count was impacted by COVID-19, as no outside volunteers were utilized to assist in locating unsheltered individuals. The overall 2023 PIT count results are in line with the last pre-COVID count in January 2020, which resulted in the identification of 130 individuals. Significant differences were not noted in subpopulation percentages, such as chronic, veterans, households with children, and youth aged 18-24. (4) See above

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2C. System Performance

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;

 - 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

(limit 2,500 characters)

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(1) Risk factors impacting first-time homelessness include the cost of and limited selection of rental units combined with a high cost of living in the CoC region. Recently, even with the increases in FMR, units that were accessible to low-income households are renting to private tenants well above FMR. The % of households spending 30% or more of their income on rent in the region is 28.4%. When an affordable unit is lost it is extremely difficult for the tenants to find another apartment. In addition, COC uses quantitative data on the #of people seeking assistance for eviction prevention, security deposit assistance. and utility shut-offs (700+ in FY 2023). These factors create a risk of both losing housing and securing new affordable units. Finally, Outreach Team and local hospital data indicate that the CoC has an increasing number of individuals over 60, many with SUD who report first-time homelessness. The CoC is currently addressing this alarming trend. (2) CoC collaborates with foundations, faith-based charities, braiding state, federal funds to leverage \$300,000 for prevention and diversion options. Services are accessed directly via walk-in, phone, email, or community partner referral. The Outreach team, through regularly scheduled visits to soup kitchens and food pantries, connects with at-risk households. Everyone at-risk participates in a screening process, with diversion and connections to resources as the goal, . clearing rental arrearages, and advocating with and on behalf of tenants. Through ERAP the court shares upcoming eviction hearings cases with Housing Stability staff who contact those facing eviction, using ERAP or diversion funds to prevent homelessness. As noted, above, the trend of older residents experiencing firsttime homelessness is alarming. As this issue is new, the CoC is strategizing with the local hospital, EMS, and law enforcement to develop a strategy to prevent discharges into homelessness. These individuals tend to have complex issues that are challenging for the shelter system. Finally, the CoC has identified approximately 30% of those counted as first-time homeless have in fact been homeless beyond the two years prior to the reporting period. The CoC is interviewing these households to understand what barriers they encountered resulting in additional episodes of homelessness. (3) CoC Board, is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing FTH.

20-14	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	
	Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:	
1	natural disasters?	No
2	having recently arrived in your CoCs' geographic area?	No
2C-2	Length of Time Homeless–CoC's Strategy to Reduce.	
2C-2	Length of Time Homeless–CoC's Strategy to Reduce. NOFO Section V.B.5.c.	
2C-2		

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- 2. describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
- 3. provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

(1) Although a one-day increase is noted this year, the CoC has significantly decreased LOT homeless over the last several years. The strategy is a collaborative system comprised of assessment and intake through coordinated entry (CE), housing first/low-barrier projects, new case management positions, and a 25 Voucher Move-On Strategy each year to transition PSH households to vouchers, an upstream strategy to decrease LOT homeless. The CoC also dedicates all PSH to chronically homeless individuals, providing a direct pathway to stable long-term housing for those with high service needs and often years of homelessness. The CoC also benefits from two law enforcement agencies implementing LEAD programs, designed to break the cycle of incarceration and homelessness for minor crimes that are often a result SUD and mental illness. Through CE, the Street Outreach team can also place unsheltered households directly into housing. Finally, the CoC's community health Clinic, housing stability services and the Community Action Agency collaborate to provide coordinated inter-agency case management for homeless participants with severe physical and behavioral health service needs, who often cycle in and out of hospitals, treatment centers, and homelessness. This wrap-around approach has proven effective in both securing and maintaining housing. With an increasingly competitive rental market, it is taking much longer to house those with the most barriers. (2) CoC identifies LOT through HMIS and the standardized CE assessment, which objectively assigns a vulnerability factor that includes the length of time a household has experienced homelessness. CE staff work with households to gather the necessary documents to support time homeless and or allow participants, when necessary, to self-certify their LOT homeless. In the event two participants have the same vulnerability score, the household with a longer LOT would be prioritized. These households are prioritized for entry into shelter, RRH, and PSH or even directly into a HCV. (3) The CoC Board is responsible for overseeing the CoC's strategy to reduce the LOT individuals and families who remain homeless.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing–CoC's Strategy
	NOFO Section V.B.5.d.
	In the field below:
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,50	characters)
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 The CoC's strategy to increase the rate individuals and families exit to or retain permanent housing (PH) destinations begins with the Housing First approach, Coordinated Entry prioritization, and blending of state and federal funds to create staffing models that quickly move households through the homelessness response system and are there to provide continued support if requested after housing is secured. CE objectively prioritizes all individuals and families from shelter or street homelessness for immediate entry into permanent housing projects. Housing Stability Coordinators (HSC) and the Community Action Agency (CAA) case management team work to maintain strong rapport with landlords in order to continue increasing the number of rental units available, The CAA leveraged the last of ESG-CV2 and ERAP funds with private and faith-based support to provide security deposits, first and last months' rent, and landlord incentives to also expedite entries into perm housing. The CAA has continued this practice with PSH, encouraging lanlords to quickly lease up and accept high barrier clients. Housing Stability coordinators immediately enroll all eligible clients in the PHA's HCV program which supports the CoC Move-On Strategy with a set aside for homeless households and with HCVs available through Coordinated Entry for chronic households eligible for PSH. (2) The CoC's strategy to increase the rate at which individuals and families in PH retain their PH or exit to PH destinations centers around housing stability services, through a person-centered approach tailored to unique barriers for each household. As PSH clients transition to Move on Vouchers, they receive dual case management services to ensure a smooth transition and long-term success. Housing stability services include connection to mainstream benefits, access to SOAR, landlord connections, conflict resolution, job skills training with American Job Center, financial education, tenant education, and supportive services such as peer recovery support staff and integrated case management with healthcare organizations. The CoC consistently retains 90% of clients in PH. (3) The CoC Board is responsible for overseeing the strategy to increase rates of exits or retentions of permanent housing.

2C-4.	Returns to Homelessness–CoC's Strategy to Reduce Rate.
	NOFO Section V.B.5.e.
	In the field below:
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

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(1)The strategy to identify households returning to homelessness includes gathering data from any household that presents as homeless to understand their prior living situation (first-time homeless versus returning to homelessness) HMIS and Stella P data also provide a detailed look at overall returns but also returns by project and exit destination, such as returns from shelter vs returns from RRH. Disaggregated data also shows which subpopulations are most at risk for return. Finally, HMIS and Stella data indicate which timeframe has the greatest risk for returns. The CoC knows this: HHs who exit from shelter to a permanent destination are most at risk of returning. Secondly, HHs, regardless of which project they exited from, are most at risk of returning in the first 12 months after their exit. The most common factors identified include recurring substance use disorder, lack of reliable income, high rent burdens, transportation for employment, and affordable childcare. (2) The strategy to reduce additional returns to homelessness includes increased state funds for staff dedicated to households in perm. dest. that typically do not have ongoing supportive services, such as renting with no subsidy or residing with family. This position works to ensure connections to employment, benefits such as Energy Assistance & SNAP, access to health & behavioral health resources, and utilize peer recovery support. Each household receives an individualized plan, based on current needs and potential future barriers, that provides layered support from multiple agencies working in partnership. For households residing in RRH or PSH, interagency case management teams provide initial intensive services, designed to taper off as the household demonstrates more stability. Assessments are conducted at 30, 60, and 90 days to ensure progress towards goals. Finally, the CoC utilized emergency community resource funding to assist households that are at risk of eviction and ultimately homelessness. This strategy involves a partnership with the local court system to share information on households involved in the formal eviction process. In addition to financial assistance to remove rental arrears, housing stability staff are engaged with each household to assess and remove barriers leading to potential eviction and homelessness. (3) CoC Board is responsible for overseeing the CoC's strategy to reduce the rate at which individuals and persons in families return to homelessness.

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

(limit 2,500 characters)

(1) The CoC's strategy to increase employment income is to maintain strong partnerships with Community Action Agency (CAA), AJC(WIOA), the Dept. Of Rehabilitation Services (DORS), local community college, and SNAP Employment and Training Program. CAA has begun embedding workforce opportunities at the earliest entry points for households when calling the screening line for assistance with security deposits and rental arrearages. The CAA program provides job training and refers to the AJC (WIOA) for additional skill assessments, job readiness evaluations, online program and software assessments, interview preparation, internship and training opportunities, job fairs, and resume writing. The Public Behavioral system also has a supported employment program for individuals who are homeless and hav e severe and persistent mental illness. The AJC (WIOA) has received significant increases in funding due to COVID to enhance and increase programs over the next 3 years with an emphasis on those most impacted by COVID including the homeless. CoC-funded programs use motivational interviewing & partnerships to encourage clients to develop soft skills and prepare for employment. The CoC monitors participant income growth via HMIS data. (2) CAA job training program is a DORS Accredited Vendor, assisting individuals with disabilities to secure employment, and is the CoC's only SNAP Employment and Training Provider. The CAA job training program has a Job Developer who assists those with significant barriers to employment by developing relationships with local employers to provide employment opportunities. Fully integrated with CAA shelter/housing services, the job training program can rapidly secure employment for unemployed homeless clients and provide ongoing job support to ensure continued employment. The CAA's job training program also provides certifications from the local community college. All AJC (WIOA) partners (CAA, DSS, and DORS) meet quarterly to collaborate and use a universal referral to streamline services and ensure maximum participation. The CAA is also an active member of the region's Workforce Development Board and youth workforce subcommittee. (3) The CoC Board, comprised of community leaders and stakeholders, is responsible for overseeing the CoC's strategy to increase job and income growth from employment

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

(limit 2,500 characters)

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(1) All CoC households complete a Needs Assessment during CE that assesses for income and food insecurities. These results identify needed noncash benefits (i.e., SSI SSDI, TDAP, TANF, SNAP, WIC, etc.) Outreach staff immediately connect homeless individuals to mainstream resources, including competing applications and transportation to the social service office. Housing stability staff assist participants in accessing non-cash benefits by preparing complex applications, providing transportation to appointments, and assisting participants in collecting required documents Additionally, staff throughout several organizations are trained to complete Social Security applications in the SSI/SSDI, Outreach, Access, and Recovery (SOAR) model to expedite the process of receiving social security benefits. The CoC continues to increase those trained in the SOAR model, decreasing wait times for non-employment income. The Local Department of Social Services, as a member of the CoC Board conducts training and provides access to benefits at their office Community Action Agency (CAA) shelter and housing staff assess benefit eligibility during service plan meetings and provide ongoing support so that benefits are not lost. The CAA's job training program is the CoC's SNAP Employment & Training Program, participants can start to immediately fulfill their work program requirements, expediting food stamps and cash assistance. CoC Board Members also include the local health department and the Community Health Center who work closely with participants to diagnose and document disabilities, a necessary step in accessing SSDI benefits. It is also important to note that all participants in PSH are disabled, with the majority already receiving SSDI upon entry and are unable to earn additional cash and non-cash employment income. (2) The CoC Board, comprised of community leaders and stakeholders, is responsible for overseeing the CoC's strategy to increase non-employment income.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;

- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

		T
3.	A-1. New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	
	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized	Yes
	housing units which are not funded through the CoC or ÉSG Programs to help individuals and families experiencing homelessness?	
	A O N	_
3.	A-2. New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	
		l.,
	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
3A-3.	Leveraging Housing/Healthcare Resources-List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	
	If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.	

Project Name	Project Type	Rank Number	Leverage Type
PHPWD Bonus FFY23	PH-PSH	3	Both
FY2023 DV Bonus	PH-RRH	4	Both

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3A-3. List of Projects.

1. What is the name of the new project? PHPWD Bonus FFY23

2. Enter the Unique Entity Identifier (UEI): JQXVR7CGZ887

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your 3 CoC's Priority Listing:

5. Select the type of leverage: Both

3A-3. List of Projects.

1. What is the name of the new project? FY2023 DV Bonus

2. Enter the Unique Entity Identifier (UEI): RA72VPNF3ND3

3. Select the new project type: PH-RRH

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

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
 24 CFR part 578;
 FY 2023 CoC Application Navigational Guide;
 Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
	our CoC requesting funding for any new project application requesting \$200,000 or more in funding nousing rehabilitation or new construction?	No
3B-2.	Rehabilitation/New Construction Costs-New Projects.	
	NOFO Section V.B.1.s.	
	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:	
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and	
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.	

(limit 2,500 characters)

NA

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
		-
proj	our CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component ects to serve families with children or youth experiencing homelessness as defined by other leral statutes?	No
3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	
		•
	You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.	
	If you answered yes to question 3C-1, describe in the field below:	
1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and	
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.	

(limit 2,500 characters)

NA

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

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

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;- FY 2023 CoC Application Navigational Guide;

NOFO Section I.B.3.I.(1)(c)

3. Unmet Need:

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1. Enter the number of survivors that need housing or services:

2. Enter the number of survivors your CoC is currently serving:

- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4	A-1. New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	
	Did your CoC submit one or more new project applications for DV Bonus Funding?	
4.4	-1a. DV Bonus Project Types.	
	NOFO Section I.B.3.I.	
	Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC	
	included in its FY 2023 Priority Listing.	
		_
	Project Type	
1	SSO Coordinated Entry	No
••		Yes

Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.

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

(limit 2,500 characters)

 Element 1 is the number of individuals served annually in the CoC's DV Safe House that identify as an individual or child of a parent that is fleeing a domestic or interpersonal violent relationship. Element 2 is calculated using data from the project's sub recipient's comparable database on placement in housing for survivors at exit from the CoC DV Safe House. The comparable database, Net Smart MyEvolve, preserves anonymity of survivors and follows the protections put in place by The Violence Against Women Act (VAWA). The comparable database includes all data elements available in HMIS and aggregate data is reported to the CoC. 2) The project's sub recipient, Springboard Community Services, is the primary provider of services for DV survivors in the CoC's geographic area and operates the only DV Safe House in the CoC. The estimate of need is based on the comparable database maintained by this provider.3) Barriers to housing for DV survivors include a limited number of affordable units in the CoC geographic area, limited RRH and PSH slots available through the CoC. long waitlists for HCV and the complexity and time needed to gain job skills for occupations that provide a living wage in a high cost state.

	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)	

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

	information once, regardless of now many DV Bonus projects that applicant is applying for.	
Applicant Name		
Board of Carroll		

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

4A-3b. Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

NOFO Section II.B.11.e.(1)(d)

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	Board of Carroll County Commissioners
2.	Project Name	FY2023 DV Bonus
3.	Project Rank on the Priority Listing	4
4.	Unique Entity Identifier (UEI)	RA72VPNF3ND3
5.	Amount Requested	\$50,000
6.	Rate of Housing Placement of DV Survivors–Percentage	62%
7.	Rate of Housing Retention of DV Survivors–Percentage	60%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

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

1. how the project applicant calculated both rates;

2. whether the rates accounts for exits to safe housing destinations; and

the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1) The rate of housing placement of DV survivors was calculated by the project applicant in partnership with the sub recipient by comparing the number of clients who discharged from the DV safe house and exited to safe housing to the number of clients who were unsuccessfully discharged from the safe house. The rate for housing retention is based on similar CoC DV Bonus projects operated by the sub recipient in other Maryland jurisdictions. 2) Unsuccessful discharges are inclusive of individuals who returned to their abusers, transitioned to homeless shelters, and/or discharged due to confidentiality violations. 3) This data is maintained in the sub recipient's comparable database Net Smart MyEvolve, while preserving anonymity of survivors and following the protections put in place by The Violence Against Women Act (VAWA). The comparable database includes all data elements available in HMIS and aggregate data is reported to the CoC.

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4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(d)
	Describe in the field below how the project applicant:
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors–you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and
5.	moved clients from assisted housing to housing they could sustain–address housing stability after the housing subsidy ends.

(limit 2,500 characters)

1) Upon entry into the DV Safe House, the sub-recipient's case manager completes a needs assessment with each client. Housing is always the priority need that is addressed as are any barriers the clients face accessing and maintaining safe, permanent, stable, and affordable housing. 2) All DV Safe House clients are immediately referred to the CoC's Coordinated Entry provider for intake that prioritizing clients based on their victimization from domestic or interpersonal violence as well as health, employment, SUD, mental health, education, credit history, and dependents. The CoC's Coordinated Entry assessment results in placement on waitlists for CoC-wide RRH, PSH and shelter. Clients are also referred to the CoC's 2 housing authorities for application to and placement on Housing Choice Voucher wait lists and access to VASH and FUP vouchers. The project's applicant operates the CoC's largest Housing Authority and has committed vouchers to this project. 3) Case managers work with all clients to use the 60 days they are housed in the DV Safe House to determine the need for supportive services. Both budgeting and financial planning are included to assure all permanent housing options are within the client's set budget, with the goals of transitioning to a realistic, sustainable option. Increasing income – both cash and non-cash is a priority. 4) Clients are connected to a variety of supportive services that focus on safety and permanency. Factors such as transportation, childcare, employment, and education are addressed with a plan in place once they exit the DV Safe House to assure the client's continued success. The sub recipient, Springboard Community Services, has robust partnerships throughout the CoC geographic area providing referrals and warm handoffs for all supportive services that survivors may need. 5) Case management services, through the project's sub recipient, will follow clients after exit from the Safe House for an indefinite amount of time. Services are based on the client's needs and their willingness to accept services and will support continued success in safe housing. Case managers work with clients during their placement to identify how they can maintain housing by addressing all identified barriers. Permanent housing resources will be accessed based on client eligibility including Housing Choice Vouchers, CoC Permanent Supportive Housing, or housing without subsidy with case management that is not time limited.

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4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(d)
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

 During intake, the initial inquiry focuses on safety, using the MD Network Against Domestic Violence Safety Flow Chart, staff ensure a client is using a safe process and all immediate safety concerns are addressed with safety planning that minimizes potential coercion & increases the likelihood clients are invested in planning for their safe departure. Using the Lethality Assessment Protocol (LAP) the level of risk is assessed & factored into services and sheltering. A client relationship can develop and be productive only when there is strong sense of responsibility and mutual trust between clients and the agency. 2) The process includes a strong focus what housing will be safe and how the placement can be made in a safe manner. Detailed client discussions focus on current supports and safety measures as well as additional measures that will need to be taken. Safety plans are established upon intake, revised during program services and again at exit from services. Individualized safety plans are developed based on the client's schedule, work environment, children's schedule and access to assistance. 3) Essential to this relationship is the understanding that the information provided by the client will be confidential. All sub recipient personnel, including students and volunteers, must observe the confidential nature of all information obtained in the course of their work. The agency's policy on confidentiality extends to computerized files regarding clients, staff, and finances. The agency conforms to all HIPAA requirements. Information about the client may not be shared without the expressed written consent of the client. Blank consent (real, implied, or assumed) is never acceptable for either gathering or giving information whether factual or evaluative. Information from case records and related files may not be transferred to another agency or individual without the written consent of the client. 4) All staff are trained on these strict confidentiality standards within the first week via in-service training & reviewed annually or when changes are implemented. The project applicant operates the CoC's HMIS and has strong confidentiality policy & training in place. 5) Keeping sites undisclosed, being proactive in client safety planning and having frequent and planned check-ins are critical. Multiple step security entrance features, cameras, on call staff and location confidentiality support safety even in scattered site units.

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4A-3d.1. Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.

NOFO Section I.B.3.I.(1)(d)

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

The project's subrecipient has decades of experience providing services to DV survivors in the CoC geographic area including operating the CoC's only DV Safe House. The project applicant provides local government funding to this effort and serves as a pass-through for other federal funding. This experience results in a program that evaluates and plans for all levels of safety including financial, emotional and physical safety. Case managers have detailed discussions with clients about their safety plans. Plans are established upon intake, revised during program services and again when exiting services. Safety plans are developed with the client and individualized based on their schedule, work environment, children's schedule, and access to assistance. Plans also address supports and safety measures in the DV House and during the initial crisis and extend to what new measures will be implemented as clients exit to their own housing. Measures such as the safe use of technology and personal safety devices (both on the person or in the home) are ways the sub recipient assures a level of security is always present. Consistent review of safety plans and any breech of safety is evaluated and revised when needed. Assessment of safety is based on client report of safety and sense of security, decreased incidents of contact with offender and continued self-sufficiency and selfempowerment for the client. A continuous evaluation of client safety will take place throughout a client's placement in any RRH program funded under the CoC as case management services and supports from the project's sub recipient will be offered to clients for as long as the client is willing to accept services

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of the project applicant's experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:	
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants' strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	

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Applicant: Carroll County CoCMD-506Project: MD-506 CoC Registration FY 2023COC_REG_2023_204674

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

(limit 5,000 characters)

 Housing needs are addressed based on the client's needs and wishes considering, first and foremost, a location that supports safety, as well as access to schools for any dependents and access to transportation and employment based on client skills and experience. For example, if the client does not have their own vehicle the program will need to work with the client to assure access to public transportation or that all areas of importance are within walking distance. Housing is also determined based on the client's support network or gaps in that network. 2) The project's sub recipient understands the importance of establishing an environment of mutual respect to provide the most effective services and to encourage the clients to accept and embrace assistance. Often individuals enter services with past experiences that have built resentment of and distrust of the system. Validating client's feelings and experiences while hearing the client wishes and needs helps case managers to build rapport and client trust as they build a plan together for the needed services. The use of punitive interventions is counter to this approach and never utilized. 3) Within the 3-month probationary period, all sub recipient staff participate in trauma informed care training. Once basic needs are met, the case manager connects clients to information on the effects of trauma. All clients will be assessed during intake for all needs. If behavioral health services such as trauma therapy is identified, a referral will be made to the sub recipient's behavioral health program. Throughout each interaction, staff will engage through a trauma informed lens and opportunities to provide psychoeducational information on trauma related responses and supports are given to the client. 4) The sub recipient's approach to client assessments is strength based. The use of a self-sufficiency matrix that outline needs and strengths allows staff and client to outline a service plan with a step-by-step guide on reaching specific client centered and self-directed goals. Not only are assessments conducted through a trauma informed lens, but they are also approached with a strength-based focus that identifies both internal and external supports which is essential in building a plan that will foster growth and success with survivor defined goals. 5) Within the 3-month probationary period, all sub recipient staff participate in racial equity trainings that instructs staff how to understand the needs of the population they will serve and to provide appropriate and effective responses that avoid re-traumatization. Using a trauma focused lens while understanding one's cultural influences allows work throughout the program to address needs using a holistic approach to services. All staff also participate in quarterly training around cultural responsiveness and inclusivity, focusing on ability to respect client's cultural foundation. Both the project sub recipient and applicant train staff in racial equity, equal access, nondiscrimination, accessibility, and language access as a part of CoC wide trainings. 6) Clients are offered the opportunity to participate in a traumainformed support group and social activities. Life skill building opportunities have shown to be vital in the healing and stabilization of clients within the program. A holistic programming will be available that includes services such as DV Support Group, Life Skills like budgeting and financial planning. 7) Connecting clients to trauma informed parenting groups, childcare and legal resources is also a key resource provided by or facilitated by the project's sub recipient. Current resources and connections to community partners provide an array of services to assure wrap around services meet client needs. An example of connections are partnerships with Maryland Legal Aid, Women's Law Center, Family Law, local daycares, and after-school programs such as Boys and Girls Club.

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Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section LB 3 L(1)(d)	

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

(limit 5,000 characters)

The sub recipient, Springboard Community Service, provides Comprehensive Domestic Violence Services to ensure wrap-around support services are provided to victims of domestic violence. Upon entry into the Safe House, clients complete a needs assessment with their Case Manager. The Needs Assessment determines the type of services that a client will require and informs the formulation of an individualized service plan., The sub recipient has robust and long standing relationships with providers across the CoC to offer clients an array of services to support them in living violence-free lives; which includes 24/7 shelter services, 24/7 hotline support, short and long-term supportive case management services as well as additional services to enhance the client's ability to have long-term success. The array of additional services includes crisis intervention, case management, counseling, information and referrals, legal services, housing support, employment training and placement, specialized services for children, legal and medical accompaniment, and supportive services. Specific examples from the past year include:

Custody - Springboard Community Services (SCS) partners with two legal resources for clients: Women's Law Center (WLC) and Maryland Legal Aid. WLC supports client seeking protective orders who need to secure a safe plan of exit. Maryland Legal Aid assists DV survivors to pursue child custody, protective orders, and other family law matters by making legal services free to all referred clients. They provide trainings to staff to assure SCS are update on law changes and legal process in order to better support our clients. Both partners ensures that the survivors' safety needs are addressed by maintaining confidentiality, using harm reduction. On average 60% of SCS DV victim are referred to one of these partners for legal support and guidance through the course of services.

Housing Stability- Carroll County Government's Housing & Housing Stability Program (the CoC Collaborative Applicant and Applicant for the DV Bonus) provides adequate and affordable housing, economic opportunity, and a suitable living environment free from discrimination to eligible low and moderately low income persons. SCS case managers work closely with the housing program staff to secure more permanent housing opportunities for clients. As housing stability is one of the main goals while working with Safe House clients, SCS refers nearly 75% pf clients to the housing program within the first 30 days of services, and this is one of first referrals incorporated in client's service plan.

Employability and Education Skills—Carroll County Workforce Development (WIOA American Job Center) is a supportive partner to SCS clients who are often struggling to gain job skills or obtain employment. CCWFD offers training, resource connection and employment training to assure clients are able to find employment that works with their skills and life. Employment is also one of the most complex given client lifestyles are greatly altered after leaving their relationship. SCS appreciated the CCWFD program takes into consideration each client's individual needs. This partnership was established in the last year, with 20% of clients referred for services, allowing clients to start the first steps to self-sufficiency.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
	NOFO Section I.B.3.I.(1)(e)
	Describe in the field below examples of how the new project(s) will:
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths-for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivordefined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

The sub recipient of the project, Springboard Community Services (SCS), has decades of experience successfully serving survivors of domestic violence with trauma informed and victim centered practices in the CoC and will bring that experience to this project. SCS is a long-standing partner with the applicant, the Board of Carroll County Commissioners, with a strong history of collaboration including partnering as a sub recipient on other federally funded grant projects. This partnership will benefit the new RRH DV project. The applicant also serves as the Collaborative Applicant for the CoC, is the CoC's largest Housing Authority, operates state funded RRH for youth and manages the CoC's HMIS. 1) Housing needs will be addressed based on the DV client's needs and wishes considering, first and foremost, a location that supports safety, as well as access to schools if needed and access to transportation and employment based on client skills and experience. For example, if the client does not have their own vehicle the program will need to work with the client to assure access to public transportation or that all areas of importance are within walking distance. Housing is also determined based on the client's support network or gaps in that network. The subrecipient will tap into the applicant's experience recruiting and working with landlords for their state funded RRH program for youth and HCV programs including VASH and FUP vouchers. 2) The project's sub recipient will establish an environment of mutual respect to provide the most effective services and will encourage clients to accept and embrace assistance. Often individuals enter services with past experiences that have built resentment of and distrust of the system. Validating client's feelings and experiences while hearing the client wishes and needs will help case managers build rapport and client trust as they build a plan together for the needed services. The use of punitive interventions is counter to this approach and will never be utilized. 3) Within the 3-month probationary period, all sub recipient staff will participate in trauma informed care training. Once basic needs are met, the case manager will connect clients to information on the effects of trauma. All clients will be assessed during intake for all needs. If behavioral health services such as trauma therapy is identified, a referral will be made to the sub recipient's behavioral health program. Throughout each interaction, staff will engage through a trauma informed lens and opportunities to provide psycho-educational information on trauma related responses and supports will be given to the client. 4) The sub recipient's approach to client assessments will be strength based. Case managers will use a self-sufficiency matrix that outlines needs and strengths allowing staff and clients to outline a service plan with a step-by-step guide on reaching specific client-centered and self-directed goals. Not only will assessments be conducted through a trauma informed lens, but they will also be approached with a strength-based focus that identifies both internal and external supports which is essential in building a plan that will foster growth and success with survivor defined goals. 5) Within the 3-month probationary period, all sub recipient staff will participate in racial equity trainings that instruct staff how to understand the needs of the population they will serve and to provide appropriate and effective responses that avoid retraumatization. The use of a trauma focused lens, while understanding one's cultural influences, will allow the case manager's work in the new program to address needs using a holistic approach to services. All staff will also participate in quarterly training around cultural responsiveness and inclusivity, that will be focused on respecting the client's cultural foundation. Both the project sub recipient and applicant will train staff in racial equity, equal access, nondiscrimination, accessibility, and language access as a part of CoC wide trainings. 6) Clients will be offered the opportunity to participate in a traumainformed support group and social activities. Life skill building opportunities

have been shown to be vital in the healing and stabilization of clients within the program. Holistic programming will be available that includes services such as DV Support Group, and Life Skills like budgeting and financial planning. 7) Connecting clients to trauma informed parenting groups, childcare and legal resources will also a key resource provided by or facilitated by the project's sub recipient. Current resources and connections to community partners will provide an array of services to assure wrap around services meet client needs. An example of connections are partnerships with Maryland Legal Aid, Women's Law Center, Family Law, local daycares, and after-school programs such as Boys and Girls Club.

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

(limit 2,500 characters)

1) The sub recipient, Springboard Community Services, is a client centered organization with a commitment to client satisfaction, continuous quality improvement, compliance, diversity, equity and inclusion. SCS routinely seeks feedback from program participants via client satisfaction surveys that solicit client's satisfaction with service delivery, accessibility of services, treatment outcomes, and ability to communicate with their providers. The development and response to the DV RRH project will also routinely seek feedback as the program becomes operational and during operations. 2) Through the use of a robust electronic health record, contact logs, progress notes, assessments, and the aforementioned satisfaction surveys, feedback on services including DV RRH will be collected regularly, and the sub recipient will design, modify and improve all programs and services using direct client input. Such input enables SCS to identify gaps in service within the community – such as the lack of RRH specifically earmarked for DV survivors and strategize about how SCS can effectively fill those gaps. Most client driven information is collected and reviewed quarterly or semi-annually; however, opportunities for growth and new services are also discussed during weekly team and biweekly leadership meetings. This information is further measured against program and strategic plan goals. Measures are also reviewed by various committees of the board (program, finance, governance) and shared with the full board semiannually.

FY2023 CoC Application	Page 75	09/22/2023

4B. Attachments Screen For All Application Questions

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

	T			
1.	You must include a Do display a red X indicati	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.		
2.	You must upload an at	tachment for each d	ocument listed where 'Required?' is 'Yes'	
3.	files to PDF, rather tha	n printing documents Print option. If you ar	ther file types are supported–please only s and scanning them, often produces high e unfamiliar with this process, you should	use zip files if necessary. Converting electronic er quality images. Many systems allow you to consult your IT Support or search for
4.	Attachments must mat	ch the questions the	y are associated with.	
5.	Only upload document ultimately slows down	s responsive to the o	uestions posed-including other material	slows down the review process, which
6.	If you cannot read the	attachment, it is likel	y we cannot read it either.	
	. We must be able t displaying the time and time).	o read the date and I date of the public p	time on attachments requiring system-gei osting using your desktop calendar; scree	nerated dates and times, (e.g., a screenshot enshot of a webpage that indicates date and
	. We must be able t	o read everything yo	u want us to consider in any attachment.	
7.	After you upload each Document Type and to	attachment, use the ensure it contains a	Download feature to access and check the larges you intend to include.	e attachment to ensure it matches the required
8.	Only use the "Other" at	tachment option to r	neet an attachment requirement that is no	ot otherwise listed in these detailed instructions.
Document Typ	oe e	Required?	Document Description	Date Attached
1C-7. PHA Ho Preference	meless	No	PHA Homeless Pref	09/21/2023
1C-7. PHA Mo Preference	oving On	No	Moving On Strateg	09/19/2023
1D-11a. Lette Working Grou	r Signed by	Yes	Letter Signed by	09/22/2023
1D-2a. Housin	g First Evaluation	Yes	Housing First Eva	09/19/2023
1E-1. Web Po		Yes	Web Posting of :L	08/21/2023
1E-2. Local Co Tool	ompetition Scoring	Yes	Local Competition	09/21/2023
1E-2a. Scored Project	Forms for One	Yes	Scored Forms for	09/11/2023
1E-5. Notificat Rejected-Redu	ion of Projects uced	Yes	Notification of P	08/22/2023
1E-5a. Notifica Accepted	ation of Projects	Yes	Notification of P	09/12/2023
1E-5b. Local C Selection Res	Competition ults	Yes	Local Competition	09/11/2023
1E-5c. Web Po Approved Con Application		Yes		

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1E-5d. Notification of CoC- Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition R	09/19/2023
3A-1a. Housing Leveraging Commitments	No	PHA Housing Commi	09/19/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Agreem	09/19/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: Moving On Strategy CC PHA

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation FY 2023

Attachment Details

Document Description: Web Posting of :Local Competition Deadline

Attachment Details

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Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Project Rejected or Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

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Attachment Details

Document Description:

Attachment Details

Document Description: HDX Competition Report MD 506

Attachment Details

Document Description: PHA Housing Commitment PSH and RRH

Attachment Details

Document Description: Healthcare Agreement PSH and RRH DV Bonus

Attachment Details

Document Description:

Attachment Details

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Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/03/2023
1B. Inclusive Structure	09/21/2023
1C. Coordination and Engagement	09/21/2023
1D. Coordination and Engagement Cont'd	09/21/2023
1E. Project Review/Ranking	09/21/2023
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/21/2023
2C. System Performance	09/22/2023
3A. Coordination with Housing and Healthcare	09/21/2023
3B. Rehabilitation/New Construction Costs	09/21/2023
3C. Serving Homeless Under Other Federal Statutes	09/21/2023

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4A. DV Bonus Project Applicants 09/21/2023

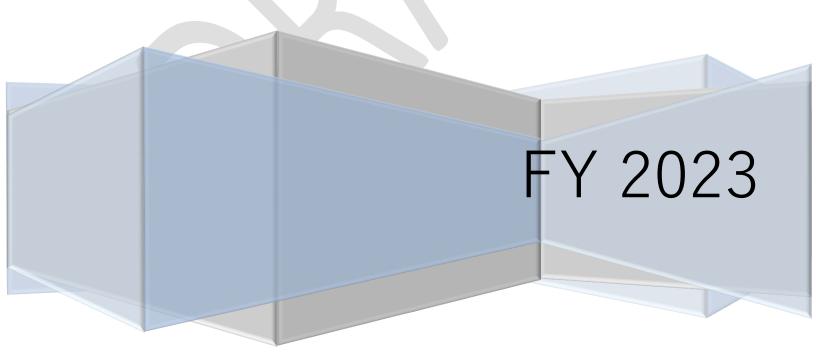
4B. Attachments Screen Please Complete

Submission Summary No Input Required

Administrative Plan

For Carroll County Housing and Community Development

Housing Choice Voucher Tenant-Based Program



Carroll County Housing has the following local preferences, in the following order:

1. Families Living or Working in Carroll County

- **Elderly**—An elderly family is one in which the head, spouse, co-head, or sole member is 62 years or older.
- **Disability**—families with a head of household or spouse of the head of household is a person with a disability. Proof of disability will be required at time of selection from the waiting list. HUD regulations prohibit admission preferences for specific types of disabilities.
- **Veterans**—individuals who can prove they served in active duty in the Armed Forces.
- **Homeless**—an individual who is currently homeless and able to verify prior residency in Carroll County.
- **Permanent Supportive Housing**—families who have been homeless who are now in this federal program in Carroll County.
- **Victims of Domestic Violence—**a limited preference of two vouchers will be provided for referrals from a designated local domestic violence organization.
- All others

2. Families Not Living or Working in Carroll County

- **Elderly**—An elderly family is one in which the head, spouse, co-head, or sole member is 62 years or older.
- **Disability**—families with a head of household or spouse of the head of household is a person with a disability. Proof of disability will be required at time of selection from the waiting list. HUD regulations prohibit admission preferences for specific types of disabilities.
- Families with Children
- Families with Two or More Persons
- All others

VERIFICATION OF WAITING LIST PREFERENCES [24 CFR 982.207]

Local Preferences

Residency Preference

Families whose head of household, spouse, or co-head live or work in the jurisdiction of Carroll County must provide one or more of the following documents:

- Rent receipts pre-printed with landlord's information
- Current lease
- Current utility bill
- Employer or agency records indicating a current local address for the applicant and/or employer.

If claiming employment to meet the preference, the employment must be paid, verifiable, and reported to all applicable agencies (i.e., IRS, TANF, etc.). If an applicant is on temporary disability from the job that is the qualification for this preference, the applicant must still be employed by the company and eligible to return upon medical reinstatement.

For families whose head of household, spouse, or co-head has been hired to work in Carroll County, third-party verification from the employer or statement on company letterhead will be required.

Disability Preference

This preference is available for families with a member who has a disability as defined in this Administrative Plan. The following verifications are accepted:

- Documentation from a doctor or other knowledgeable professional. The PHA will
 not inquire as to the nature of the disability except as to verify necessity for
 accessible unit.
- Award letter or other proof of eligibility for Social Security Disability or Supplemental Security Income.

Homeless Preference

Families who claim to be homeless in Carroll County must provide business verification of services received from social service agencies in Carroll County, or any other business documentation that ties that person to Carroll County. Letters from friends, relatives, or other private individuals will not be acceptable as proof of residence.

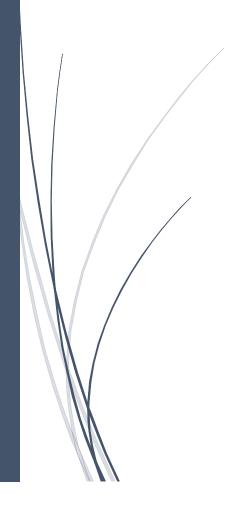
Involuntary Displacement

This preference is for families who claim they are being or have been displaced due to domestic violence. The following documentation/certifications will be required:



CITY OF WESTMINSTER PUBLIC HOUSING AGENCY ADMINISTRATIVE PLAN HOUSING CHOICE VOUCHER PROGRAM

REVISED December 13, 2021



demolishes the project;

- For housing covered by the Low Income Housing Preservation and Resident Home-ownership Act of 1990;
- A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
- A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

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.

C. LOCAL PREFERENCES [24 CFR 982.207]

The PHA uses the following local preference system:

The waitlist will be managed by date, time and preference. Only one preference will be considered to be active on the waitlist. All preferences must be verified.

Preferred status on the waiting list will be given to the following ranking preferences:

- Persons who are working at least 20 hours per week at minimum wage within the City of Westminster corporate boundaries and is verified, and meet income requirements per HUD definition;
- Persons who are living within the City of Westminster corporate boundaries and meet income requirements per HUD definition; (a lease from an owner or agent will be required for verification purposes.)
- Persons who are elderly (age 62 or older) or have a disability and living within the City limits.
- Persons who are living in a sponsored homeless shelter in the City and are receiving case

management from the shelter programs sponsored by Human Services Programs of Carroll

County.

- Victims of domestic violence.
- Domestic violence means actual or threatened violence by a member of a household directed at him/herself or another member of his/her household. The domestic violence should have occurred recently or be of a continuing nature. The definition of recent for

this purpose would mean within a six month period. An applicant may qualify for a preference for victims of domestic violence if the applicant:

- Vacated a unit because of officially (police or courts) documented domestic violence;
- Lives in a unit with a person who engages in violence documented as above. The applicant must certify that the person who engaged in the violence does not reside with the applicant family unless the PHA gives advance written approval.

Note: Only one preference will be allowed.

Treatment of Single Applicants

Singles Preference

Single applicants who are elderly, disabled, or displaced will be given a selection priority over all "Other Single" applicants regardless of preference status. "Other Singles" denotes a one-person household in which the individual member is not elderly, disabled, or displaced by government action. Such applicants will be placed on the waiting list in accordance with any other preferences to which they are entitled, but they cannot be selected for assistance before any one-person elderly, disabled or displaced family regardless of local preferences.

All families with children and families who include an elderly person or a person with a disability [24 CFR 100.80] shall be given a selection priority over all other applicants.

D. INCOME TARGETING

In accordance with the Quality Housing and Work Responsibility Act of 1998, the PHA applies its Section 8 new admissions to families whose income does not exceed 30 percent of the area median income. HUD refers to these families as "extremely low-income families."

E. INITIAL DETERMINATION OF LOCAL PREFERENCE QUALIFICATION [24 CFR 982.207]

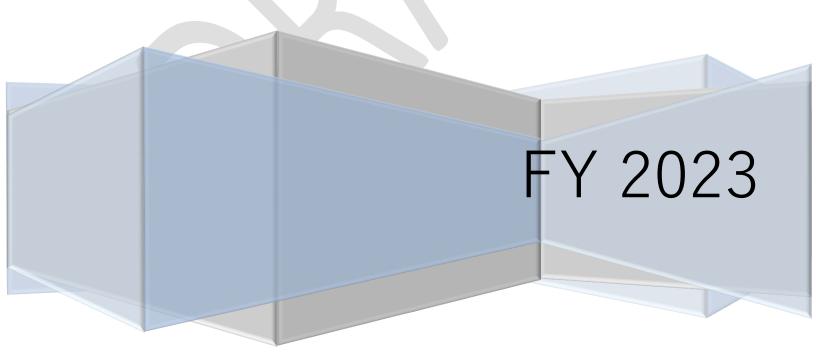
At the time of application, an applicant's entitlement to a local preference may be made on the following basis:

• The PHA will verify all preference claims at the time they are made.

Administrative Plan

For Carroll County Housing and Community Development

Housing Choice Voucher Tenant-Based Program



Homeless Vouchers

Carroll County Housing allows a homeless admission preference on the HCV waiting list for a limited number of vouchers. Carroll County has been working with the Continuum of Care and local homeless shelters to address housing needs identified by the community.

Five vouchers are provided for families that are in the shelter system that is operated by Human Services Program (HSP) of Carroll County. These families must meet the criteria for the HCV Program and verify prior residency in Carroll County for at least six months prior to the family's admission into the shelter program. HSP will submit a referral to Carroll County Housing indicating that they have met all the criteria outlined for the preference, as well as basic criteria for determining eligibility for the HCV Program. The families must apply to the HCV waiting list if they are not currently on the list. HSP will continue to work with these families to remain housed and to assist in locating a unit and following up on all aspects of the program and leasing.

Carroll County Housing has adopted HUD's Moving On strategies and framework to provide support to families in Rapid Rehousing or Permanent Supportive Housing programs by collaborating with Continuum of Care community partners. Transitioning these families to Housing Choice Vouchers can promote tenant choice, success, and mobility. This framework helps to promote housing stability and end chronic homelessness.

Carroll County Housing receives referrals from the county's Coordinated Entry agency for 20 vouchers for the Moving On strategy for the Rapid Rehousing and Permanent Supportive Housing programs. Additionally, Carroll County Housing will receive five more referrals for the Youth Rapid Rehousing Program. Caseworkers ensure these individuals are successful in not only receiving housing assistance but also being able to maintain their eligibility.

MANAGING THE WAITING LIST

The PHA must have policies regarding organizing and managing the waiting list of applicant families, including:

- Opening the list to new applicants
- Closing the list to new applicants
- Notifying the public of waiting list openings and closings
- Updating the waiting list
- Purging the list of families that are no longer interested in or eligible for assistance
- Conducting outreach to ensure a sufficient number of applicants



10 Distillery Drive, Westminster, MD 21157 P. O. Box 489, Westminster, MD 21158 www.hspinc.org

410-857-2999 (F) 410-857-8793

September 21, 2023

US Department of Housing and Urban Development Continuum of Care Program Competition FY 2023

To Whom It May Concern:

This letter demonstrates support for continued and increased Permanent Supportive Housing (PSH) funding. This letter is submitted by Jennifer Graybill, Director of Shelter, Housing and Economic Mobility, who oversees the PSH program. This letter is in response to the CoC Executive Committee's annual request for participant feedback. Participants in PSH were interviewed by agency staff, via interview, or written response. Feedback has no influence on their program or housing status. Staff welcome honest feedback, to direct our programming. Feedback received during these interviews show participants are in favor of this program, and believe we should continue to increase funding, to house more people experiencing homelessness.

Human Services Programs of Carroll County, Inc. (HSP) is Carroll County's dedicated Community Action Agency. Incorporated in 1987, HSP first opened to address the need for a women and children's homeless shelter in our county. Since then, we have grown to administer over 17 different life changing programs to address poverty – from street outreach, shelter, to housing and home energy assistance, to employment and financial capability services. HSP's mission is to give HOPE, inspire CHANGE, and provide OPPORTUNITY by mobilizing our community in the fight against poverty.

HSP has managed Permanent Support Housing units for over 20 years, starting with 5 units, and growing to 31 units today. All services are participant driven, low-barrier, equitable, and accessible. HSP values participant input in our service delivery system as well as agency-wide operations. HSP regularly solicits participant feedback, listens, and makes changes when and where we can.

Our most recent survey included responses from 23 households.





PSH Letter of Support, 2023 September 22, 2023 Page 2

We asked participants "What was your experience like when you first asked for help?":

- "I did not understand the program but it supported my needs"
- "Embarrassing"
- "It was emotional when I went into shelter but it was worth the wait"
- "It took a long time to get help with housing"
- "My thoughts were scared of where was I going to go. My anxiety built up but then I had relief I had place"
- "People were very helpful and supportive"

We asked, "What was your biggest barrier to success when you are homeless in Carroll County?" Top responses included transportation, criminal background, substance abuse, and high rents.

We also asked, "How has PSH benefited you?":

- "Gave us stability"
- "It really helped me be up in a house and happy to have that"
- "It changed my life, I feel safe, I have secure housing and I have been able to maintain a job"
- "Got me back on my feet"
- "It gave us a roof over our head when we didn't have one. Learning my basic human rights"
- "Enables me to go back to school and thrive"
- "Helped to have a place to live, get a job and more stable"
- "It allowed me to get my son back. Now I am working on getting my daughters back. It has allowed me to get a car and move up at work"
- "Stability. Not have to worry about being out in the cold"
- "Unbelievable relief of expenses"
- "Got me off the streets, got back on my feet and helped my mental health"
- "It has done me good and saved my sanity. Beneficial in every aspect"
- "A safe environment for my kids"
- "PH has benefited my overall quality of life in more ways than I can even count. Its given me my freedom back with my ability to be independent again and it's given me a chance to financially survive and me able to support myself"
- "HSP is the best thing that has to me after five long years of being homeless. Some people have no idea how exhausting being homeless is. I still appreciate to this day that HSP has given me my life back! Thank you HSP, thank you Drew (PSH Case Worker) for being there for me when I needed it badly"

92% (22 out of 23) households believe we should continue to fund PSH.

92% (22 out of 23) households, when asked what we need more of (shelter, transitional housing, or permanent housing) stated we needed more permanent housing.

PSH Letter of Support, 2023 September 22, 2023 Page 3

HSP has already begun to make programmatic changes to continuously improve PSH, including revamping our orientation process, adding additional educational opportunities for participants including "Tenant Rights and Responsibilities" Workshop and increased staff training on documentation, to expedite the eligibility and approval process.

The above comments reflect the resounding success of Permanent Supportive Housing – the extraordinary value of giving our most vulnerable households affordable housing. By providing for their basic human rights, safe, decent housing, we are giving them the space to grow and thrive. PSH is more than just housing, the *support* is key. Supportive services build landlord relationships, to get and keep people housed as well as the vital participant relationships developed overtime. This prepares participants to *Move On*, as stable, successful community members.

We are grateful for your support. CoC funding truly saves lives, for generations to come. With your renewed, and increased support, we can continue to save and improve the lives of our most vulnerable community members.

Sincerely,

Jennifer Graybill

Director of Shelter, Housing, and Economic Mobility

Provider Information



Please complete the information below on the organization being assessed.

	Provider Information
Provider's Legal Name	Human Services Program of Carroll Coounty, Inc.
Acronym (If Applicable)	HSPCC
Year Incorporated	1970
EIN	JQXVR7CGZ887
Street Address	10 Distillery Drive, Suite G
Zip Code	2115

	Project Information
Project Name	Permanent Supportive Housing HSP
Project Budget	402324
Grant Number	MD0135L3B062215
Name of Project Director	Jenny Graybill
Project Director Email Address	jgraybill@hsp.org
Project Director Phone Number	410-386-6677
Which best describes the project *	Permanent Supportive Housing
If project is a Safe Haven, please choose pro housing, or permanent housing	ject type that it most operates like, e.g. shelter, transitional
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your	
assessment questions.	None of the above

^{*}Please note that when you select a project type, particular standards may not be relevant.

Man	Management Information			
Name of CEO	Scott Yard			
CEO Email Address	syard@hspinc.org			
CEO Phone Number	410-386-6677			
Name of Staff Member Guiding Assessment	Jenny Graybill			
Staff Email Address	jgraybill@hspinc.org			
Staff Phone Number	410-386-6677			

Celene Steckel			
Organizational Affiliation of Assessor Carroll County Government Dept. of Citizen Services			
Assessor Email Address csteckel@carrollcountymd.gov			
410-386-3600			
Sep 08 2023			

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Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.	Always	Always	Always
		Optional notes here			
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.	Always	Always	Always
		Optional notes here			
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/	Always	Always	Always
		Optional notes here			
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable.	Always	Always	Always
		Optional notes here			
Access 5	Intake processes are person- centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project.	Always	Somewhat	Always
		Optional notes here			
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.	Always	Always	Always
		Optional notes here			
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies.	Always	Always	Always
		Optional notes here			
	Name	Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction.	Somewhat	Somewhat	Somewhat
		Optional notes here			
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services.	Always	Always	Always
		Optional notes here			



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party.	Always	Always	Always
		Optional notes here			
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit.	Always	Always	Always
		Optional notes here			
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants' and owner's choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market.	Always	Always	Always
		Optional notes here			
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities.	Always	Always	Always
		Optional notes here			
Leases 5	Measures are used to prevent eviction	Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.	Always	Always	Always
		Optional notes here			
Leases 6	Providing stable housing is a priority	Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit.	Always	Always	Always
		Optional notes here			
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.	Always	Always	Always
		Optional notes here			



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

29V30 RA	signifies full compliance for the st	tandard.			
	Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	Projects promote participant choice in services	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services.	Always	Always	Always
		Optional notes here			
Services 2	Person Centered Planning is a guiding principle of the service planning process	Person-centered Planning is a guiding principle of the service planning process	Always	Always	Always
Services 3	Service support is as permanent as the housing	Optional notes here Service connections are permanently available and accessible for participants in Permanent Supportive Housing, Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing. Optional notes here	Always	Always	Always
Services 4	Services are continued despite change in housing status or placement	Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays. **Optional notes here**	Always	Always	Always
Services 5	Participant engagement is a core component of service delivery	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time. Optional notes here	Always	Always	Always
Services 6	Services are culturally appropriate with translation services available, as needed	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).	Always	Always	Always
Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)	Optional notes here Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices. Optional notes here	Always	Always	Always
	Standard	Hauring Definition / Evidence	Cau It	Decement It	Da II
	Standard	Housing Definition / Evidence	Say It	Document It	Do It
Housing 1	Housing is not dependent on participation in services	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants. **Optional notes here**	Always	Always	Always
Housing 2	Substance use is not a reason for termination	Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD's Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD's Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/ Optional notes here	Always	Always	Always
Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets. Optional notes here	Always	Always	Always
Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always
		Optional notes here			



Housing First Standa

	For each standard, please use the signifies full compliance for the st	drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" tandard.			
	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A permanent supportive housing project ensures quick linkage to a unit and wrap around services, based on participant needs, preferences, and resource availability. Optional notes here	Always	Always	Always
Project 2	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers.	Always	Always	Always
		Optional notes here			
Project 3	Property Management duties are separate and distinct from services/case management	In order to provide clear roles of staff for participants in terms of lease and rules enforcement as well as tenant advocav, property management and service provides staff should be separate roles. However, they should work together on a regular basis through regular communications and meetings regarding Participants to address tenancy issues in order to preserve tenancy. Optional notes here	Always	Always	Always
		No additional standards			
		Optional notes here			
		No additional standards			
		Optional notes here			
		No additional standards			
		Optional nates here			
		No additional standards			
		Optional notes here			
		No additional standards			
		Section is not applicable. Please see following section.			



Housing First Standards: Assessment Summa

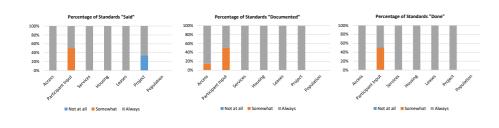
Human Services Program of Carroll Coounty, Inc. 8-Sep-23

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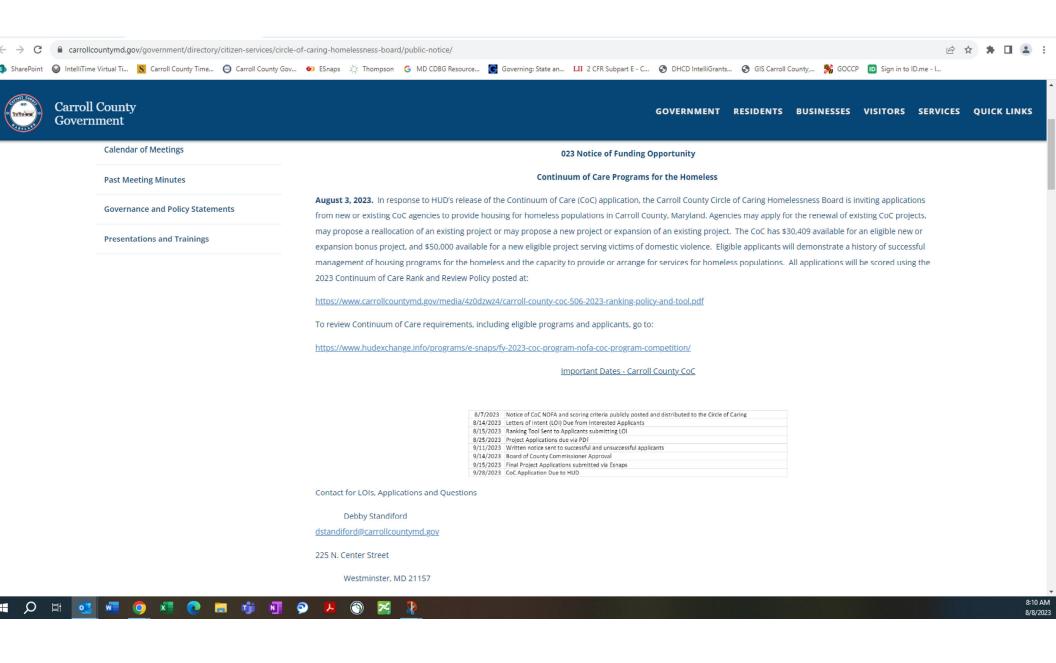


Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standars answered 'always'. Categories that are not applicable for your project are not included in the maximu notential score.





on-Compliant Standards ("Not at all" to Whether St Category No. Name	Standard	Non-Documented Standards ("Not at All" to Whether Standard is Documented) Cotegory No. Name Standard	Non-Evidenced Standards ("Not at All" to Whether Standard is Done") Cotegory No. Name Standard	
				:
Project-specific	No additional standards			
	Optional notes here			





ABOUT THE TOOL

HUD is providing this Rating and Ranking Tool to help CoCs design and implement a comprehensive annual CoC competition application review process. It has several customization features so you can choose the rating factors that are most relevant to your CoC and the priorities your CoC has adopted to inform system (re)design.

DISCLAIMER: HUD is explicitly stating that use of this tool is optional, is not being promoted over other tools CoCs currently use, and does not guarantee:

- additional points in the Fiscal Year (FY) 2022 Continuum of Care Program (CoC) Competition;
- CoC applications will be consistent with all NOFO requirements; and
- HUD will award CoCs with full points or funding.

The tool provides a strong framework for implementing a data-driven rating process and a ranking process informed by system priorities and capacity analysis (if available) and it satisfies the objective criteria requirement in the FY 2022 CoC Program NOFO. HUD strongly encourages CoCs to read the CoC Program NOFO carefully to determine if there are new opportunities, priorities, or expectations that your CoC might need to assess outside this tool. The Priority Listing is the official project ranking record for the CoC Program NOFO. HUD is not requiring CoCs to use this tool, nor is it preferred over other rating tools or processes, use of the tool does not guarantee additional points on the CoC Program application. HUD has made this tool available to CoCs for use in their year-round NOFO planning process. Feedback on the tool is welcome.

Microsoft Excel 2003 or higher is required when using this tool. When opening the tool workbook, you might need to click "Enable Content", "Enable Editing", and/or "Enable Macros" buttons in the yellow bar at the top of your screen. This is necessary for the macros and formulas to run correctly within the spreadsheet. If you get an error message, please check to see if the yellow bar is present and click these buttons before attempting to use the tool further. If you encounter a bug while using the tool, click "End" in the error pop-up, then navigate back to this tab and click the "Turn On Macros" button in the top right corner to ensure the underlying code is not disrupted before resuming. CoCs can submit technical questions about the Rating and Ranking Tool, including requesting help with bugs in the Tool, through the esnaps competition AAQ desk.

Due to the complexity of the tool, problems might occur when multiple Excel files are open at the same time. To help alleviate this problem, you should close all other Excel files on your computer before running the following parts of the tool:

- · Generating list of projects from Raw HIC data
- · Populating rating results
- Generating project ranking

Users who get the red Security Risk bar when they open the tool will need to speak with their IT departments about their policies regarding macro-enabled Excel workbooks and how they can be reenabled for the Rating and Ranking process.

For further guidance, see the Guidance Document on HUD's website.

MIGRATING DATA TO NEWER VERSIONS OF THE TOOL

The version of the CoC Program Rating and Ranking Tool created for the FY22 CoC Program NOFO (Version 6.0 and higher) contains updates to the HIC and changes to how available funding in the NOFO is entered in the tool on the 'FUNDING CEILINGS + PRIORITIES' tab, CoCs are strongly encouraged to use the latest version for the FY22 CoC NOFO process. The Tool has been updated to reflect the FY22 NOFO to the greatest extent possible. CoCs are responsible for verifying that the rating and ranking process they use is consistent with the NOFO.

If a COC has started using an earlier version of the Tool, the tool can be "upgraded" using the new Update Tool feature (see PROCESS FOR MIGRATING DATA USING UPDATE TOOL FEATURE). The feature will pull in all the CoC's entered data and specified criteria from the old version of the tool into the latest version of the tool, including data from all tabs up to the 'FUNDING ANALYSIS + RANKING' tab. The resulting file with have the same name as the old version of the tool, plus a "FIXED" suffix at the end.

If a CoC decides to use earlier versions of the tool designed for the FY21 NOFO process, they should review the HUD threshold requirements in the "RENEW. + EXP. THRESHOLD' and "NEW PROJECTS THRESHOLD' tabs and the NOFO information in the "General Funding Information" and "HUD CoC Program NOFO Opportunities" sections of the 'FUNDING CEILINGS + PRIORITIES' tab carefully to take into account any changes in HUD requirements or NOFO opportunities in the FY22 CoC NOFO.

PROCESS FOR MIGRATING DATA USING UPDATE TOOL FEATURE

- 1. In the latest tool downloaded from the HUD Exchange page, navigate to the 'ABOUT THE TOOL' tab.
- 2. Click the "Update Tool" button in the top-right corner.
- 3. Follow the prompts to select your out-of-date tool with the data in it.
- 4. Wait up to 5 minutes for the tool to pull in all entered data and specified criteria. A pop-up will confirm the update is complete.

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Rese I	Year	Proj. Tope	Organization Name	HME G g ID	the MMI comparable database	are Project No.	ione HMS Po	traj ED Conte	mass. Personal in ing	Type Brd Type T	Target Seds HH Pap. Onliden	Units HH Bests HH w/ w/s Children Children	Bank Hit Bank w/ andy Children Chi	anae Yealb Cilles bill Best He He He of w/ Cilles Stee Cilles	Sede William V. Sede William Children Chi	andh dr. 104 Basin nj'e Oklairen Sidren	CH Bests MH or/ anily Service Children	Andrew Adds	nd Pederal I	Pedand Federal	d Federal Fede	and Andrew A	delition Siddless Si admid Federal F making Federal F	d d d ledend Federal seeing Federal	Addition Addition of A Federal Pederal Funding Pederal Services APR	Addition Add of a Patient Feel Funding Fund	i d rad Federal I ling Funding P	d d Pederal Federal Landing Familing	Addition Addition of Amelinal Performant Funding Funding	d Andread Av	d d where Person	Addition Addition of all and a	dilition of Penning related Type reading	McCone y Vente bg	Makimu Makimu T T Vente Vente Siglia Siglia	Victime Maliana Y Y Ventus Ng CV Sug CV Su	Marine Maline France Ventur Eng CV Cm	T Venter to	T Y Y Y Y Y Said Control Contr	T Y	Matieus Matieus F F Ventus Ventus Carllebris SpC	T T	T SHEET VALUE	-	Total Analysis second by Start Both Cate	ty End Both	Count Total S	State Update On
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LIST OF PROJECTS TO BE REVIEWED You can sort the project list below using the drop down selection to the left. Please note that you cannot sort by "Renewal, New, Expansion...." until you have completed the green section of this form = Auto-populated cell. Connot be edited Check once you have confirmed the bed inventory listed for the projects below is consistent with the number of beds Isted for each project in your CoC's Grant Inventory Worksheet. Sort projects by: Use your Grant Inventory Worksheet and project spending records to complete these columns 2 MD0135L3B062215 \$ 203,517 \$ 203,517 \$ 402,324 Renewal 1 Human Services Programs PHPWD Consolidated FFY22 Renewal PSH General Yes No 249013 14 0 14 0 0 27 14 27 **0** 27 14 41 0 0 Yes Yes Human Services Programs SSO Coordinated Intake FFY 2022 Renewal Human Services Programs PHPWD Bonus FFY23 Carroll County Board of Comissioner FY 2023 DV Bonus SSO - coordinated er Yes MD0139L3B062214 \$ 29,851 \$ 29,851 \$ 32,098 Renewal PSH General Yes No RRH DV Yes No \$ 30,409 Expansion \$ 50,000 New 249013 0 2 2 0 0 Yes Yes

Service Servic

No. A Country of the Country of the

	RENEWAL/EXPANS	SION THRESHOLD REQUIREMENTS	S							
Project Name:	V PHPWD Bonus FFY23 (3)	Completed projects will be moved to the bottom of the list.								
	Human Services Programs		Renewal/Expansion Projects							
Project Type:		If you would like to change the project type, please do so in the HIC and re-copy the data to the RAW HIC DATA tab,	Threshold Review Complete							
Project Identifier:	3	or do so in the LIST OF PROJECTS TO BE REVIEWED.								
HRESHOLD REQUIREMENTS				YES/NO						
or each threshold, select "Yes" if applicant has fulfille	led the threshold requirement and is eligible to submit an a	pplication.								
takeholders should NOT assume all requirements a pplicant and project applicants should carefully rev	re fully addressed through this tool. CoC Program application the annual NOFA criteria each year.	ation requirements change periodically and annual NOFAs	may provide more detailed guidance. The CoC collaborative	✓ Yes to all						
UD THRESHOLD REQUIREMENTS										
	t information, and maintains an active SAM registration a	innually.		Yes						
Applicant has Valid UEI (Unique Entity Identifier) N				Yes						
CoC Program Eligibility – Project applicants and populication (e.g., nonprofit documentation).	tential subrecipients meet the eligibility requirements of	the CoC Program as described in the Act and the Rule and	provide evidence of eligibility required in the	Yes						
Financial and Management Capacity: Project appli apacity to administer federal funds.	cants and subrecipients demonstrate the financial and m	nanagement capacity and experience to carry out the proje	ect as detailed in the project application and the	Yes						
Certifications - Project applicants submit the requi	ired certifications specified in the NOFO.			Yes						
Population Served - The population to be served r	meets program eligibility requirements as described in the	e Act, the Rule, and the NOFO.		Yes						
ccordance with Section 407 of the Act, any victim s		anning costs and, if applicable, UFA Costs, agree to particip close, for purposes of HMIS, any personally identifying info al HMIS.		Yes						
	Debts – It is HUD policy, consistent with the purposes and	d intent of 31 U.S.C. 3720B and 28 U.S.C. 3201(e), that appl	licants with outstanding delinquent federal debt							
a) A negotiated repayment schedule is established and the repayment schedule is not delinquent, or										
b) Other arrangements satisfactory to HUD are ma	ide before the award of funds by HUD									
Applicant has no Debarments and/or Suspensions om doing business with the Federal government.	:- In accordance with 2 CFR 2424, no award of federal fu	inds may be made to debarred or suspended applicants, or	r those proposed to be debarred or suspended	Yes						
D. Pre-selection Review of Performance - If your organization has delinquent federal debt or is excluded from doing business with the Federal government, the organization may be ineligible for an award. In addition, effor emailing a Federal award, NID reviews information available through any DMB designated repositions of government-wide eligibility qualification or financial integrity information, such as Federal Awardee reformance and integrity information system for Park (PATRA); and the "One Derve Website. NID One-west the right to:										
a) Deny funding, or with a renewal or continuing award, consider suspension or termination of an award immediately for cause;										
b) Require the removal of any key individual from	association with management or implementation of the a	award; and								
c) Make provisions or revisions regarding the met	hod of payment or financial reporting requirements									
ay arrange for a survey of financial management s	ystems for applicants selected for award who have not pr	not have a financial management system that meets Feder reviously received Federal financial assistance, where HUD ed on past performance or financial management findings.	Program officials have reason to question	Yes						
 False Statements - A false statement in an applica ecipient or applicant confirms all statements are tree 		d may result in criminal, civil, and/or administrative sanctio	ons, including fines, penalties, and imprisonment.	Yes						
ffecting the Federal award within ten days after lea ondition for Recipient Integrity and Performance N	rning of the violation. Recipients that have received a Fed	office at HUD, all violations of Federal criminal law involvin deral award including the term and condition outlined in A ministrative proceedings to SAM. Failure to make required tt 180, 31 U.S.C. 3321,and S.C. 2313.)	ppendix XII to 2 CFR part 200—Award Term and	Yes						
I. Prohibition Against Lobbying Activities - Applicants are subject to the provisions of Section 319 of Public Law 101-121, 31 U.S.C. 1352, (the Byrd Amendment), and 24 CFR part 87, which prohibit recipients of federal wards from using appropriated funds for lobbying the executive or legislative branches of the Federal government in connection with a Federal award. All applicants submit with their application the signed errification Regarding Lobbying included in the Application download from Crista sput I addition, applicants disclosur, using Standard Form LLL (SFLLL) Colocoure of Lobbying Activities, "any funds, other than deraily appropriated funds, that will be 1 on the been used to inlinear federal employee, members of Congress or congressions staff regarding specific awards, Federally-recognized dart breas and tribally especially except the staff of the Section Section (Section 2014) and the Section										
onsistent with E.O. 13559, entitled Fundamental Pri	inciples and Policymaking Criteria for Partnerships with Fa	Il projects meet the requirements under 24 CFR 5.109. On aith-Based and Other Neighborhood Organizations (75 Fee except as may be otherwise provided in the respective pro	d. Reg. 71319 (Nov. 22, 2010)). (See 81 FR 19355).	Yes						
		mission deadline. Project applicants, who after review are view, will not be rated and ranked, and will not receive fun		Yes						
oC THRESHOLD REQUIREMENTS										
	For each requirement, select "Yes" if the project has pro- CoC or will request a waiver from HUD. Otherwise select	vided reasonable assurances that the project will meet the r "No".	requirement, has been given an exception by the							
oordinated Entry Participation				Yes						
ousing First and/or Low Barrier Implementation				Yes						
ocumented, secured minimum match				Yes						
	g exit, as defined locally			Yes						
roject is financially feasible				Yes						

Applicant is active CoC participant
Application is complete and data are consistent
Data quality at or above 90%
Bed/unit utilization rate at or above 90%
Acceptable organizational audit/financial review

	RENEWAL/EXPAN	ISION PROJECT RATING TOOL				
Project Name	e: v PHPWD Bonus FFY23 (3)	Print Blank Template		Print Report Ca	rd	
Organization Name	e: Human Services Programs		Renewal/Expansion Projects			
Project Type	e: PSH (General)		Rating Complete	_		
Project Identifier	r:3	Met all threshold requirements	100%			
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED		MAX POINT VALUE
PERFORMANCE MEASURES						
Length of Stay						
Permanent Supportive-Housing	On average, participants are placed in housing 15 day	rs after referral to PSH	7 days	20	out of	20
Exits to Permanent Housing						
Permanent Supportive-Housing	90% remain in or move to PH		95.92 %	25	out of	25
Returns to Homelessness						
Within 12 months of exit to permanent housing	≤ 10% of participants return to homelessness within 1	12 months of exit to PH	0 %	15	out of	15
New or Increased Income and Earned Income						
Earned income for project stayers	8%+ of participants with new or increased income		6 %	0.0	out of	2.5
Non-employment income for project stayers	10%+ of participants with new or increased income		22 %	2.5	out of	2.5
Earned income for project leavers	15%+ of participants with new or increased income		14 %	0.0	out of	2.5
Non-employment income for project leavers	25%+ of participants with new or increased income		12 %	0.0	out of	2.5
	Performance Measures Subtotal			62.5	out of	70
SERVE HIGH NEED POPULATIONS			100 001/			20
Permanent Supportive-Housing	≥ 95% of participants are chronically homeless		100.00% %	20.0	out of	20
	Serve High Need Populations Subtotal			20	out of	20
PROJECT EFFECTIVENESS						
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals		100 %	10	out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model		Yes	10	out of	10
	Project Effectiveness Subtotal			20	out of	20
	•			=-		
EQUITY FACTORS						
Agency Leadership, Governance, and Policies						
Recipient Management & Leadership Positions	BIPOC, LGBTQIA+, etc representation		Yes	10	out of	10
Recipient Board of Directors	BIPOC, LGBTQIA+, etc representation		Yes	10	out of	10
Process for receiving & incorporating feedback	Process includes persons with lived experience		Yes	10	out of	10
Internal Policies and Procedures	Policies with equitable lense, no undue barriers		Yes	10	out of	10
Program Participant Outcomes						
Outcomes with an equity lens	Data disaggregated by underserved populations		Yes	10	out of	10
Program changes for equitable outcomes	Plan to create more equitable program outcomes		Yes	10	out of	10
HMIS data review with equity lens	Plan to review disaggregated data		Yes	10	out of	10
	Equity Factors Subtotal			70	out of	70
OTHER AND LOCAL CRITERIA						
CoC Monitoring Score	Project is operating in conformance to CoC standards		Yes	10	out of	10
	Other and Local Criteria Subtotal			10	out of	10
	TOTAL SCORE			182.5	out of	190
	Weighted Rating Score			96	out of	100
PROJECT FINANCIAL INFORMATION						
CoC funding requested		NOTE: Edit on the LIST OF PROJECTS TO BE BELLEVIES	v h	E		30,409
Amount of other public funding (federal, state, coun	ity city)	NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED to			\$	50,409
Amount of private funding	(2) (C)					
TOTAL PROJECT COST				3		30,409
						30,403
CoC Amount Awarded Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED to	ıb			-
CoC Amount Expended Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED to	ıb.			-
Percent of CoC funding expended last operating ye	ar					0%

NEW PROJECTS THRESHOLD REQUIREMENTS Project Name: v FY 2023 DV Bonus (4) Organization Name: Carroll County Board of Comiss For each threshold, select "Yes" if applicant has fulfilled the threshold requirement and is eligible to submit an application. Stakeholders should NOT assume all requirements are fully addressed through this tool. CoC Program application requirements change periodically and annual NOFAs may provide more detailed guidance. The CoC collaborative HUD THRESHOLD REQUIREMENTS 1. Applicant has Active SAM registration with current information, and maintains an active SAM registration annually 2 Applicant has Valid HEI (Holoup Entity Identifier) Number 3. CoC Program Eligibility – Project applicants and potential subrecipients meet the eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements of the CoC Program as described in the Act and the Rule and provide evidence of eligibility requirements. 4. Financial and Management Capacity: Project applicants and subrecipients demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds. 5. Certifications - Project applicants submit the required certifications specified in the NOFO. 6. Population Served - The population to be served meets program eligibility requirements as described in the Act. the Rule, and the NOFO. 7. HMIS Participation - Project applicants, except Collaborative Applicants that only receive awards for Coll planning costs and, if applicable, UFA costs, agree to participate in a local HMIS system. However, in accordance with Section 407 of the Act, any victim service provider that is a recipient or subsection not disclose, for purposes of HMIS, any personally identifying information about any cleent. Victim service providers were accordanced between the control of the local HMIS. 8. Applicant has no Outstanding Delinquent Federal Debts - It is HUD policy, consistent with the purposes and intent of 31 U.S.C. 37208 and 28 U.S.C. 3201(e), that applicants with outstanding delinquent federal debt will not be eligible to receive an award of funds unless. b) Other arrangements satisfactory to HUD are made before the award of funds by HUD 9. Applicant has no Debarments and/or Suspensions - in accordance with 2 CFR 2414, no award of federal funds may be made to debarred or suspended applicants, or those proposed to be debarred or suspended from doing business with the Federal government. 10. Pre-selection Review of Performance - If your organization has delinquent fideral debt or is excluded from doing business with the Federal government, the organization may be ineligible for an award. In addition, before making a Federal award, In 2010 Proviews information an available through any OMB-designated repositories of government-wide eligibility qualification or financial integrity information, such as Federal Awardee Performance and Integrity information, and the Performance and Integrity information or financial integrity information, such as Federal Awardee Performance and Integrity information or financial integrity information, such as Federal Awardee Performance and Integrity information or financial integrity information, such as Federal Awardee Performance and Integrity information or financial integrity information, such as Federal Awardee Performance and Integrity information and Integrity information, such as Federal Awardee Performance and Integrity information and Integrity informa a) Deny funding, or with a renewal or continuing award, consider suspension or termination of an award immediately for cause; b) Require the removal of any key individual from association with management or implementation of the award; and c) Make provisions or revisions regarding the method of payment or financial reporting requirements 11. Sufficiency of Financial Management System +RUD will not award or disburse funds to applicants that do not have a financial management system that meets Federal standards as described at 2 CFR 200.302. HLD may arrange for a survey of financial management systems for applicants selected for award who have not previously received Federal financial assistance, where HLD Program officials have reason to question whether a fancial management system meets Federal standards, or for applicants considered high risks based on para performance or financial management findings. Yes 12. False Statements - A faise statement in an application is grounds for denial or termination of an award and may result in criminal, civil, and/or administrative sunctions, including fines, penalties, and imprisonment. Recipient or applicant confirms all atalements are truthful. Yes 13. Mondatory Disclaims Requirement, Registerines applicant disclaims in untiting to the availability grapping melline as IARD, all volations of defend criminal law involving to Many Laboratory and referred assert including the research and control and an including properties of the research and an including properties of the research and a feeder assert including better made of control control control and properties of the research and a feeder assert including a feeder assert including in their made of control control control and properties of the research and a feeder assert including assertion of the determined. (See also 2015 per 18 ft. 31 U.S. 21 21 21.55 C. 213.11) Yes 14. Prohibition Against Lobbying Activities: Applicants are subject to the provisions of Section 199 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and 24 CFR part 87, which prohibit responses of Section and Section 199 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and 24 CFR part 87, which prohibit responses of Section 199 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and 24 CFR part 87, which prohibit responses to the Section 199 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and 24 CFR part 87, which prohibit responses to the Section 199 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and 24 CFR part 87, which prohibit responses to the Section 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (the Byrd Amendment), and part 1990 of Public Law 201-121, 31 U.S.C. 1320, (1.5 Equal Personance of soft has the Companion of the Com 16. Resolution of Civil Rights Matters - Outstanding civil rights matters be resolved before the application submission deadline. Project applicants, who after review are confirmed to have civil rights matters u at the application submission deadline, will be deemed indigible. Their applications will receive no further review, will not be rated and ranked, and will not receive funding. Coc THRESMOLD REQUIREMENTS For each requirement, select "Yes" If the project has provided reasonable assurances that the project will meet the requirement, has been given an exception by the CoC Coordinated Entry Participation Housing First and/or Low Barrier Implementation Documented, secured minimum match Yes Project has reasonable costs per permanent housing exit, as defined locally Project is financially feasible Applicant is active CoC participant Application is complete and data are consistent Data quality at or above 90% Bed/unit utilization rate at or above 90%

Acceptable organizational audit/financial review

NEW PROJECTS RATING TOOL			
Not showing the right factors? Make sure Project Name: V FY 2023 DV Bonus (4) Print Blank Template	Print Report Ca	ard	
you've set up the project correctly on the USC of PROJECTS TO 8 REFEVENED be TOS REFE			
Project Type: RRH (DV) Rating Complete Project Identifier: 4 Met all threshold requirements	1		
Project Identifier: 4 Met all threshold requirements	POINTS		MAX POINT
RATING FACTOR	AWARDED		VALUE
EXPERIENCE			
A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.	15	out of	15
B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no			
preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that	10	out of	10
stronger project participation is terminated in only the most severe cases.			
C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely	5	out of	5
reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.			
Experience Subtotal	30	out of	30
DESIGN OF HOUSING & SUPPORTIVE SERVICES			
A. Extent to which the applicant 1. Demonstrate understanding of the needs of the clients to be served.			
2. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served	15	out of	15
Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served.Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits			
5. Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks.			
B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.	5	out of	5
C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently.	5	out of	5
D. Project leverages housing resources with housing units not funded through the CoC or ESG programs.	5	out of	5
E. Project leverages health resources, including a partnership commitment with a healthcare organization.	5	out of	5
Design of Housing & Supportive Services Subtotal	35	out of	35
Script of Housing & Sepportite Scrivice Sustain	33	00001	33
TIMELINESS			
A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60	10	out of	10
days, 120 days, and 180 days after grant award.		00001	
Timeliness Subtotal	10	out of	10
FINANCIAL			
A. Project is cost-effective - comparing projected cost per person served to CoC average within project type.	5	out of	5
B. Audit	ــــــــــــــــــــــــــــــــــــــ	00001	-
Most recent audit found no exceptions to standard practices	5	out of	5
2. Most recent audit identified agency as 'low risk'	5	out of	5
3. Most recent audit indicates no findings	5	out of	5
C. Documented match amount	5	out of	5
D. Budgeted costs are reasonable, allocable, and allowable	20	out of	20
Financial Subtotal	45	out of	45
PROJECT EFFECTIVENESS			
Coordinated Entry Participation- 95% of entries to project from CE referrals	5	out of	5
Project Effectiveness Subtotal	5	out of	5
EQUITY FACTORS Agency Leadership, Governance, and Policies			
Ageinty Leavesing, Overtienice, and Profiles Recipient has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	5	out of	5
Recipient's board of directors includes representation from more than one person with lived experience of homelessness	5	out of	5
Recipient has relational process for receiving and incorporating feedback from persons with lived experience of homelessness	5	out of	5
Recipient has reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers	5	out of	5
Program Participant Outcomes			
Recipient has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, age, and/or other underserved populations	5	out of	5
Recipient has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes	5	out of	5
Recipient is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, age, and/or underserved populations	5	out of	5
Equity Factors Subtotal	35	out of	35
OTHER AND LOCAL CRITERIA			
Percent of Prior Year Grant Expended	0	out of	20
Other and Local Criteria Subtotal	0	out of	20

TOTAL SCORE	160	out of	180
Weighted Rating Score	89	out of	100
DOGICT CHANGA INFORMATION			
PROJECT FINANCIAL INFORMATION			
CoC funding requested NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tob		\$	50,000
Amount of other public funding (federal, state, county, city)	=	\$	-
Amount of private funding TOTAL PROJECT COST	····	\$ \$	
I O I AL FROJECT COST		2	50,000

RATING RESULTS

Sort projects by:

You can sort the project list below using the Make sure to save any rating you've done before drop down selection to the left.

Not all requirements met or threshold scoring not started

RATING RESULTS

	Renewal,																	Is 100%	Is 100%			Amount of Other					
	New,					McKinn	e McKinney-											Dedicated +	Dedicated +	Is 100%		Public Funding	Amount of	CoC Amount	Met All HUD	Met All CoC	Weighted
	Expansion,			Project	General	/ y- Vent	o: Vento: YHDF	All Fam	DV Fan	CH Farr	Vet F	am Youth	All Ind	DV Ind	Total	CH Vet Ind	Single Youth	h or CH Fam	or CH Ind		CoC Funding	(Federal, state,	private	Expended Last	Threshold	Threshold	Rating
Project ID Grant Number	Reallocate	Project Name	Organization Name	Type	DV	YHDP	Renewals	Beds	Beds	Beds	Beds	Beds	Beds	Beds	Ind B	eds Beds	Beds	(Yes/No)	(Yes/No)	(Yes/No)	Requested	county, city)	Funding	Operating Year	Requirements	Requirements	Score
4	New	FY 2023 DV Bonus	Carroll County Board of Comiss	sic RRH	DV	No		0	3	3	3	0	0	1	1	1	0	0 No	No	Yes	\$50,000)		\$0	Yes	Yes	89
1 MD0135L3B0622	15 Renewal	PHPWD Consolidated FFY22 Rene	e Human Services Programs	PSH	General	No		0 :	14	0	14	0	0 2	7	0	41	0	0 Yes	Yes	No	\$402,324	1		\$203,517		Yes	96
2 MD0139L3B0622	14 Renewal	SSO Coordinated Intake FFY 2022	2 Human Services Programs	SSO - coord	di	0 No		0	0	0	0	0	0	0	0	0	0	0 No	No	No	\$32,098	3		\$29,851			NOT RATED
3	Expansion	PHPWD Bonus FFY23	Human Services Programs	PSH	General	No		0	2	0	2	0	0	2	0	2	0	0 Yes	Yes	No	\$30,409	9		\$0		Yes	96

		RENEWAL/E	XPANSION THRESHOLD REQUIREMEN	TS	
	Project Name: √ PHPWD (Consolidated FFY22 Renewal (1)	Completed projects will be moved to the bottom of the list.		
	Organization Name: Human Ser	vices Programs		Renewal/Expansion Projects	
	Project Type:	PSH	If you would like to change the project type, please do so in the	Threshold Review Complete	
	Project Identifier:	1	Renewal/Expansion Projects Threshold Review Complete 100% diseligible to submit an application. Ol. CoC Program application requirements change periodically and annual NOFAs may provide more detailed guidance. The CoC collaboratory over the UST OF PROJECTS TO BE REVIEWED. Threshold Review Complete 100% diseligible to submit an application. Ol. CoC Program application requirements change periodically and annual NOFAs may provide more detailed guidance. The CoC collaboratory over the project application annually. The CoC Program as described in the Act and the Rule and provide evidence of eligibility required in the rate the financial and management capacity and experience to carry out the project as detailed in the project application and the NOFO. The CoC Planning costs and, if applicable, UFA Costs, agree to participate in a local HMIS system. However, in or subrecipient not disclose, for purposes of HMIS, any personally identifying information about any client. Victim service providers ing the needs of the local HMIS. The twith the purposes and intent of 31 U.S.C. 3720B and 28 U.S.C. 3201(e), that applicants with outstanding delinquent federal debt of the complete of	100%	
THRESHOLD REQUIREMENTS					YES/NO
For each threshold, select "Yes"	' if applicant has fulfilled the thres	hold requirement and is eligible t	o submit an application.		
	ne all requirements are fully addr s should carefully review the ann		gram application requirements change periodically and annual NOFA	As may provide more detailed guidance. The CoC collaborative	✓ Yes to all
HUD THRESHOLD REQUIREMEN	NTS				
1. Applicant has Active SAM reg	gistration with current informatio	n, and maintains an active SAM re	egistration annually.		Yes
2. Applicant has Valid UEI (Unic	que Entity Identifier) Number.				Yes
3. CoC Program Eligibility – Prographication (e.g., nonprofit doc		ecipients meet the eligibility requ	irements of the CoC Program as described in the Act and the Rule a	and provide evidence of eligibility required in the	Yes
4. Financial and Management C capacity to administer federal f		ubrecipients demonstrate the fina	ancial and management capacity and experience to carry out the pr	oject as detailed in the project application and the	Yes
5. Certifications - Project applic	ants submit the required certifica	tions specified in the NOFO.			Yes
6. Population Served - The pop	ulation to be served meets progra	nm eligibility requirements as des	cribed in the Act, the Rule, and the NOFO.		Yes
accordance with Section 407 of		der that is a recipient or subrecipi	ent not disclose, for purposes of HMIS, any personally identifying in	•	Yes
8. Applicant has no Outstanding will not be eligible to receive ar	- '	HUD policy, consistent with the p	ourposes and intent of 31 U.S.C. 3720B and 28 U.S.C. 3201(e), that a	applicants with outstanding delinquent federal debt	
a) A negotiated repayment so	chedule is established and the rep	payment schedule is not delinque	nt, or		Yes
b) Other arrangements satisf	actory to HUD are made before the	ne award of funds by HUD			
9. Applicant has no Debarment from doing business with the F	•	ance with 2 CFR 2424, no award c	of federal funds may be made to debarred or suspended applicants,	or those proposed to be debarred or suspended	Yes
before making a Federal award	, ,	ble through any OMB-designated	repositories of government-wide eligibility qualification or financia	,	
a) Deny funding, or with a re	newal or continuing award, consi	der suspension or termination of	an award immediately for cause;		Yes
b) Require the removal of an	v kev individual from association	with management or implementa	ation of the award: and		

c) Make provisions or revisions regarding the method of payment or financial reporting requirements

	RENEWAL/EXP	ANSION THRESHOLD REQUIREMEN	TS	
Project Name: <u>v PHPWD</u>	Consolidated FFY22 Renewal (1)	Completed projects will be moved to the bottom of the list.		
Organization Name: Human S	ervices Programs		Renewal/Expansion Projects	
Project Type:	PSH	If you would like to change the project type, please do so in the HIC and re-copy the data to the RAW HIC DATA tab, or do so in	Threshold Review Complete	
Project Identifier:	1	the LIST OF PROJECTS TO BE REVIEWED.	100%	
HRESHOLD REQUIREMENTS				YES/NO
.1. Sufficiency of Financial Management System - HUD will not may arrange for a survey of financial management systems for whether a financial management system meets Federal standa	applicants selected for award who have	not previously received Federal financial assistance, where H	UD Program officials have reason to question	Yes
.2. False Statements - A false statement in an application is gro Recipient or applicant confirms all statements are truthful.	ounds for denial or termination of an awa	ard and may result in criminal, civil, and/or administrative san	nctions, including fines, penalties, and imprisonment.	Yes
.3. Mandatory Disclosure Requirement - Recipients or applicar iffecting the Federal award within ten days after learning of the Condition for Recipient Integrity and Performance Matters are lescribed in § 200.338 Remedies for noncompliance, including	ne violation. Recipients that have received required to report certain civil, criminal,	ed a Federal award including the term and condition outlined i , or administrative proceedings to SAM. Failure to make requi	n Appendix XII to 2 CFR part 200—Award Term and	Yes
4. Prohibition Against Lobbying Activities - Applicants are subjuvered from using appropriated funds for lobbying the executivertification Regarding Lobbying included in the Application doederally appropriated funds, that will be or have been used to designated housing entities (TDHEs) established by federally-rendian tribes and TDHEs established only under state law shall	ive or legislative branches of the Federal ownload from Grants.gov. In addition, ap o influence federal employees, members ecognized Indian tribes as a result of the	government in connection with a Federal award. All applicant policants disclose, using Standard Form LLL (SFLLL), "Disclosure of Congress, or congressional staff regarding specific awards. exercise of the tribe's sovereign power are excluded from cov	ts submit with their application the signed e of Lobbying Activities," any funds, other than Federally-recognized Indian tribes and tribally verage of the Byrd Amendment, but state-recognized	Yes
.5. Equal Participation of Faith-Based Organizations in HUD Proconsistent with E.O. 13559, entitled Fundamental Principles an Phase regulations apply to all HUD programs and activities, including program authorizing statute.	nd Policymaking Criteria for Partnerships	with Faith-Based and Other Neighborhood Organizations (75 $$	Fed. Reg. 71319 (Nov. 22, 2010)). (See 81 FR 19355).	Yes
.6. Resolution of Civil Rights Matters - Outstanding civil rights I It the application submission deadline, will be deemed ineligib				Yes
C. C. THIRTSHOLD, D. COLUMN TATALITY				
	requirement, select "Yes" if the project h ill request a waiver from HUD. Otherwise	nas provided reasonable assurances that the project will meet to eslect "No".	the requirement, has been given an exception by the	
Coordinated Entry Participation				Yes
Housing First and/or Low Barrier Implementation				Yes
Oocumented, secured minimum match				Yes
Project has reasonable costs per permanent housing exit, as de	efined locally			Yes
Project is financially feasible				Yes
Applicant is active CoC participant				Yes
Application is complete and data are consistent				Yes

Data quality at or above 90%

Yes

RENEWAL/EXPANSION THRESHOLD REQUIREMENTS Project Name: v PHPWD Consolidated FFY22 Renewal (1) Completed projects will be moved to the bottom of the list. Organization Name: Human Services Programs Renewal/Expansion Projects If you would like to change the project type, please do so in the Threshold Review Complete Project Type: HIC and re-copy the data to the RAW HIC DATA tab, or do so in 100% Project Identifier: 1 the LIST OF PROJECTS TO BE REVIEWED. THRESHOLD REQUIREMENTS YES/NO Bed/unit utilization rate at or above 90% Yes Acceptable organizational audit/financial review Yes

	RENEWAL/EXPANS	SION PROJECT RATING TOOL				
Project Name	: v PHPWD Consolidated FFY22 Renewal (1)	Print Blank Template		Print Report Card	i	
Organization Name	: Human Services Programs		Renewal/Expansion Projects			
Project Type	: PSH (General)		Rating Complete	=		
Project Identifier	1	Met all threshold requirements	100%			
RATING FACTOR	PERFORMANCE GOAL		PERFORMANCE	POINTS AWARDED		MAX POINT VALUE
PERFORMANCE MEASURES						
ength of Stay						
Permanent Supportive-Housing	On average, participants are placed in housing 15 day	s after referral to PSH	7 days	20	out of	20
exits to Permanent Housing						
Permanent Supportive-Housing	90% remain in or move to PH		95.92 %	25	out of	25
Returns to Homelessness						
Within 12 months of exit to permanent housing	≤ 10% of participants return to homelessness within 1	12 months of exit to PH	0 %	15	out of	15
New or Increased Income and Earned Income						2.5
Earned income for project stayers Non-employment income for project stayers	8%+ of participants with new or increased income		6 %		out of	2.5 2.5
Earned income for project leavers	10%+ of participants with new or increased income		22 %		out of	2.5
Non-employment income for project leavers	15%+ of participants with new or increased income		14 %		out of	2.5
von-employment income for project leavers	25%+ of participants with new or increased income		12 %		out of	
	Performance Measures Subtotal			62.5	out of	70
SERVE HIGH NEED POPULATIONS						
Permanent Supportive-Housing	≥ 95% of participants are chronically homeless		100.00% %	20.0	out of	20
	Serve High Need Populations Subtotal			20	out of	20
PROJECT EFFECTIVENESS						
Coordinated Entry Participation	≥ 95% of entries to project from CE referrals		100 %		out of	10
Housing First and/or Low Barrier Implementation	Commits to applying Housing First model		Yes	10	out of	10
	Project Effectiveness Subtotal			20	out of	20
QUITY FACTORS						
Agency Leadership, Governance, and Policies						
Recipient Management & Leadership Positions	BIPOC, LGBTQIA+, etc representation		Yes	10	out of	10
Recipient Board of Directors	BIPOC, LGBTQIA+, etc representation		Yes		out of	10
Process for receiving & incorporating feedback	Process includes persons with lived experience		Yes	10	out of	10
nternal Policies and Procedures	Policies with equitable lense, no undue barriers		Yes	10	out of	10
Program Participant Outcomes			. <u> </u>			
Outcomes with an equity lens	Data disaggregated by underserved populations		Yes	10	out of	10
Program changes for equitable outcomes	Plan to create more equitable program outcomes		Yes	10	out of	10
HMIS data review with equity lens	Plan to review disaggregated data		Yes	10	out of	10
	Equity Factors Subtotal			70	out of	70
OTHER AND LOCAL CRITERIA						
CoC Monitoring Score	Project is operating in conformance to CoC standards	;	Yes	10	out of	10
	Other and Local Criteria Subtotal			10	out of	10
	TOTAL SCORE			182.5	out of	190
	Weighted Rating Score			96	out of	100
PROJECT FINANCIAL INFORMATION						
				_		
CoC funding requested		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		\$		402,324
Amount of other public funding (federal, state, cour	nty, city)			\$		-
Amount of private funding				\$		402.226
TOTAL PROJECT COST				\$		402,324
CoC Amount Awarded Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		\$		203,517
CoC Amount Expended Last Operating Year		NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab		\$		203,517
Percent of CoC funding expended last operating ye	ar				10	00%

Notification of Projects Rejected-Reduced

C MD-506 did not reduce or reject any projects during the 2023 CoC Competition
Carroll County MD (MD- 506)
2022 CoC Attachment 1E5b
ILJU

Standiford, Deborah

F.T. Burden < http://docume.com/incom/i

From: To: Cc: Subject: Date: Attachme

Dear CoC Project Applicants,

The Carroll County Circle of Caring reviewed and voted to accept all of the projects submitted for the 2023 Carroll County MD 506 Continuum of Care Application.

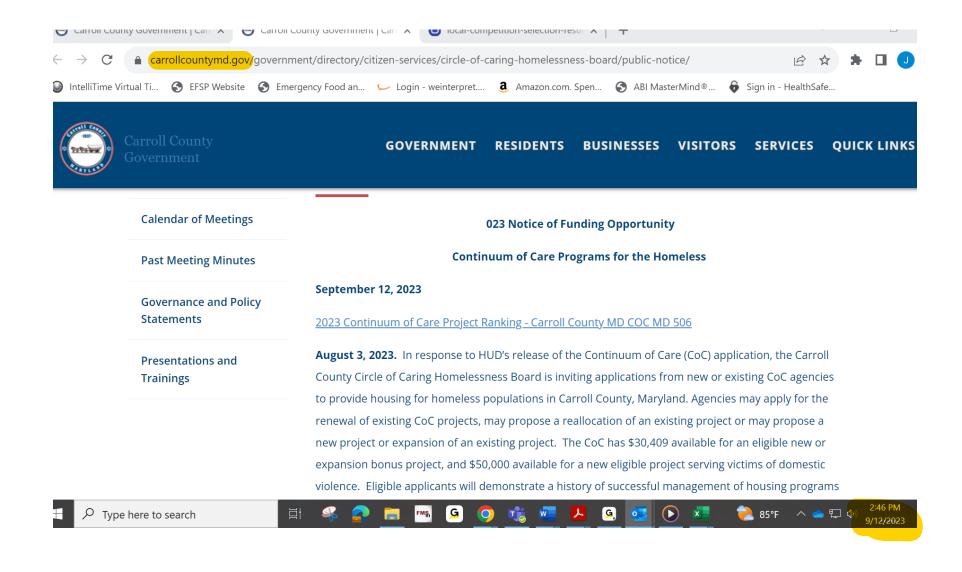
Please see table below for:

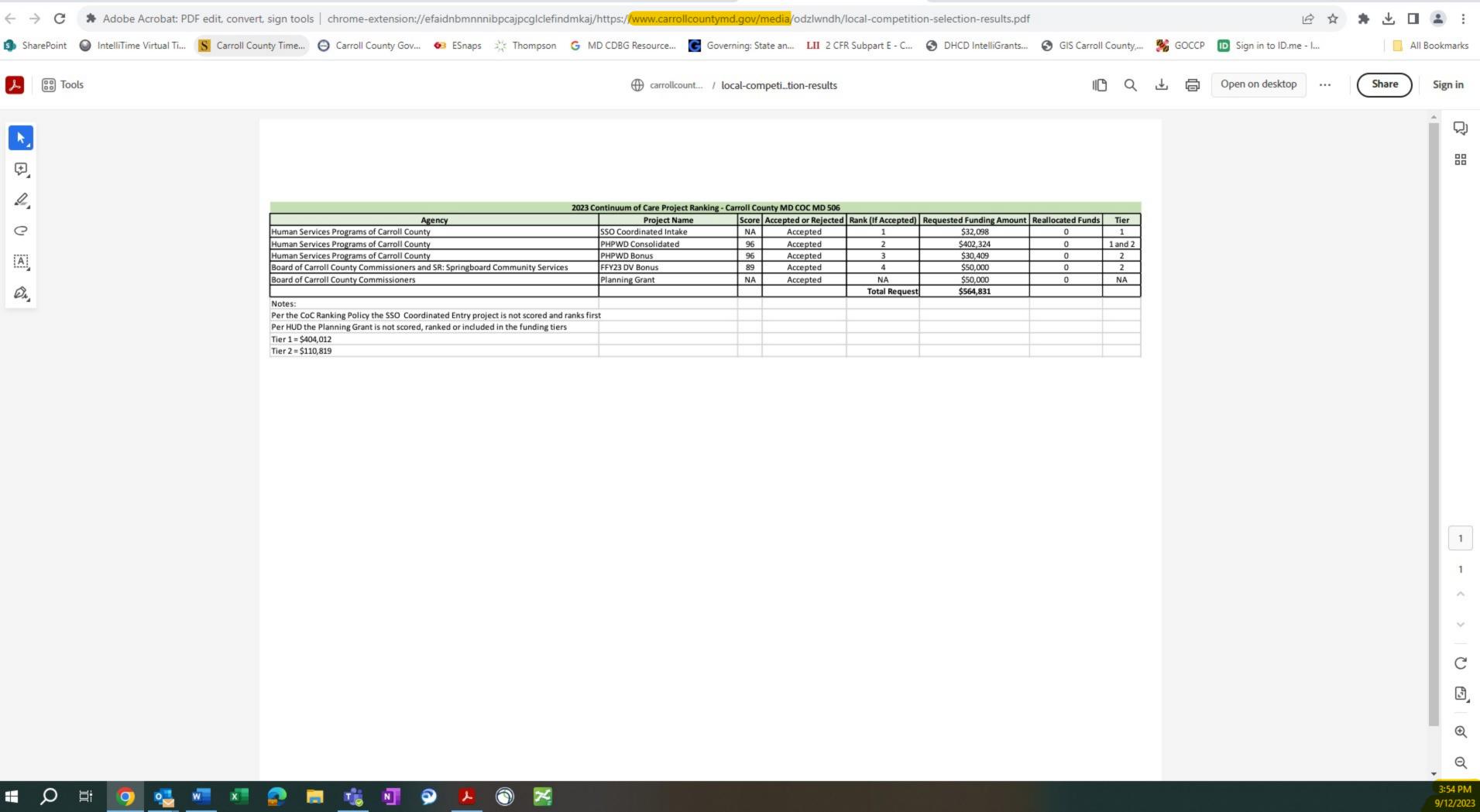
- All Projects
- All Project Rankings
- All Project Scores
- All Funding Amounts

2023 Co	ontinuum of Care Project Ranking - Car	roll Co	unty MD COC MD 506				
Agency	Project Name	Score	Accepted or Rejected	Rank (If Accepted)	Requested Funding Amount	Reallocated Funds	Tier
Human Services Programs of Carroll County	SSO Coordinated Intake	NA	Accepted	1	\$32,098	0	1
Human Services Programs of Carroll County	PHPWD Consolidated	96	Accepted	2	\$402,324	0	1 and 2
Human Services Programs of Carroll County	PHPWD Bonus	96	Accepted	3	\$30,409	0	2
Board of Carroll County Commissioners and SR: Springboard Community Services	FFY23 DV Bonus	89	Accepted	4	\$50,000	0	2
Board of Carroll County Commissioners	Planning Grant	NA	Accepted	NA	\$50,000	0	NA
				Total Request	\$564,831		
Notes:							
Per the CoC Ranking Policy the SSO Coordinated Entry project is not scored and ranks first	t						
Per HUD the Planning Grant is not scored, ranked or included in the funding tiers							
Tier 1 = \$404,012							
Tier 2 = \$110,819							

Thanks

Debby Debby Standiford Grants Manager Carroll County Government 410-386-2212





2023 C	ontinuum of Care Project Ranking - Ca	rroll Co	unty MD COC MD 506				
Agency	Project Name	Score	Accepted or Rejected	Rank (If Accepted)	Requested Funding Amount	Reallocated Funds	Tier
Human Services Programs of Carroll County	SSO Coordinated Intake	NA	Accepted	1	\$32,098	0	1
Human Services Programs of Carroll County	PHPWD Consolidated	96	Accepted	2	\$402,324	0	1 and 2
Human Services Programs of Carroll County	PHPWD Bonus	96	Accepted	3	\$30,409	0	2
Board of Carroll County Commissioners and SR: Springboard Community Services	FFY23 DV Bonus	89	Accepted	4	\$50,000	0	2
Board of Carroll County Commissioners	Planning Grant	NA	Accepted	NA	\$50,000	0	NA
				Total Request	\$564,831		
Notes:							
Per the CoC Ranking Policy the SSO Coordinated Entry project is not scored and ranks first	t						
Per HUD the Planning Grant is not scored, ranked or included in the funding tiers							
Tier 1 = \$404,012							
Tier 2 = \$110,819							

2023 HDX Competition Report PIT Count Data for MD-506 - Carroll County CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	130	85	76	122
Emergency Shelter Total	84	67	65	99
Safe Haven Total	23	0	0	0
Transitional Housing Total	0	0	0	0
Total Sheltered Count	107	67	65	99
Total Unsheltered Count	23	18	11	23

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	28	31	26	13
Sheltered Count of Chronically Homeless Persons	20	22	20	10
Unsheltered Count of Chronically Homeless Persons	8	9	6	3

PIT Count Data for MD-506 - Carroll County CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	6	7	6	10
Sheltered Count of Homeless Households with Children	4	7	6	10
Unsheltered Count of Homeless Households with Children	2	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	6	8	3	6	6
Sheltered Count of Homeless Veterans	6	6	1	4	5
Unsheltered Count of Homeless Veterans	0	2	2	2	1

^{*}For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report HIC Data for MD-506 - Carroll County CoC

HMIS Bed Coverage Rates

Project Type	Total Year- Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year- Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year- Round Beds	Total Year- Round, Current VSP Beds in an HMIS Comparable Database	Total Year- Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	97	79	79	100.00%	0	18	0.00%	79	81.44%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	0	0	0	NA	0	0	NA	0	NA
RRH Beds	43	43	43	100.00%	0	0	NA	43	100.00%
PSH Beds	54	54	54	100.00%	0	0	NA	54	100.00%
OPH Beds	0	0	0	NA	0	0	NA	0	NA
Total Beds	194	176	176	100.00%	0	18	0.00%	176	90.72%

2023 HDX Competition Report HIC Data for MD-506 - Carroll County CoC

HIC Data for MD-506 - Carroll County CoC

Notes

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	30	44	1	1

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	6	5	2	4

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	32	32	43	43

^{*}For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

^{**}For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

2023 HDX Competition Report HIC Data for MD-506 - Carroll County CoC

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for MD-506 - Carroll County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)			Average LOT Homeless (bed nights)		Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	316	332	98	99	1	52	56	4
1.2 Persons in ES, SH, and TH	316	332	98	99	1	52	56	4

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

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

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.

FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference	
1.1 Persons in ES, SH, and PH (prior to "housing move in")	251	363	331	512	181	148	181	33	
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	251	363	331	512	181	148	181	33	

FY2022 - 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		lomelessness n 6 Months		lomelessness 12 Months	Returns to Homelessness from 13 to 24 Months			of Returns Years
	Years Prior)	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	105	8	8%	15	14%	5	5%	28	27%
Exit was from TH	0	0		0		0		0	
Exit was from SH	14	2	14%	1	7%	1	7%	4	29%
Exit was from PH	31	2	6%	2	6%	3	10%	7	23%
TOTAL Returns to Homelessness	150	12	8%	18	12%	9	6%	39	26%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2022 - 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).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	85	76	-9
Emergency Shelter Total	67	65	-2
Safe Haven Total	0	0	0
Transitional Housing Total	0	0	0
Total Sheltered Count	67	65	-2
Unsheltered Count	18	11	-7

Metric 3.2 - Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	340	338	-2
Emergency Shelter Total	340	338	-2
Safe Haven Total	0	0	0
Transitional Housing Total	0	0	0

FY2022 - 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 FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	20	15	-5
Number of adults with increased earned income	1	0	-1
Percentage of adults who increased earned income	5%	0%	-5%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	20	15	-5
Number of adults with increased non-employment cash income	3	1	-2
Percentage of adults who increased non-employment cash income	15%	7%	-8%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	20	15	-5
Number of adults with increased total income	4	0	-4
Percentage of adults who increased total income	20%	0%	-20%

FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	11	10	-1
Number of adults who exited with increased earned income	0	2	2
Percentage of adults who increased earned income	0%	20%	20%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	11	10	-1
Number of adults who exited with increased non-employment cash income	6	2	-4
Percentage of adults who increased non-employment cash income	55%	20%	-35%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	11	10	-1
Number of adults who exited with increased total income	6	4	-2
Percentage of adults who increased total income	55%	40%	-15%

FY2022 - 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 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	304	291	-13
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.	55	66	11
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)	249	225	-24

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	341	336	-5
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.	65	96	31
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.)	276	240	-36

FY2022 - 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 FY2022 (Oct 1, 2021 - Sept 30, 2022) 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 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	36	62	26
Of persons above, those who exited to temporary & some institutional destinations	3	30	27
Of the persons above, those who exited to permanent housing destinations	8	9	1
% Successful exits	31%	63%	32%

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

FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	249	254	5
Of the persons above, those who exited to permanent housing destinations	96	95	-1
% Successful exits	39%	37%	-2%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	70	56	-14
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	66	54	-12
% Successful exits/retention	94%	96%	2%

FY2022 - SysPM Data Quality

MD-506 - Carroll County CoC

		All ES, SH	ı		All TH		Al	I PSH, OP	Н		All RRH		All S	reet Outi	reach
	Submitted FY2020	Submitted FY2021	FY2022												
1. Number of non- DV Beds on HIC	77	133	75				40	59	59	32	32	43			
2. Number of HMIS Beds	76	133	74				40	59	59	32	32	43			
3. HMIS Participation Rate from HIC (%)	98.70	100.00	98.67				100.00	100.00	100.00	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	311	340	338	0	0	0	47	35	51	76	78	92	57	88	90
5. Total Leavers (HMIS)	291	249	268	0	0	0	8	11	11	36	24	40	31	40	31
6. Destination of Don't Know, Refused, or Missing (HMIS)	58	67	68	0	0	0	0	0	0	1	0	0	13	0	5
7. Destination Error Rate (%)	19.93	26.91	25.37				0.00	0.00	0.00	2.78	0.00	0.00	41.94	0.00	16.13

FY2022 - SysPM Data Quality

2023 HDX Competition Report Submission and Count Dates for MD-506 - Carroll County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/24/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/28/2023	Yes

DEPARTMENT OF CITIZEN SERVICES

10 Distillery Drive, Suite 101 Westminster, Maryland 21157-5194 1-410-386-3600 1-888-302-8978 Fax 410-876-5255

TTY Users (MD Relay): 711/800-735-2258



Danielle M. Yates
Bureau Chief
Bureau of Housing and
Community Connections

September 19, 2023

To Whom It May Concern:

Through the 2023 CoC NOFO competition, Carroll County's CoC (MD506) is applying for a Bonus project for one new units of Permanent Supportive Housing (PSH). Carroll County's Public Housing Agency commits one Housing Choice Voucher, through the PHA's Move-On Strategy as detailed in the annually updated Administrative Plan. The voucher will be included in the CoC's Coordinated Entry Process, will be tracked using HMIS, and reserved for households who meet all eligibility requirements for PSH. The voucher will be available from July 1, 2024, through June 30, 2025. For more than nine years, the PHA in Carroll County has supported homeless households using both a set-aside process and a formal Move-On Strategy. The PHA is pleased to formalize this proves, using CE and HMIS to continue to provide permanent housing solutions to domestic violence clients in Carroll County.

Danielle M. Yates Bureau Chief.

Sincerely

Housing & Community Connections

DEPARTMENT OF CITIZEN SERVICES 10 Distillery Drive, Suite 101 Westminster, Maryland 21157-5194 1-410-386-3600 1-888-302-8978

Fax 410-876-5255 TTY Users (MD Relay): 711/800-735-2258



Danielle M. Yates **Bureau Chief Bureau of Housing and Community Connections**

September 19, 2023

To Whom It May Concern:

Through the 2023 CoC NOFO competition, Carroll County's CoC (MD506) is applying for a DV Bonus project for two new units of Rapid Re-housing. Carroll County's Public Housing Agency commits one Housing Choice Voucher, through the PHA's Move-On Strategy as detailed in the annually updated Administrative Plan. The vouchers will be included in the CoC's Coordinated Entry Process, will be tracked using HMIS, and reserved from domestic violence households who meet all eligibility requirements for Rapid Re-housing. The vouchers will be available from July 1, 2024, through June 30, 2025. For more than nine years, the PHA in Carroll County has supported homeless households using both a set-aside process and a formal Move-On Strategy. The PHA is pleased to formalize this proves, using CE and HMIS to continue to provide permanent housing solutions to domestic violence clients in Carroll County.

Sincerely.

Danielle M. Yates Bureau Chief.

Housing & Community Connections



September 14, 2023

To Whom It May Concern:

Carroll County's Continuum of Care is applying for a Bonus Permanent Supportive (PSH) Housing project with a total budget of \$30,409. Access Carroll, Inc., the CoC's only community healthcare clinic for low income and uninsured residents, commits a minimum of 25%, \$7,602.25, in healthcare to participants in this new project. Services will be available from July 1, 2024, through June 30, 2025. For more than ten years Access Carroll has partnered with the CoC to provide integrated healthcare, including medical, dental, and behavioral health services paired with intensive case management and peer support to individuals and household experiencing homelessness. Access Carroll is pleased to formalize this support through the 2023 CoC NOFO application and to partner with Human Services Program, the agency administering the CoC's PSH projects, to deliver these critical services.

Most sincerely,

Tammy Black, BSN, RN

Executive Director and CEO

Email: tblack@lifebridgehealth.org

Office: 410-967-9793 www.accesscarroll.org



September 14, 2023

To Whom It May Concern:

Carroll County's Continuum of Care (CoC) is applying for a Domestic Violence (DV) Rapid Rehousing Bonus project with a total budget of \$50,000. Access Carroll, Inc., the CoC's only community healthcare clinic for low income and uninsured residents, commits a minimum of 25%, \$12,500, in healthcare to participants in this new project. Services will be available from July 1, 2024, through June 30, 2025. For more than ten years, Access Carroll has partnered with the CoC to provide integrated healthcare, including medical, dental, and behavioral health services paired with intensive case management and peer support to individuals and households experiencing domestic violence and homelessness. Access Carroll is pleased to formalize this support through the 2023 CoC NOFO application and to partner with Springboard Community Services, the agency administering the CoC's DV Bonus Project, to deliver these critical services.

Most sincerely,

Tammy Black, BSN, RN Executive Director and CEO

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