

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 HUD's funding determination.

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

1A. Continuum of Care (CoC) Identification

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

- Notice of Funding Opportunity (NOFO) 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: VA-502 - Roanoke City & County, Salem CoC

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

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Council of Community Services

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;
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- 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)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	No	Yes
6.	Homeless or Formerly Homeless Persons	Yes	No	Yes
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	Yes	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	No	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes

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

By selecting "other" you must identify what "other" is.

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).	

(limit 2,500 characters)

A letter of invitation to the community encourages individuals and organizations to join the CoC and is posted on the CoC’s website as well as the planning entity’s website. This letter from the Chair of the CoC invites conversation and dialogue to promote progress in making homelessness in our community rare, brief and one-time. Partner agency recruitment is a year-round process conducted by the CoC Chair, the planning entity and CoC Board members. Social media postings, email notifications, local websites and community education is used to conduct outreach to the community to solicit new members. Interested parties are invited to submit a membership application to join the CoC.

The CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats. The CoC and City of Roanoke websites include guidance regarding the use of assistive technology, such as a Braille reader, a screen reader and TTY. Users who need accessibility assistance can also use the Federal Information Relay Service for TTY/Voice communication. The websites have been designed to comply with Section 508 as well as 2.0 A and AA accessibility standards.

Our community’s Center for Independent Living serves on our CoC, representing individuals with disabilities. Organizations led by people of color serve on our CoC, Governing Board and Ranking Committee to ensure our system’s planning and funding decisions are made with input from these populations. These organizations include Total Action for Progress, the Salem VA Medical Center’s homeless services department and Church Women United.

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

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

(limit 2,500 characters)

The CoC solicited and considered opinions from a broad array of organizations and/or persons that have an interest in preventing or ending homelessness through a multi-pronged approach. This approach included 1) an open invitation posted on four websites to join and attend bi-monthly meetings of the CoC and subcommittees; 2) facilitation of focus group meetings with special interest groups such as individuals with lived experience currently residing in our community’s emergency shelters and in encampments; 3) community presentations and forums to solicit input from community stakeholders including City Councils, business groups, neighborhoods, police departments and medical service providers; 4) attending best practice conferences to learn from experts in the field.

CoC leaders have conducted a series of four town hall events this year with neighborhood associations, business groups and faith communities to present information on our local homeless services system and solicit input and feedback from these stakeholders in making our system more effective. The public forums have also been used to leverage support from the groups to fill service gaps, advocate for policy solutions and to solicit volunteers and donations to support of efforts.

The CoC posts meeting notices on its website and used a variety of posts through social media platforms to engage people, solicit ideas and encourage collaboration. The CoC Chair and other CoC leaders attend the National Alliance to End Homelessness’ National Conference on Ending Homelessness, the Virginia Governor’s Housing Conference, the Virginia Housing Alliance’s Housing Virginia’s Most Vulnerable Conference and Community Solutions’ Built for Zero Learning Sessions to learn best practices on preventing and ending homelessness from state and national experts.

Information gathered from these public meetings and best practices conferences have been used to address improvements and new approaches to preventing and ending homelessness through our strategic planning and business plan development processes. Examples of system improvements made through this process include more effective targeting of our homelessness prevention resources, implementing effective rapid rehousing services and Housing First strategies and using by-name list case conferencing to reduce homelessness in our community.

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

(limit 2,500 characters)

On July 28, 2023, the public was notified that the CoC local competition was open and accepting project applications, including proposals from organizations that have not previously received CoC Program funding. Notifications were made through postings to the CoC website and through the social media accounts of the CoC and planning entity. The notification included details on the application submission process, local competition deadlines and encouraged those interested in applying to contact the CoC Chair or the Planning Agency for information on local funding priorities and detail on how to submit project applications. The public announcement included the CoC’s Rating and Review Procedure and project executive summary documents, which are used by the CoC Ranking Committee to review and rank new and renewal project applications and to determine which applications will be accepted for submission to HUD. Potential applicants were provided the contact information of the CoC Lead and planning entity through these public postings and were encouraged to reach out to these contacts should applicants have questions about the local competition process.

Our CoC has developed a capacity screening tool to determine whether applicants meet the minimum capacity threshold necessary to submit a project application to HUD. This tool is used to evaluate and select projects regardless of whether the organization currently receives CoC Program funding, but the process is particularly helpful in evaluating the organizational capacity of new applicants. The screening tool evaluates each applicant’s ability to implement services in alignment with Housing First principles and includes other evaluation components such as experience working with homeless subpopulations, organizational capacity, previous monitoring outcomes or adverse findings; and Federal grant management experience.

The CoC ensures effective communication with individuals with disabilities, including making information accessible in electronic formats. As the primary public notification platforms for proposals, the CoC and City of Roanoke websites meet the Web Content Accessibility Guidelines (WCAG), making the public notification process accessible to individuals with disabilities.

1C. Coordination and Engagement

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

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

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

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

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.

(limit 2,500 characters)

The CoC actively consults with the City of Roanoke HUD Resources Division (ESG recipient) in the planning and allocation of funding. A public meeting is held annually by the City of Roanoke to announce the availability of ESG funding. The CoC Lead and CoC Board Chair meet with the City of Roanoke HUD Resources Division (CRHRD) prior to the release of the Request for Proposals (RFP) to discuss use of resources, policy priorities and to jointly coordinate a system-wide approach that addresses community need and supports best practice service models.

The Blue Ridge Interagency Council on Homelessness (BRICH/CoC Board) sets policy priorities for the use of ESG funds, reviews and ranks all funding applications and makes recommendations for funding to the City of Roanoke HUD Resources Division.

The CRHRD, in consultation with the CoC, has set performance measures for each ESG-funded activity. These performance measures are in alignment with HUD and State measures to reduce and end homelessness and contribute to the performance of our broader service system. ESG subrecipients are expected to meet the performance standards set by the CoC and CRHRD. Subrecipient performance is monitored annually through the CAPER reporting process, which is coordinated between the CRHRD, the CoC Lead and the CoC planning entity. The CoC and CoC Governing Board review our community's performance metrics on a monthly basis.

Point-in-Time (PIT) Count and Housing Inventory Count (HIC) data are provided to the CRHRD annually for inclusion in the City of Roanoke's Consolidated Plan updates. The leadership and program staff that administer the City of Roanoke's CDBG, HOME and ESG funding sit on the CoC Board and the CoC planning committee. CRHD staff also coordinate our community's project ranking and review process for the HUD Continuum of Care Program application, which provides further alignment in the planning and allocation of our ESG resources.

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

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

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

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

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

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

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

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

(limit 2,500 characters)

Our CoC has a formal partnership with our community’s primary Local Education Agency (LEA) and our local school district, Roanoke City Public Schools (RCPS). A seat on our governing board is reserved through our governance charter for the RCPS Homeless Student Liaison. In addition to providing policy oversight and making funding decisions as part of the governing board, the Liaison attends and actively participates in CoC planning meetings and client case conferencing meetings. The Liaison works closely with all other school divisions in our CoC to disseminate information on McKinney-Vento eligibility for individuals and families who qualify for services, providing a collaboration point between the CoC and other school districts. The Liaison attends meetings of the State Education Agency (SEA) and provides updates from these meetings to the CoC Board and planning committee, facilitating collaboration between both entities.

Our CoC’s coordinated entry policies and procedures further formalizes this partnership with our LEA by requiring all CoC, ESG and State-funded projects providing services to families with school-age children who qualify for homeless education services, to connect these families to the Homeless Student Program Liaison with Roanoke City Public Schools, or to the homeless education service contact in their school district. Our local Community Action Agency, Total Action for Progress (TAP), administers the Early Head Start and Head Start programs and other US Department of Labor-funded educational programs for youth enrolled in public school. TAP is a member of our CoC governing board and planning committees. Youth-based education programs offered through TAP include mentorship, cultural workshops, SOL and SAT preparatory classes and workshops in financial aid and college life. Staff from TAP’s youth educational programs participate in our client by-name list case conferencing meetings. This active participation in our CoC committees ensures children and youth in our homeless services system have streamlined access to these educational programs.

1C-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.

(limit 2,500 characters)

Our CoC coordinated entry policies and procedures, which have been adopted by our CoC, require any partnering agency providing services to families with school-age children who qualify for homeless education services, to connect those families to the Homeless Student Program Liaison with Roanoke City Public Schools, or to the homeless education service contact in their school district. The Roanoke City Public Schools (RCPS) Homeless Student Liaison is the primary educational service provider in our Continuum of Care, serving the vast majority of homeless students in our service system. The RCPS policy and procedures manual contains a section describing eligibility and how students and families experiencing homelessness can connect to educational services. These policies are distributed to emergency shelter staff, to families at back to school meetings, and to students by school guidance counselors throughout the year. Posters, brochures and other marketing materials are provided to families at all CoC program sites.

The Homeless Student Liaison is also an active member of our CoC planning committee and our client by-name list case conferencing committees, providing further linkages between educational services and our homeless programs that serve school-age children. The Homeless Student Liaison also works one-on-one with area shelters on protocols for identification and to ensure school enrollment through Local Educational Agencies (LEA). The LEA develops and follows procedures for information sharing consistent with McKinney-Vento requirements. These written policies and coordinated activities ensure that individuals and families who become homeless in our CoC are informed of their eligibility for educational services.

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	No
4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	Yes
6.	Head Start	Yes	No
7.	Healthy Start	No	No
8.	Public Pre-K	No	Yes
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	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	Yes
2.	state sexual assault coalitions	Yes
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:

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

(limit 2,500 characters)

The CoC regularly collaborates with organizations in our community who help provide housing and services to survivors of domestic violence, dating violence, sexual assault and stalking. These organizations include the Salvation Army’s Turning Point shelter, Total Action for Progress’ Domestic Violence Services (TAP DVS) and SafeHome Systems. Each of these agencies are local victim service providers who provide critical safe overnight shelter and supportive services to meet the needs of individuals and families fleeing intimate partner and family violence.

Each of these victim service providers are members of our Continuum of Care and participate in regular meetings of our CoC planning committee and strategic plan work groups. These agencies are active participants in our community’s Coordinated Entry System (CES) Refinement Lab work to ensure our community processes include access to services for individuals fleeing violence. This local Coordinated Entry work group is developing improvement strategies around each of the CES core elements and is updating our CoC-wide prioritization policies and assessment procedures. This work is being conducted in partnership with the victim service providers previously referenced.

Annual training on resiliency and trauma-informed care is provided annually to CoC project staff through the Homeless Educators Linking Providers (HELPS) Committee of the CoC. The Roanoke Valley Violence Prevention Council, a standing committee of the CoC Planning Entity, also provides annual DV trainings to CoC project and Coordinated Entry staff on topics such as trauma-informed care, safety and planning protocols, victim-centered services, sexual assault response and DV 101. The trainings are provided by certified trauma-informed trainers from Total Action for Progress (TAP) and Sexual Assault Response and Awareness (SARA). Safety planning protocols have been incorporated into our coordinated entry policies and procedures. When DV participants are identified through coordinated entry, they are immediately referred to agencies with expertise in providing victim centered practices and trauma-informed services, ensuring that safety and planning protocols are implemented by subject matter experts and in alignment with best practices.

These trainings and policies ensure that all housing and services provided in the CoC are trauma-informed and can meet the needs of survivors.

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).	

(limit 2,500 characters)

The CoC coordinates with victim services providers to provide training to CoC area projects and Coordinated Entry staff on best practices related to safety and planning protocols in serving survivors of domestic violence through monthly meetings of the Homeless Educators Linking Providers (HELPS) Committee of the CoC. The Roanoke Valley Violence Prevention Council, a standing committee of the CoC Planning Entity, provides annual DV training to CoC project and Coordinated Entry staff on best practice topics such as trauma-informed care, safety and planning protocols, victim centered services, sexual assault response and DV 101 through these monthly meetings of the HELPS Committee. The trainings are provided by certified trauma-informed trainers from Total Action for Progress (TAP) and Sexual Assault Response and Awareness (SARA). Safety planning protocols have been incorporated into our coordinated entry policies and procedures. When DV participants are identified through coordinated entry, they are immediately referred to agencies with expertise in providing victim-centered practices and trauma informed services, ensuring that safety and planning protocols are implemented by subject matter experts and in alignment with best practices.

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.	

(limit 2,500 characters)

Safety, planning and confidentiality protocols are incorporated into our CoC's coordinated entry processes to address the needs of domestic violence, dating violence, sexual assault, and stalking survivors. When survivors are identified through coordinated entry, they are immediately referred to agencies with expertise in providing victim-centered practices and trauma-informed services. This ensures appropriate safety and planning protocols are in place as survivors move through our service system.

Survivors are placed on our community's by-name list using a de-identified code that is generated out of the confidential VAdata (HMIS comparable) system and are case conferenced for housing placements using this code to ensure confidentiality is maintained. Names and other personal identifying information of survivors are never shared in our community case conferencing meetings. When participants are matched to a housing resource, the assigned housing navigator works with the participant to identify housing options that maximizes client choice while ensuring safety and confidentiality. The physical locations of victim services providers are not published in our community's resource documents or systems, providing an additional layer of safety and confidentiality.

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.	

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.

(limit 2,500 characters)

The CoC uses de-identified aggregate data from VAdata (an HMIS comparable database) managed by the Virginia Sexual and Domestic Violence Action Alliance to assess the special needs related to domestic violence, dating violence, sexual assault and stalking survivors. All of the providers serving these populations in our community use the VAdata system in alignment with the FY 2022 HMIS data standards published by HUD. VAdata is Virginia's web-based data collection system, which was developed to enhance and improve the collection of statewide data from all survivors who use the services of domestic violence, dating violence, sexual assault and stalking agencies across the State. This project began in April of 1996 through the support of the Violence Against Women Act. VAdata has served as a tool to capture the services provided to survivors of sexual and/or domestic violence since its inception.

Local victim service providers enter program level data in the VAdata system and provide de-identified data to the HMIS lead. Data are then aggregated and become a part of our annual assessment of service needs for all individuals accessing homeless services in our community. These data are used when preparing the annual Point-In-Time Count, Housing Inventory Count and our local Homelessness Outcomes Report to assist our community in identifying service gaps, in measuring system performance and in prioritizing housing resources for violence victims.

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.

(limit 2,500 characters)

Our CoC has modified and adopted the HUD-recommended domestic violence emergency transfer plan that is used by all of our HUD CoC, State and ESG-funded service providers. All households seeking or receiving services through our CoC housing projects that are funded with CoC Program, State and Emergency Solutions Grant (ESG) resources are provided a copy of and informed of the transfer plan. This process is followed for all households seeking or receiving services through these projects, regardless of known survivor status.

This CoC policy allows for clients who may experience violence or stalking to request an emergency transfer from the client’s current housing and/or service location to another safer location. The ability to request an emergency transfer is available to all participants. To request an emergency transfer, the project participant shall notify project staff and submit a written request for a transfer to the Emergency Transfer designee at the agency in which services are being sought or received. Projects provide reasonable accommodations to this policy for individuals with disabilities. The tenant’s written request for an emergency transfer must include either:

1.A statement expressing that the tenant reasonably believes that there is a threat of imminent harm of further violence if the tenant were to remain in the same dwelling unit assisted under the program; OR

2.A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant’s request for an emergency transfer.

The ability of agencies to honor such requests depends on a preliminary determination that the participant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether the agency has another available unit that is safe to offer the participant for occupancy.

If a unit is available, the transferred tenant must agree to abide by the terms and conditions that govern occupancy in the unit to which the tenant has been transferred. If there are no safe and available units for which a tenant who needs a transfer is eligible, the agency will assist in identifying other housing providers who may have safe and available units to which the tenant could move. The agency will also assist tenants in contacting local organizations offering assistance to victims of domestic violence, dating violence, sexual assault, or stalking.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
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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.

(limit 2,500 characters)

Survivors of domestic violence, dating violence, sexual assault and stalking have access to all of the housing and services available within the CoC geographic area through our community’s integrated Coordinated Entry System (CES). Our community’s victim service providers all use our CoC’s common assessment tool and individuals in these programs are matched to housing resources through our case conferencing process in alignment with our prioritization policies. Through our CES, domestic violence participants are placed on the appropriate by-name list using a de-identified code that is generated out of the confidential VAdata (HMIS comparable) system and are case conferenced for housing placements using this code to ensure confidentiality. When participants are matched to a housing resource, the assigned housing navigator works with the participant to identify housing options that maximizes client choice while ensuring safety and confidentiality. Resources matched through this process includes all of our community rapid rehousing and permanent supportive housing services.

Individuals in our community DV programs are also referred through our coordinated entry process to Emergency Housing Voucher services and to the Housing Choice and Mainstream Voucher programs at our local Public Housing Authority (PHA) using the homeless preference we have implemented with our PHA partner. Our integrated coordinated entry system ensures that participants in our community DV programs have access to the full inventory of housing and services available in our CoC, not just to the resources provided through victim service organizations.

Our CoC uses a broad stakeholder committee to conduct ongoing evaluation, planning and refinement implementation to our Coordinated Entry System. This stakeholder committee includes victim service providers and utilizes HUD-published guidance to evaluate the four core elements of our Coordinated Entry System to proactively identify systemic barriers and service gaps for all populations, including survivors. Recent system refinements that have been implemented as a result of this ongoing, proactive evaluation and refinement work include additional assessment and referral training for victim service provider staff, and refinements to how survivors are case conferenced in community meetings and matched to housing resources.

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)

The Continuum of Care utilized its partnerships with domestic violence service providers to recruit, safely engage, and train survivors with a broad range of lived expertise to participate in our Coordinate Entry refinement work. Front line staff from Total Action for Progress’ (TAP) Domestic Violence Services program were recruited to participate in our Coordinated Entry committee to provide feedback on system refinements, particular emphasis was placed on how the system design can best accommodate the needs and safety considerations of survivors. The staff that participated in this system-level planning work are recent survivors who gained lived experience as homeless and a survivor in our service system, providing a unique and valuable perspective on the needs of survivors and the how the design of our local system impacts this population. These individuals with lived experience were compensated and trained by their employer while participating in this planning process. Feedback from these survivors were used to develop our community’s assessment and referral process for survivors, which has ensured the safety and privacy needs of this population are met, while also ensuring survivors have access to the full array of housing resources in the community.

To accommodate the unique needs of survivors, the CoC has developed an assessment process (as part of our Coordinated Entry System) that asks survivors (and all individuals being assessed in our system) for their name, gender and language preferences. The CoC has developed a language card that allows participants to identify their primary language non-verbally. A paper copy of our Coordinated Entry assessment is available to ensure privacy and safety considerations are accommodated for individuals who may be in extreme danger and where verbal communication may increase safety risks. Our community case conferencing processes do not identify survivors by name. A unique identifier from the HMIS-comparable database is used for case conferencing and resource matching purposes for this population. Names and other personal identifying information of survivors are never shared in our community case conferencing meetings. The physical locations of victim services providers are not published in our community’s resource documents or systems, providing an additional layer of safety and confidentiality.

1C-6.	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 and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

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

Describe in the field below:

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

(limit 2,500 characters)

Our CoC addresses the needs of the protected class individuals in our community by ensuring services are provided in an inclusive non-discriminatory manner. Our CoC has a robust anti-discrimination policy for all of our homeless assistance projects, regardless of funding source, as part of our CES policies and procedures. The policy is updated as necessary based on stakeholder feedback.

During the community’s annual monitoring process, project compliance with the Equal Access Rule, Gender Identity Final Rule and CoC-wide antidiscrimination policy is reviewed. Technical assistance is provided to providers on these requirements if deficiencies are identified through the monitoring process. Technical assistance may include revisions to and development of project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that project staff are trauma-informed and that agencies are able to meet the needs of LGBTQ+ individuals and families.

Training on our anti-discrimination policy is provided at our quarterly service provider-level committee meetings. Service providers also receive annual cultural competency and equal access training from LGBTQ+ service organizations to include the Drop-In Center, Roanoke Diversity Center and other subject matter experts and individuals with lived experience. Feedback from these stakeholders are also used to update our CoC-wide anti-discrimination policy. The trainings are also used to assist organizations in developing and updating project-level policies that are in alignment with the CoC-level anti-discrimination policy.

CoC-funded agencies and the Coordinated Entry System (CES) utilize gender appropriate language on assessments and service providers deliver information to clients at intake on how to report housing, shelter and service discrimination. CoC agency staff also participate in bi-annual trainings through the City of Roanoke’s Fair Housing Board on how to effectively address Fair Housing non-compliance, including compliance with the Equal Access Rule and the Gender Identity Final Rule.

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

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

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

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Roanoke Redevelopment and Housing Authority	57%	Yes-Both	Yes

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

Describe in the field below:

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

(limit 2,500 characters)

The CoC has implemented a homeless admission preference with the Roanoke Redevelopment and Housing Authority (RRHA), the only active PHA in our CoC. The preference is incorporated into the RRHA’s Administrative Plan, which was adopted by the RRHA’s Board of Directors in late 2018.

Under this admission preference, the RRHA gives a preference to applicants meeting all of the following criteria:

- a) Meet the HUD definition of homeless.
- b) Are referred to the RRHA by a CoC provider with whom the RRHA has executed a Memorandum of Understanding (MOU) outlining the provider’s responsibilities to provide supportive services for the referred household.
- c) Have received a written commitment from the CoC provider to offer supportive services on an as needed basis to help the household transition from homelessness to permanent housing by providing housing search assistance; and
- d) Have received a written commitment from the CoC provider to offer supportive services to help the household maintain housing stability and comply with lease obligations once housed.

Individuals and families “moving on” from permanent supportive housing (PSH) projects are also included as a part of this homeless preference. In these cases, the PSH provider conducts an objective service needs assessment to determine whether the household has a continued need for the high level supportive services offered by the PSH program. If the household no longer needs high level services, then the household can be referred to the RRHA for a housing voucher and “moved on” from the PSH project. This allows for the PSH unit to then be filled by another household experiencing chronic homelessness who needs intense supportive services.

This homeless admission preference was implemented in January 2019 when the RRHA opened applications for its Housing Choice and Mainstream Voucher programs.

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

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

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

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

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

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

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

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Mainstream and Emergency Housing Vouchers

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

	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored–For Information Only	

Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA

City of Roanoke R...

1C-7e.1. List of PHAs with MOUs

Name of PHA: City of Roanoke Redevelopment and Housing Authority

1D. Coordination and Engagement Cont'd

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

- Notice of Funding Opportunity (NOFO) 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

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 not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	4
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	4
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

The CoC regularly evaluates every recipient that checks Housing First on their project application to determine if they are using a Housing First approach by evaluating the following factors and performance indicators:

- Project discharges are evaluated through monitoring
- Reasons for referral denials are tracked and reported through our Coordinated Entry System

CoC projects are monitored by the CoC Lead and planning entity. As part of this monitoring process, projects are evaluated for compliance with Housing First principles. Files of participants who have been discharged from the project are reviewed to ensure households are not discharged based on any set preconditions or service participation requirements. If deficiencies are identified, the CoC Lead and planning entity provide technical assistance and connection to training opportunities to ensure fidelity to these principles is maintained.

Project adherence to Housing First principles is also evaluated through our Coordinated Entry referral process. Households entering our community’s rapid re-housing and permanent supportive housing projects are referred through case conferencing meetings of our Housing Placement Teams. Households are referred to these projects following our community’s Coordinated Entry prioritization policies, which are aligned with Housing First principles. Referred households are discussed at subsequent Housing Placement Team meetings to ensure rapid, low barrier placement. If barriers or preconditions are identified, the Teams resolve them collaboratively through these meetings. Referrals to our community’s housing projects must be accepted by providers. If referrals are declined, providers are required to provide a reason for the denial to the CoC coordinated entry lead staff person. Reasons for denial are tracked by CES staff and denials not in alignment with Housing First principles are reported to the CoC Lead and planning entity for resolution.

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.

(limit 2,500 characters)

Our community’s primary street outreach provider, the City of Roanoke’s Homeless Assistance Team (HAT), a HUD-funded project, provides coordinated and consistent outreach and engagement efforts to bring services directly to people experiencing unsheltered homelessness. HAT conducts field intakes each afternoon to ensure clients least likely to request assistance are connected to services.

HAT partners with the City of Roanoke’s Parks and Recreation, Police, and Code Enforcement departments to conduct joint outreach and to alert each other of encampment locations. Leadership and staff of the four departments meet in-person regularly to coordinate services. Outreach alerts and follow up messages are sent amongst members of the group on an on-going basis. HAT staff develop rapport, build relationships and connect clients to shelter resources, permanent housing options and supportive services through our community’s housing placement committees.

HAT outreach services cover 100 percent of our CoC’s geographic area. Upon request, but not less than quarterly, outreach is conducted in the rural areas of our CoC. Using a “quadrant” system, staff sweep the NE, NW, SE, and SW sections of the City on alternating days. Workers meet basic needs first and build relationships over time using progressive engagement techniques for the most service-resistant clients. HAT tracks locations of known encampment sites throughout our CoC coverage area using Excel spreadsheets to ensure outreach efforts throughout our CoC are comprehensive and consistent.

One HAT case manager is a bilingual Spanish-speaker and American Sign Language (ASL) interpreter. The Team also uses language access services on mobile devices in the field and through in-office phone services through the City of Roanoke to ensure non-English speakers are able to access services. Housing and supportive services are marketed through resource cards used by outreach teams to further Fair Housing. Large print marketing materials are available for those with vision impairments.

HAT also collaborates with Salem VAMC and Community Services Board (CSB) staff to conduct joint outreach to Veterans and those with severe mental illness and substance use disorder. HAT staff enter client data in HMIS and ensure referrals are made to the community’s housing placement teams for case conferencing. All outreach services in our community are housing-focused and client-centered.

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)		

1D-5.	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	64	88

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

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

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

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

Describe in the field below how your CoC:

1.	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.

(limit 2,500 characters)

1. The Blue Ridge Continuum of Care hosts a monthly resource meeting for service providers throughout the CoC geographic area, particularly front-line staff. This monthly meeting is attended by local homeless service provider staff, departments of social services, health departments, healthcare organizations, substance abuse programs, mental health treatment programs, harm reduction programs, and other social/human services programs. The monthly agenda contains a time for an organization to present information about its programs and resource sharing between organizations. Up-to-date information on accessing mainstream resources is shared by representatives of the respective agencies that provide these services. Minutes are kept and sent out to all in attendance and for those unable to attend.

2. The CoC by-name list committees conduct bi-weekly case conferencing meetings to coordinate housing solutions and ensure clients' healthcare, mental health, and substance use needs are coordinated. Representatives from the local health department, free clinics, community services board, and harm reduction organizations attend these meetings and provide linkages to care. Staff from mental health support organizations hold regular office hours on-site at our street outreach drop-in site locations, day shelters and overnight emergency shelters to facilitate connecting to these critical services.

3. The CoC works with local SOAR representatives to ensure those eligible for SSI/SSDI are connected and working with these staff to submit their applications. The local SOAR representative attends our by-name list case conferencing meetings and holds regular office hours at our street outreach drop-in site and at emergency shelters to ensure individuals eligible for SSI/SSDI benefits receive expedited application assistance.

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.

(limit 2,500 characters)

Our CoC implemented a new non-congregate sheltering program for highly vulnerable unsheltered individuals to provide protection from infectious diseases during the height of the COVID-19 pandemic. These services were funded with ESG-CV resources. The CoC developed a prioritization system for these high-risk individuals and managed the 90-bed non-congregate program for 14 months. Individuals were sheltered at two hotels in Roanoke County. Staff from local CoC partners provided case management and oversight of basic services. At the end of the sheltering period, the majority of individuals from this non-congregate shelter were transitioned into permanent housing.

In addition to this non-congregate sheltering for those experiencing unsheltered homelessness, Total Action for Progress (TAP) has implemented scattered-site, non-congregate shelter services for individuals fleeing domestic violence. These services were also originally funded with ESG-CV resources. As our local ESG-CV funds have been expended, the CoC has worked with TAP to identify additional funding sources to continue to provide these services. The CoC is receiving funding from the Virginia Department of Housing and Community Development (DHCD) for TAP to continue providing these critical resources for the community. This new funding will increase the capacity of our community to provide low barrier non-congregate sheltering as an alternative to other shelter options, while preventing the spread of infectious diseases and protecting highly vulnerable individuals.

Total Action for Progress (TAP) has also utilized fund their Supportive Services for Veteran Families (SSVF) grant to provide non-congregate shelter services to unsheltered Veterans. This resource has further increased our community’s capacity to provide non-congregate sheltering for people experiencing unsheltered homelessness in our community, while also preventing the spread of infectious disease for this highly vulnerable population.

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.	

(limit 2,500 characters)

The CoC has worked with the local health department, health care providers and hospital systems, since the beginning of the COVID-19 pandemic to respond to infectious disease outbreaks and to prevent outbreaks among people experiencing homelessness. Local health officials have provided the CoC timely and important information about the virus and how it may affect clients and services. CoC partners have received valuable information about decreasing the spread of the virus in individuals and families experiencing homelessness and specific information about how the virus spreads within the community. CoC partners have hosted outreach events with local officials, providing masks, hand sanitizer, and information about COVID-19 and how to stay healthy and limit spread. CoC providers installed hand washing stations throughout their facilities and instituted masking and social distancing policies to keep staff and clients safe. The CoC hosted training for front line staff with the local health department on topics related to COVID19 safety and vaccination frequently asked questions.

In addition to these outreach events and educational activities, CoC partners have offered on-site vaccination clinics. Vaccine has been taken into the field to vaccinate hard to reach individuals. These field vaccinations were coordinated between the local health department and our community’s street outreach teams and day shelters. Gift cards and hot meals have been offered as incentives for resistant populations to receive vaccinations and to decrease the spread of infectious disease in our community.

Our local health department partnered with the CoC to retro-fit one of our community emergency shelters into a COVID isolation facility. Policies and procedures were developed with the Health Department at the CoC-level to provide testing services for symptomatic individuals onsite in our emergency shelters and through local free clinics for those staying outside. Community-level isolation and quarantine procedures were developed for those testing positive and for those symptomatic who needed to quarantine while awaiting test results. The placement of individuals needing to isolate or quarantine were coordinated through our community’s coordinated entry process. Transportation, meal deliveries and medical check-ins were coordinated with our local health department through weekly meetings. Medical oversight of the isolation process was provided by the health department.

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	
	2. facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. The Blue Ridge Continuum of Care hosts monthly meetings with service providers. The health department attends and provides updates each month. During these updates, attendees are presented with information about how to prevent and/or limit infectious disease outbreaks among program participants. Information specifically related to service provision to homeless individuals is included. The local health department has provided direct medical oversight of congregate and non-congregate shelters, providing guidance on isolation and quarantine, proper use of PPE, and sanitization to limit spread of infectious disease. Vaccination clinics are held with homeless service providers to ensure homeless individuals have access to public health information and vaccine.

2. The CoC also serves as an information clearinghouse between the local health departments, healthcare organizations, and others to share information with homeless service providers in a timely manner. Information regarding personal protective equipment, vaccine, and general disease information has been shared and will continue to be shared to prevent and limit the infectious disease outbreaks among program participants. When an infectious disease outbreak has occurred, the CoC has coordinated a response between local health officials, organizations, and others to contain the exposures and develop/provide alternate services for those infected.

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.

(limit 2,500 characters)

1. The Blue Ridge CoC’s Coordinated Entry System covers 100% of the geographic area. The CoC ensures this coverage by engaging partners and stakeholders in all areas of the CoC. These partners and stakeholders in the outlying areas of the CoC are informed of the Coordinated Entry process and how individuals can be connected to Coordinated Entry services. Coordinated Entry services are accessible to all individuals in the CoC coverage area through street outreach and through Coordinated Entry hubs being developed in outlying areas.

2. The CoC uses the VI-SPDAT as a standardized assessment process to measure the vulnerability of each household entering our service system. The VI-SPDAT considers factors such as history of homelessness and housing, emergency service use, risk of harm, legal issues, socialization and daily functioning, physical health, substance use, mental health, and abuse and trauma to assign an objective vulnerability score. Scores are used to prioritize the most vulnerable households for housing services through community case conferencing. Our CoC Coordinated Entry stakeholder committee has developed a localized assessment that will replace the VI-SPDAT as our community’s standardized assessment tool for resource prioritization. Training on the new assessment process is currently being conducted for our access point staff.

3. The Coordinated Entry System and Assessment Process are updated regularly. This is done by soliciting feedback from participating projects through meetings of our Coordinated Entry stakeholder committee. Surveys are being developed to solicit feedback from households that have participated in Coordinated Entry. This feedback is reviewed regularly by the CoC Lead and planning agency staff. Refinements are implemented based on the feedback, on an ongoing basis.

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

(limit 2,500 characters)

Outreach teams and homeless system navigators sweep places not meant for human habitation and encampment sites to identify and engage those least likely to present at agencies for services. Street outreach staff go to clients in the field to complete intakes and coordinated entry assessments, reducing burdens related to transportation and access. An online application for homeless services is available on the CoC website. Online applications are received by Coordinated Entry staff who follow up with applicants to ensure households are connected to projects best able to meet their needs. These processes help reduce burdens on individuals accessing services through coordinated entry. Additionally, the CoC is implementing a phased assessment to eliminate unnecessary complexities in the assessment process.

Marketing materials are placed at agencies within the CoC that regularly encounter individuals who are hard to reach, including those who are service-resistant and those least likely to apply for assistance in the absence of special outreach. To ensure full coverage, access to services is available on-site at CoC partner access locations, in the field through street outreach providers, through the Continuum of Care website. After-hours access is available through 2-1-1 VIRGINIA.

The CoC has established a process to ensure that housing assistance is prioritized based on vulnerability and severity of need. The CoC has developed a local assessment tool that evaluates level of need through factors including length and history of homelessness; income and financial resources; mental health needs and substance use history; physical health and emergency room usage. The assessment tool assigns a vulnerability score based on client responses and community case conferencing committees reach consensus to refer those with the highest vulnerability scores to our community housing resources. The case conferencing committee also matches the referred individual/household with a housing navigator who promptly assists the client in accessing permanent housing of their choice in a timely manner.

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.

(limit 2,500 characters)

The CoC affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness through extensive marketing and outreach.

1 – the CoC website contains a service application where individuals in need of housing and/or services can submit an application for assistance. Coordinated Entry staff respond to requests and connect individuals in need to resources.

2 – service marketing materials (posters, brochures, resource cards) are placed at agencies throughout the CoC.

3 – all agencies providing services throughout the CoC have an active listing with 2-1-1 VIRGINIA that is updated with correct contact information and service listings annually. 2-1-1 VIRGINIA staff utilize these listings to ensure households in our community are connected to the resources to meet their needs.

4 – housing and supportive are marketed through resource cards used by all outreach teams who interact with unsheltered clients in the field. These cards contain complete information on all housing and service resources in the community. Contact information for each provider is included.

Each of the marketing strategies referenced above advertises services in our community as being available to all eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial, status or disability.

Program participants are informed of their rights and remedies available under federal, state and local fair housing and civil rights laws at intake at each of our community’s service access points. Our Coordinated Entry policies require that agencies inform participants of their rights under the Fair Housing Act, Equal Access to Housing Final Rule, and other federal, state and local civil rights laws at intake. The CoC has a grievance policy by which program participants and staff can report concerns and violations to an independent committee for review. The CoC grievance committee investigates reported violations, conducts hearings, and reports all conditions or actions that impede fair housing choice to the City of Roanoke HUD Community Resources Office, which is the jurisdiction responsible for certifying consistency with the Consolidated Plan. All participants in ESG, CoC and state-funded projects sign and receive a copy of the grievance policy at intake and are informed of the process by intake workers at each of our access points.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

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.	08/01/2023

1D-10a.	Process for Analyzing Racial Disparities–Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
NOFO Section V.B.1.q.		
Describe in the field below:		
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)

Each year since 2016 our CoC has analyzed data from the Annual Performance Reports of our community homelessness prevention, rapid rehousing (RRH) and permanent supportive housing (PSH) programs to determine if there are racial disparities in the provision of these services in our community. Our CoC also conducts an annual system performance analysis to determine if there are racial disparities in the lengths of time individuals experience homelessness in our system or if there are disparities in returns to homelessness after individuals exit to permanent housing.

People of color are more than two and a half times more likely to experience homelessness in our community than White individuals. African-Americans have comprised between 30 and 38% of both our annual and PIT counts each year since 2016, while representing only about 14% of the overall population of our CoC service area, according to US Census data.

Analysis of our prevention and housing programs has shown that over the past five years our programs are serving individuals of color equitably as a reflection of the representation of these populations in our shelter system. African-Americans have represented between 39 and 42% of the total number of individuals served in our RRH and PSH projects each year since 2016. These numbers are consistent with the overrepresentation of people of color in our homeless system.

People of color have made up an even higher percentage of the individuals served through our homelessness prevention programs. Since 2016, African-Americans and individuals of multiple races have made up between 59 and 77% of the total number of individuals receiving homelessness prevention services.

System performance metrics have shown that people of color in our system are not experiencing longer lengths of homelessness or significantly higher rates of returns to homelessness than White individuals. In 2022, the average length of time homeless for African-Americans in our system was 35.6 days. The average length of homelessness for White individuals was also 35.6 days. Similarly, in 2020, 21.6% of African-Americans who exited to permanent housing destinations two years prior, had a subsequent return to homelessness at some point over the subsequent two years. The return to homelessness rate for White individuals over this same period was 23.6%.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

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
2.	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
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	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
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	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
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

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)

Even though there have not been significant racial disparities in the provision and outcomes of assistance in our homeless response system, people of color are overrepresented in our system as a comparison to the broader regional population. In an effort to ensure our system continues to serve individuals equitably, our CoC provides ongoing training to staff at the direct assistance-level to ensure our providers are able to recognize factors impacting inequitable service provision, such as implicit bias and cultural competency. These trainings are provided annually through our Homeless Educators Linking Providers (HELPS) Committee by community subject matter experts, including staff through our local Community Services Board (CSB).

The Virginia Department of Housing and Community Development (DHCD), in partnership with CoCs across the State, has offered a training series focusing on understanding racial disparities and taking action to address disparities in homeless services. These trainings allowed providers to learn from national experts to ensure service provision in projects align with best practice models.

In addition, the CoC has taken steps to improve racial equity in the provision and outcomes of assistance by increasing the representation of people of color on our CoC Board and other decision-making committees. Nineteen percent of our CoC governing board is now represented by people of color. This is an increase over the 11% that represented people of color on the governing board in 2020. Our CoC is concentrating on increasing people of color’s representation on our decision-making bodies to reflect the racial make-up of individuals served in our homeless system. This strategy is being implemented to ensure the oversight of direct service provision in our community is conducted through a racial equity lens, resulting in equitable services being provided at the program participant level.

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.	

(limit 2,500 characters)

As previously stated, our community conducts regular assessments of racial disparities in the provision and outcomes of homeless assistance. Data from the Annual Performance Reports of our community homelessness prevention, rapid rehousing (RRH) and permanent supportive housing (PSH) programs to determine if disparities exist. Our CoC also conducts an annual system performance analysis to determine if there are racial disparities in the lengths of time individuals experience homelessness or if there are disparities in returns to homelessness after individuals exit to permanent housing. These measures are used to track our community’s progress on preventing or eliminating disparities. Strategies to improve our performance are implemented based on the results of these assessments.

The tools used to track disparities in the provision and outcomes of homeless assistance are reporting tools in our Homeless Management Information System. The reports provide a breakdown, by race, on service provision and system-level outcomes. Because our community has 100% of our non-DV emergency shelters, 100% of our street outreach programs and 100% of our housing programs participating in our HMIS implementation, these reports provide a complete analysis of performance data from our service system.

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.

(limit 2,500 characters)

The Blue Ridge CoC is dedicated to involving individuals with lived experience of homelessness in service delivery and decision-making. The Blue Ridge CoC uses social media and targeted outreach to solicit feedback on its practices and processes from those with lived experience. For example, while creating the current strategic plan, the CoC engaged persons with lived experience in three focus groups and paper surveys at local shelters and day drop-in sites. Planning funds were used to compensate for the expertise provided by individuals with lived experience. This information was critical to crafting goals and strategies to improve service delivery within the community. In addition, the CoC governing board works to ensure that there is representation from someone with lived experience in homelessness on the board and committees. The input from those with lived experience is invaluable. The CoC strives to make providing feedback and serving on working committees easy and accessible for these individuals. The CoC has implemented online surveys for data collection and schedules meetings at times when individuals with experience can attend. The CoC will use planning funds to pay for transportation, parking, etc. to make it easier for those with lived experience to participate in discussions around service delivery processes.

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
1.	Included in the decisionmaking processes related to addressing homelessness.	34	12
2.	Participate on CoC committees, subcommittees, or workgroups.	34	12
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	1

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.

(limit 2,500 characters)

Our CoC coordinates professional development and employment opportunities for individuals with lived experience through partnerships with several of our membership organizations.

Total Action for Progress (TAP) operates a Homeless Veterans Reintegration Program (HVRP), funded by the US Department of Labor. It works specifically with homeless veterans to put them into meaningful employment. To accomplish this, an employment specialist works directly with local businesses to place veterans in jobs that fit their interest and skill level. Job skills training is offered for those interested in careers that require certification. TAP trains people to pass the Virginia Board of Nursing’s Nurse Aide training program. For homeless veterans interested in CDL or forklift operations, TAP refers them to Virginia Western Community College. For those in need of further training, the employment specialist may arrange a work experience opportunity. Veterans are placed with participating businesses and the owner/supervisor acts as a mentor, providing on-the-job training and other support. These participating employers will hire the veteran after four weeks if they are a good fit for the job.

TAP also operates a program at two area emergency shelters. The program provides training leading to industry-recognized credentials and/or competencies in high-demand fields such as healthcare, food services, and customer service. In addition to the industry-specific skills, TAP also provides soft skills training through job-readiness classes and life skills training, to facilitate participants’ ability to retain employment once they have obtained it.

Our local VA Medical Center operates a peer-driven employment program for homeless Veterans. The staff person who oversees this program participates in our case conferencing meetings to facilitate connecting Veterans to peer-driven employment supports. The Compensated Work Therapy program at our VA Medical Center matches and supports work-ready veterans as they transition into jobs.

The Roanoke Rescue Mission offers skills-based training to guests staying in its emergency shelter programs. Skills such as meal preparation, customer service, housekeeping and laundry services are all offered to shelter participants. The organization has developed partnerships with local businesses who prioritize hiring of individuals with lived experience who are attempting to exit homelessness through employment utilizing these skill sets.

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)

The Blue Ridge CoC has made it a priority to regularly solicit feedback from people experiencing homelessness and people who have received assistance through the CoC or ESG programs on their experiences. To capture this information, the CoC hosts online surveys, in-person listening sessions facilitated by the planning entity, and invitations to give feedback by serving on CoC committees. Additionally, those receiving services are offered a chance to provide feedback on the services they received and the process itself via survey through the HMIS platform.

The CoC takes the feedback provided from people with lived experience of homelessness seriously. When challenges are identified, the issues are brought to the appropriate committee/workgroup. Challenges and solutions are discussed and implemented. Follow-up is done to ensure that the challenge is addressed and a suitable, effective solution has been found. Feedback from focus groups of individuals currently experiencing homelessness has been incorporated into the CoC’s current strategic plan.

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)

Blue Ridge CoC leadership presented local homelessness data, information on our regional response to homelessness, and potential solutions to address the systemic causes of housing instability to the City of Roanoke department directors at its monthly Directors Meeting in October 2022. The presentation included best practices other localities have used to reform zoning codes, make changes to land use policy and reduce regulatory barriers to housing development. The presentation emphasized that housing is the solution to homelessness and that without developing many more units of affordable housing targeted to lower income populations, sustainable progress in reducing homelessness will not be achieved. Local housing studies have identified a shortage of more than 5,000 affordable units in the region. This data was presented, along with a call to action in developing policy solutions.

As a result of this presentation, City of Roanoke leadership held a homelessness summit with members of Roanoke City Council in December 2022. CoC leadership and partner organizations presented similar information at the Council retreat, emphasizing the urgent need for action in correcting policy deficiencies that limit housing development.

Outcomes of these meetings with City staff and elected officials include the implementation of an inter-departmental task force working on systemic solutions to our affordable housing crisis. The City’s Planning Department is developing a set of comprehensive zoning reform recommendations that will be presented to the City’s Planning Commission in early 2024. Solutions being developed as part of the reform package include:

- removing regulations that limit housing options based on the relationships, characteristics, or previous conditions of people
- implementing a density bonus for inclusion of affordable housing units in all districts that have a limitation on density
- adding all residential use types as a use by-right in the Institutional District to facilitate redevelopment of former places of worship and institutional buildings into housing
- permitting accessory dwelling units to be located within the main structure (e.g. basement or attic apartment)
- removing separate metering and utility requirements for accessory dwelling units

CoC leadership and community partners will attend the in-person public hearings to speak in support of these important policy reforms as they move through the approval process.

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

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

- Notice of Funding Opportunity (NOFO) 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

1E-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.	
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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.	07/28/2023
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.	07/28/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	

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

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	No

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	150
2.	How many renewal projects did your CoC submit?	6
3.	What renewal project type did most applicants use?	PH-PSH

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

Describe in the field below:

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

1.Data was collected by HMIS Lead through various project performance reports. Project scorecards were completed by HMIS Lead and submitted to the Ranking and Review Committee staff lead for distribution to and analysis by Ranking Committee members.

2.Because our community does not have CoC-funded RRH projects, the length of time it takes projects to house people in permanent housing is not a metric used by our community in our ranking process. Our CoC-funded PSH projects use leasing dollars to provide direct housing services. Because of this leasing strategy, PSH units are typically move-in ready with minimal time required for housing location services, as openings become available in these projects.

3.The CoC considered the following severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing: chronic homelessness; history of incarceration; frequency of use of crisis services; history of victimization/abuse or trauma; risk of exploitation; no income; lack of ability to provide self-care; physical health; current or past substance use; mental health needs. These vulnerabilities are assessed as part of the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT), our community’s common assessment tool. The average VI-SPDAT score of participants served by projects was included as part of our community’s project ranking process. Projects received 15 points if the average VI-SPDAT score of participants was 7 or higher, providing a mechanism to compensate projects whose performance may be impacted by serving participants with severe service needs and high vulnerabilities.

4.Our CoC assesses community need through regular reporting of system performance metrics. Our independent Ranking Committee considers the needs of the community based on our ongoing system performance reporting when ranking projects. The point system described in response #3 above provides an opportunity for our project ranking process to account for the potential for projects to perform lower due to them providing housing and services to the hardest to serve populations in our community.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	
	Describe in the field below:	
1.	how your CoC used 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)

The CoC committee that determined the rating factors used by our Ranking Committee to review and rank project applications included individuals of different races, including those over-represented in our local homeless population. People of color represented 25% of the Ranking Committee membership that reviewed and ranked project applications for our 2023 local competition. People of color represented 31.7% of the total number of individuals experiencing homelessness in our 2023 Point-in-Time Count, which is more than double the percentage of African-Americans in the general population of our CoC's coverage area (14%). Having individuals of overrepresented races in our homeless system determining the rating factors used in our ranking and review process, and having these overrepresented populations serving on the CoC Ranking Committee, helps ensure these processes are executed through a racial equity lens.

The CoC has not yet implemented a process to include rating factors that include the degree to which program participants mirror the homeless population demographics or the extent to which projects have identified barriers in serving over-represented populations and taken steps to eliminate the identified barriers. Our CoC Ranking Committee will research best practice implementations and will make recommendations to the CoC Board for including these factors in our FY 2024 review, selection and ranking process.

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

(limit 2,500 characters)

Our CoC’s written process for reallocation was approved by the CoC in 2018. This policy is included in our CoC’s local competition public announcement and is communicated to project applicants through this public announcement. In this policy, grantees can self-nominate to voluntarily reallocate funds from a renewal project to a new or existing project if the grantee recognizes capacity deficiencies and/or performance-related issues are negatively impacting the effectiveness of our broader service system. When this occurs, the CoC Lead and planning entity review the voluntary reallocation request and then recommend action to the CoC Board.

The CoC Board, in consultation with the CoC Lead and planning entity, also reserves the right to involuntarily reallocate funding based on an analysis of grantee performance and/or community need. Projects are monitored by the CoC Lead and planning entity to ensure performance targets are being met and that the project’s activities are being implemented in alignment with HUD guidelines. If deficiencies are noted, they are shared with the Ranking Committee and CoC Board as part of the project evaluation and ranking process. If significant deficiencies are noted, the CoC Lead may recommend to the CoC Board that funding be involuntarily reallocated.

The CoC also conducts an annual assessment of community need utilizing PIT and LSA data. This data is compared to our HIC to identify potential gaps in services. If it is determined that a renewal project has performance issues or is no longer meeting a priority need, the CoC Lead may recommend to the CoC Board that the project be reallocated.

The CoC is reallocating \$56,476 from a Supportive Services Only project to a Permanent Supportive Housing project through our local competition this year. This reallocation is a result of the increase in chronic homelessness in our community, which was identified through a review of our PIT, LSA, and HIC data. This reallocation will help address this critical community need.

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?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	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

	<p>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.</p>	
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1E-5a.	<p>Projects Accepted–Notification Outside of e-snaps.</p> <p>NOFO Section V.B.2.g.</p> <p>You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.</p>	
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	<p>Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.</p>	09/13/2023
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1E-5b.	<p>Local Competition Selection Results for All Projects.</p> <p>NOFO Section V.B.2.g.</p> <p>You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.</p>	
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	<p>Does your attachment include:</p> <ol style="list-style-type: none"> 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank–if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds. 	Yes
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1E-5c.	<p>Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.</p> <p>NOFO Section V.B.2.g. and 24 CFR 578.95.</p> <p>You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	
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	<p>Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included:</p> <ol style="list-style-type: none"> 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings. 	
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You must enter a date in question 1E-5c.

	<p>1E-5d. Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.</p> <p>NOFO Section V.B.2.g.</p> <p>You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.</p>	
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	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	
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You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

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

- Notice of Funding Opportunity (NOFO) 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

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

	Enter the name of the HMIS Vendor your CoC is currently using.	BitFocus
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored–For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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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	

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

(limit 2,500 characters)

The CoC uses de-identified aggregate data from VAdata (an HMIS comparable database) managed by the Virginia Sexual and Domestic Violence Action Alliance to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking. All of the providers serving these populations in our Continuum of Care use the VAdata system, which is compliant with the 2022 HMIS data standards published by HUD.

VAdata is Virginia's web-based data collection system, which was developed to enhance and improve the collection of statewide data from all survivors who use the services of domestic violence, dating violence, sexual assault and stalking agencies across the state. This project began in April of 1996 through the support of the Violence Against Women Act. VAdata has served as a tool to capture the services provided to survivors of sexual and/or domestic violence since its inception.

Each local victim service provider enters program-level data in the VAdata system and annually provides de-identified data to the HMIS lead. Data are then aggregated and become a part of the annual assessment of service needs for all individuals accessing resources in our community. These data are used when preparing the annual Point-In-Time Count Report, Housing Inventory Count, and the local Homelessness Outcomes Report to assist our community in identifying service gaps, measuring system performance, and prioritizing resources.

The Blue Ridge CoC's HMIS is compliant with the FY 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	476	76	373	93.25%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	0	0	0	
4. Rapid Re-Housing (RRH) beds	88	0	88	100.00%
5. Permanent Supportive Housing (PSH) beds	142	0	142	100.00%
6. Other Permanent Housing (OPH) beds	37	0	37	100.00%

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

(limit 2,500 characters)

Not applicable. Our Continuum of Care has more than a 84.99% HMIS bed coverage for all of the project types for which we have funding in the community.

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

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

- Notice of Funding Opportunity (NOFO) 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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/25/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

The CoC has a youth housing placement team whose responsibilities include coordinating outreach and identification of youth ages 18-24, case conferencing homeless youth, and matching youth to housing resources utilizing our community’s prioritization and matching policies. Strategies used by the team to identify and better serve homeless youth in our community include engaging youth services staff through local government and outreach to stakeholders such as local school systems, LGBT-friendly businesses, and the Roanoke Diversity Center. These stakeholders identify local hangouts and other locations where homeless youth gather. All of these existing structures for identifying and serving homeless youth in our community were used in the 2023 PIT Count process to better identify youth.

Homeless and formerly homeless youth were involved in the 2023 PIT planning process by providing peer advice to design youth services projects in our community and by serving on the outreach teams to help locate and survey sheltered and unsheltered youth during the PIT Count. An HMIS-informed analysis of youth homelessness in our community was conducted prior to this year’s PIT count. The analysis showed that youth are disproportionately unsheltered in our community. As a result of these findings, staff from Total Action for Poverty’s (TAP) Homeless Youth Program were engaged by our CoC to help our community better identify locations where homeless youth are most likely to be identified. These staff have established relationships with homeless youth in our community and know of active encampment sites, which drove the selections of sites for our street teams to visit when conducting the unsheltered PIT count. The street teams also included two formerly homeless youth to provide additional guidance on site selection and to provide input from those with lived experience in our planning and execution processes.

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)

Not Applicable.

2C. System Performance

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

- Notice of Funding Opportunity (NOFO) 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)

The CoC conducts a supplemental survey as part of its annual Point-in-Time (PIT) Count. Individuals counted as homeless on the PIT night are asked their primary reason for becoming homeless. This data is analyzed, included in our annual PIT report, and incorporated into community planning processes to reduce first-time homelessness. In 2023, domestic violence, family conflict, lack of affordable housing, and job loss were identified as key risk factors leading to first-time homelessness in our community.

The CoC also utilizes data from the Annual Performance Reports (APRs) of our emergency shelter and street outreach projects to determine the risk factors leading to individuals becoming homeless for the first time. The prior living situations of individuals entering these programs for the first time are analyzed and incorporated into our community’s policies to target our homelessness prevention resources. The APR data of our shelter and street outreach programs reveal that individuals coming from “doubled up” situations and hotel/motels are most likely to enter homelessness. Individuals in these types of living situations are prioritized for homelessness prevention services in our community to assist in reducing first-time homelessness.

Our CoC also utilizes diversion strategies to reduce first-time homelessness. Staff at each of our community’s access points are trained on having problem-solving/diversion conversations with at-risk households seeking homeless services. These diversion specialists help individuals seeking shelter explore other potential housing arrangements before being placed in shelter. Landlord mediation, resolving family conflict, and utilizing flexible financial assistance are all tools used as part of this diversion strategy.

The CoC Chair and planning entity are responsible for overseeing this CoC strategy to reduce the number of individuals and families experiencing homelessness for the first time.

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

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

1.	natural disasters?	No
2.	having recently arrived in your CoCs’ geographic area?	No

2C-2.	Length of Time Homeless—CoC’s Strategy to Reduce.	
	NOFO Section V.B.5.c.	

- | | | |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| In the field below: | | |
| 1. | describe your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless; | |
| 2. | describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and | |
| 3. | provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the length of time individuals and families remain homeless. | |

(limit 2,500 characters)

Our strategy to reduce the length of time households remain homeless is contained within our Coordinated Entry System (CES). Once a household enters our system, a common assessment is conducted using the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT). This assessment is completed within 7 days of the household entering homelessness, which facilitates quick placements into housing programs. Scores on the VI-SPDAT assist our housing placement teams in making decisions regarding placements into housing projects. In instances where VISPDAT scores are equal, housing placement teams prioritize clients with the longest length of homelessness, thus reducing the overall length of time individuals are homeless in our community.

Five housing placement teams (chronic, Veteran, youth, family, and unsheltered) triage every client on our by-name lists. Clients are case conferenced and matched to housing resources through bi-weekly team meetings. Clients are matched to housing interventions, including HUD-VASH, SSVF, CoC PSH, RRH, and HCV, and Mainstream Vouchers administered through our PHA. VI-SPDAT score and the length of time homeless are the prioritization factors used when matching clients with these resources.

Each household referred for a voucher using our PHA’s homeless preference is assigned a housing navigator who assists the household with locating housing. We leverage Medicaid resources by connecting individuals with a history of hospitalizations to mental health skill-building supports for additional housing search assistance. The CoC has also successfully implemented a new housing navigator position utilizing Virginia Housing Trust Fund resources to assist households who do not qualify for mental health skill-building services. This navigator provides “hands-on” housing search assistance, helping individuals locate housing more quickly and reducing the length of time individuals in our system spend homeless.

The CoC Lead and planning agency share responsibility for overseeing this strategy.

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 2,500 characters)

Our community’s performance on exits to permanent housing destinations/retentions of permanent housing are reviewed monthly by the CoC and the CoC Governing Board. Progress against past performance and against established goals are also reviewed each month by both bodies. This consistent performance review allows the Board and CoC partners to focus on improving our performance and helps determine whether modifications to our strategies are needed.

The CoC’s strategy to increase the rate of exits to permanent housing destinations also includes using housing-focused case managers at each of our emergency shelters. These staff provide housing location services, landlord engagement, coordination with employment agencies, and assistance with accessing mainstream benefits. Our community’s largest emergency shelter has hired a Housing Navigator whose responsibility is to develop relationships with landlords/property owners to develop successful paths into permanent housing for shelter guests.

These strategies are also in place to increase the rate at which individuals and persons in families in permanent housing projects retain their permanent housing or exit to permanent destinations as housing stability case managers at our permanent housing projects, including rapid rehousing projects, perform these same tasks.

Matching of housing resources by Housing Placement Teams is also a critical component of the CoC strategy to increase the rate at which people exit to permanent housing destinations. Housing placement teams meet bi-weekly to case conference participants and to develop a clear, person-centered housing strategy for every individual on our by-name lists. Housing solutions are developed collaboratively for each individual by the Teams, with community partners bringing their own expertise to the table. This process facilitates successful exits to permanent housing.

The CoC Lead and planning agency share responsibility for overseeing this strategy.

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)

Our CoC reviews return rates to homelessness at monthly Governing Board and CoC meetings using HMIS data as part of our routine system performance monitoring. Individuals and families returning to homelessness are identified in these reports and are discussed in detail at bi-weekly case conferencing meetings of CoC partners. Factors contributing to each individual or family’s return are determined, and a person-centered housing plan that addresses the primary factors contributing to their return to homelessness is developed. In our case conferencing meetings, participants returning to homelessness are prioritized as needing a higher level of case conferencing. Referrals to stronger supports in the community are facilitated through these meetings. For example, households returning to homelessness after exiting a rapid re-housing project may be prioritized for a permanent supportive housing opening or connected to other, more intense community supports based on recommendations from the case conferencing committee.

Another strategy our CoC has implemented to reduce returns to homelessness is through the targeting of our homelessness prevention resources. Comprehensive targeting strategies have been instituted to ensure our prevention resources are used to serve individuals and families most at risk of experiencing literal homelessness. The primary determination used to target these resources is whether the participant has experienced literal homelessness previously, as confirmed through our HMIS. National data indicates that those who have experienced homelessness in the past are more likely to experience homelessness again. Targeting these resources to those with previous homelessness helps maximize the impact of the prevention resources while reducing returns to homelessness in the community.

The CoC Lead and planning agency are responsible for implementing this strategy.

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)

The CoC’s strategy to increase access to employment cash sources includes maintaining partnerships with employment organizations and coordinating employment services throughout our homeless response system with CoC partners who provide these services.

Two representatives from a mainstream employment organization, the Virginia Employment Commission (VEC), the State’s public employment service established to assist workers in finding suitable jobs, are members of our byname list (BNL) committees and help case managers connect clients to employment opportunities through these meetings. The VEC also hosts job fairs regularly and shares information on these events with CoC agency staff in these case conferencing meetings. Our street outreach teams have established a single point of contact at the VEC to facilitate efficient connection to employment services for individuals experiencing unsheltered homelessness. The VEC provides assistance with resume development, job coaching, interview preparation, and direct connection to employers.

Our local VA Medical Center operates a peer-driven employment program for homeless Veterans. The staff person who oversees this program participates in our case conferencing meetings to facilitate connecting Veterans to peer-driven employment supports. The Compensated Work Therapy (CWT) program at our VA Medical Center matches and supports work-ready veterans as they transition into jobs. Homeless veterans needing employment resources are referred to the CWT program through our bi-weekly case conferencing meetings, which VA staff attend.

Total Action for Progress (TAP) provides employment training opportunities through its This Valley Works program that assists CoC program participants with obtaining certifications and high-growth job opportunities. TAP administers multiple U.S. Department of Labor grants that assist individuals experiencing homelessness, youth, and other populations with job training, internships, and employment placement. Representatives from TAP’s employment programs also participate in our CoC’s BNL case conferencing meetings to facilitate CoC project participants’ connection to these employment services.

The CoC Lead and planning agency are responsible for overseeing this CoC strategy to increase employment income.

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)

The CoC recognizes the importance of increasing non-employment cash income to assist clients with achieving housing stability. Expediting disability claims, both Social Security and Veteran, have become an integral part of our strategy. SOAR-trained staff in our shelter and street outreach projects and at the Salem VA Medical Center assist clients with accessing Social Security disability income through an expedited application process. The VA's regional benefits coordinator is located in our geographic area and is an active part of our CoC and case conferencing committees. This makes access to the expedited disability process for Veteran's benefits easily accessible.

Staff from the Department of Social Services (DSS) provide quarterly educational trainings to program front-line staff about how to assist clients in accessing mainstream benefits, including food stamps, Medicaid and TANF. These trainings provide CoC case workers with detail on the eligibility requirements and application processes for these critical programs. DSS has in place the Common Help online application system that allows program staff to assist clients with applying online for TANF, SNAP, and Medicaid benefits. DSS staff provides on-site benefit services for participants at our largest overnight and day shelters. Our community's primary street outreach program provides weekly transport services to the local department of social services for unsheltered and hard-to-serve sheltered clients.

The CoC lead and planning entity are responsible for overseeing this strategy.

3A. Coordination with Housing and Healthcare

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

- Notice of Funding Opportunity (NOFO) 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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
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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
This list contains no items			

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.	

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

Not applicable.

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

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

- Notice of Funding Opportunity (NOFO) 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.	

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

Not applicable.

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

4A-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?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/20/2023
1C-7. PHA Moving On Preference	No	PHA Homeless Pref...	09/20/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/20/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/25/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/21/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/21/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/21/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/20/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/20/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	09/20/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		

1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	FY 2023 HDX Compe...	09/20/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference\PHA Moving On Preference

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Document Description: Local Competition Scoring Tool

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Document Description:

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Document Description:

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Document Description: FY 2023 HDX Competition Report

Attachment Details

Document Description:

Attachment Details

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Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	08/07/2023
1B. Inclusive Structure	09/08/2023
1C. Coordination and Engagement	09/20/2023
1D. Coordination and Engagement Cont'd	09/20/2023
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/11/2023
2C. System Performance	09/11/2023
3A. Coordination with Housing and Healthcare	09/11/2023
3B. Rehabilitation/New Construction Costs	09/11/2023
3C. Serving Homeless Under Other Federal Statutes	09/11/2023

4A. DV Bonus Project Applicants	09/11/2023
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required



City of Roanoke Redevelopment and Housing Authority

2020 Annual Plan

Agency Plan 2020 — 2024



CITY of ROANOKE REDEVELOPMENT
and HOUSING AUTHORITY

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- b. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low- income individuals); or
- c. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

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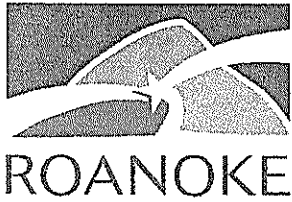
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Human Services Support

1 South Jefferson Street
Roanoke, Virginia 24011
Phone: (540) 312-8301 Fax: (540) 510-3090
www.roanokeva.gov

September 14, 2023

To Whom It May Concern:

This letter is to confirm that the Blue Ridge Continuum of Care's (VA-502) Coordinated Entry workgroup has an individual with lived experience of homelessness as an active member. The member with lived experience has been an invaluable asset in the committee's work in refining our Coordinated Entry processes to ensure our system's services are accessible, equitable and effective.

Our refinement process has focused on ensuring individual's with the most severe service needs are prioritized for housing interventions and services. Each member has a vote in the decision-making process and the member with lived experience's input has been critical in furthering the committee's work.

Signed below are three members of the CoC's Coordinated Entry Committee.

Sincerely,

Matthew Crookshank
Human Services Administrator
City of Roanoke
Chair, Blue Ridge Continuum of Care
Co-Chair, Blue Ridge CoC Coordinated Entry Committee

9/14/23
Date

Alison Jorgensen
Chief Operating Officer
Council of Community Services
Co-Chair, Blue Ridge CoC Coordinated Entry Committee

9/20/2023
Date

Marie Muddiman Beebe
Executive Director
Family Promise of Greater Roanoke
Member, Blue Ridge CoC Coordinated Entry Committee

9/20/23
Date



Housing First Standards Assessment Tool

Overview: This tool aims to assess and document how closely a housing and service provider adheres to the recommended best practice standards of the Housing First model, in the context of the broader work to implement a Housing First orientation at the system-level. This tool specifically evaluates project-level fidelity to Housing First, which directly impacts a system’s fidelity to Housing First. In addition to the universal best practice standards identified in this tool, Continuums should also take into account their local community context and local written standards pertaining to Housing First when assessing projects. A Continuum of Care can use this tool to prompt discussion and

Provider Info tab: The Provider Information tab should be completed *prior* to beginning the assessment. Specifically, the **Project Name, Project Type, Target Sub-Population served, and Date of Assessment** fields need to be completed in order to populate the assessment standards and report summary with questions that are specific to the project type and population. Please complete this section prior to printing any standards for assessment.

Standards: The standards have been arranged into the following categories: *Access, Evaluation, Services, Housing, Leases, and Project-Specific*. The “Tab” chart at the bottom of this page describes each of the categories in more detail. Some of the categories are not applicable for all project types, and those standards do not need to be completed,

Project Type	Applicable Standards
Coordinated Entry	Access & Evaluation; Project-specific
Street Outreach	Access & Evaluation; Project-specific
Emergency Shelter	Access & Evaluation; Service & Housing; Project-specific
Transitional Housing	Access & Evaluation; Service & Housing; Leases; Project-specific
Rapid Rehousing	Access & Evaluation; Service & Housing; Leases; Project-specific
Permanent Supportive Housing	Access & Evaluation; Service & Housing; Leases; Project-specific

Safeguarding: Please keep in mind safeguarding concerns when assessing projects. In particular, we advise Continuums of Care to work with projects with victims of domestic violence to make sure that adequate safety and confidentiality policies and practices are in place before beginning assessments.

Scoring: For each standard, there are three scoring criteria: “Say It”, “Document It”, and “Do It” (as explained further below). To show that a project is in full compliance with each standard, the assessor should mark “Always” for each scoring criteria. Use the drop down in the three columns to the right to select “Always” or “Somewhat” or “Not at

- “Say It” means that project and agency staff can describe verbally what they do concerning each standard. The assessor should be able to identify that the organizational culture supports the standard by how staff talks about what is done.
- “Document It” means that there is written documentation that supports the project’s compliance with each standard. Written documentation could include Policies and Procedures, Personnel Handbooks, Professional Development Plans, Project Rules, etc.
- “Do It” means that the assessor was able to find evidence that supports the project’s compliance with each standard. Evidence could include information contained in client or other administrative files, client acknowledgement that something is being done, staff can point to documentation that supports implementation of the standard, etc.

Assessor Notes: A cell below each individual standard allows the assessor to add optional notes about the information collected for that particular standard. The notes can include where information was found, what questions were asked, who answered the questions, what additional information is needed to be able to mark that standard as “Always”, “Sometimes,” or “Not at all”.

Tab	Description	Purpose
-----	-------------	---------

Instructions	Tool overview and aim	Offers instruction to users on the assessment tool
Provider Info	Input provider, project and general assessment information	Determines project-specific standards for consideration
Standards - Access & Evaluation	Input compliance with standards concerning participant access to the project and input, project evaluation and performance management	Assesses whether access and evaluation are compliant with Housing First principles
Standards - Leases	Input compliance with standards concerning the lease and occupancy agreements, where applicable	Assesses whether leases and occupancy agreements are compliant with Housing First principles
Standards - Services & Housing	Input compliance with standards concerning the service and housing models and structure, where applicable	Assesses whether services and housing are compliant with Housing First principles
Standards – Project-Specific	Prompts assessment standards based on project type and targeted sub-populations served by the project, where applicable	Assesses whether specific project standards are compliant with Housing First principles
Report Summary	Displays assessment scores and conclusions, and highlights non-compliant standards	Printable summary of the assessment



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	City of Roanoke
Acronym (If Applicable)	
Year Incorporated	
EIN	
Street Address	1 South Jefferson Street, Roanoke, VA
Zip Code	24011

Project Information	
Project Name	Homeless Assistance Team
Project Budget	140,422
Grant Number	VA0031L3F022215
Name of Project Director	Matt Crookshank
Project Director Email Address	matthew.crookshank@roanokeva.gov
Project Director Phone Number	540-312-8301
Which best describes the project *	Street Outreach
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
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.

Management Information	
Name of CEO	Robert Cowell
CEO Email Address	bob.cowell@roanokeva.gov
CEO Phone Number	540-853-2333
Name of Staff Member Guiding Assessment	Matthew Crookshank
Staff Email Address	matthew.crookshank@roanokeva.gov
Staff Phone Number	540-312-8301

Assessment Information	
Name of Assessor	Alison Jorgensen
Organizational Affiliation of Assessor	CoC Planning Entity
Assessor Email Address	alisonj@councilofcommunityservices.org
Assessor Phone Number	540-985-0131
Date of Assessment	Aug 15 2023



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	<p>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.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	<p>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.</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	<p>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/</p> <p><i>Optional notes here</i></p>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	<p>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.</p> <p><i>Optional notes here</i></p>	Always	Always	Always

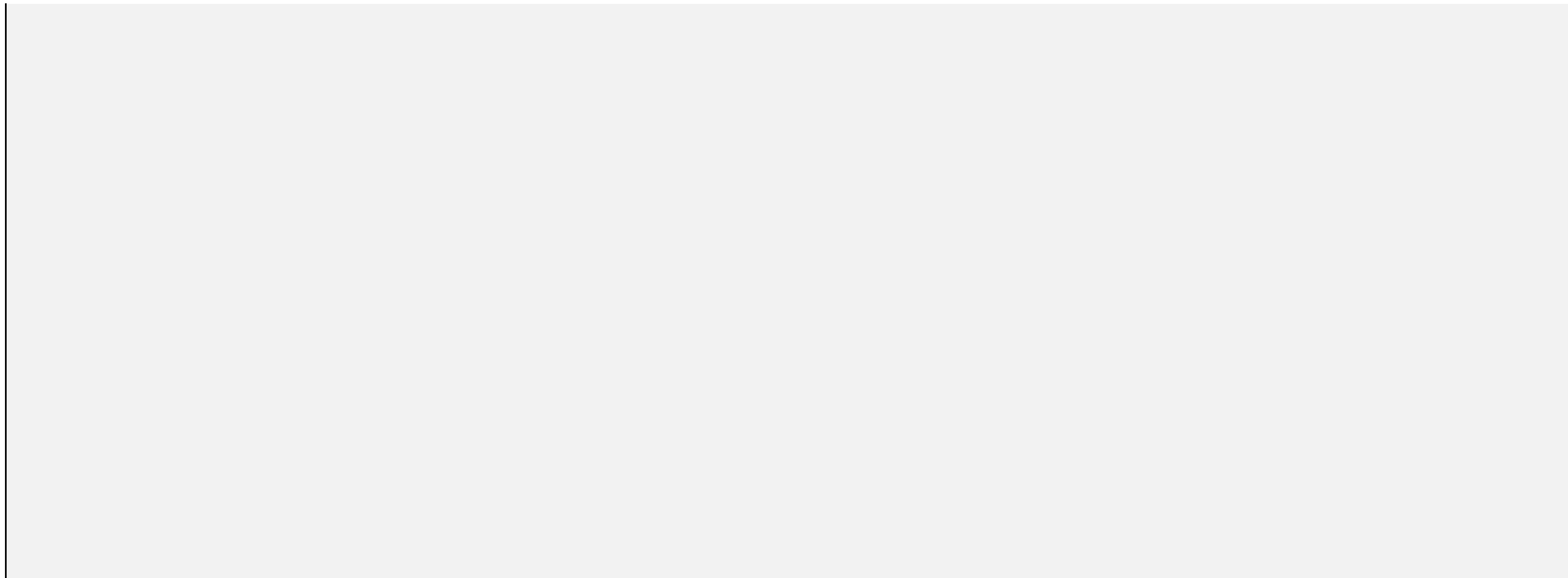
Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments 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. <i>Optional notes here</i>	Always	Always	Always
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. <i>Optional notes here</i>	Always	Always	Always
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. <i>Optional notes here</i>	Always	Always	Always
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. <i>Optional notes here</i>	Always	Always	Always
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. <i>Optional notes here</i>	Always	Always	Always



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.

This section is not applicable. Please see following section.



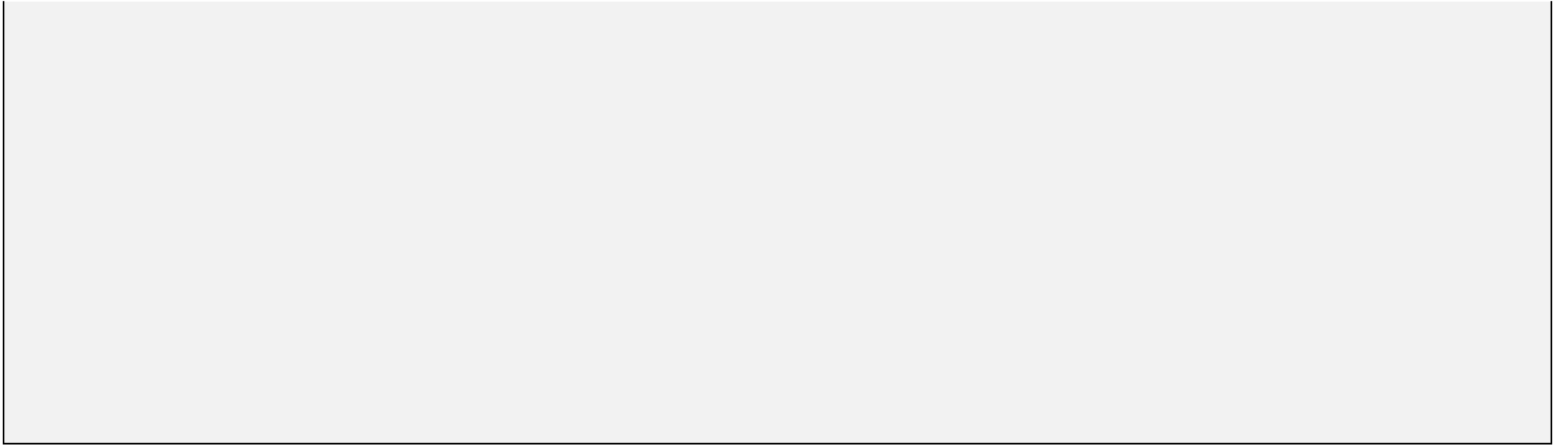


Housing First Standards

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.

This section is not applicable. Please see following section.

This section is not applicable. Please see following section.



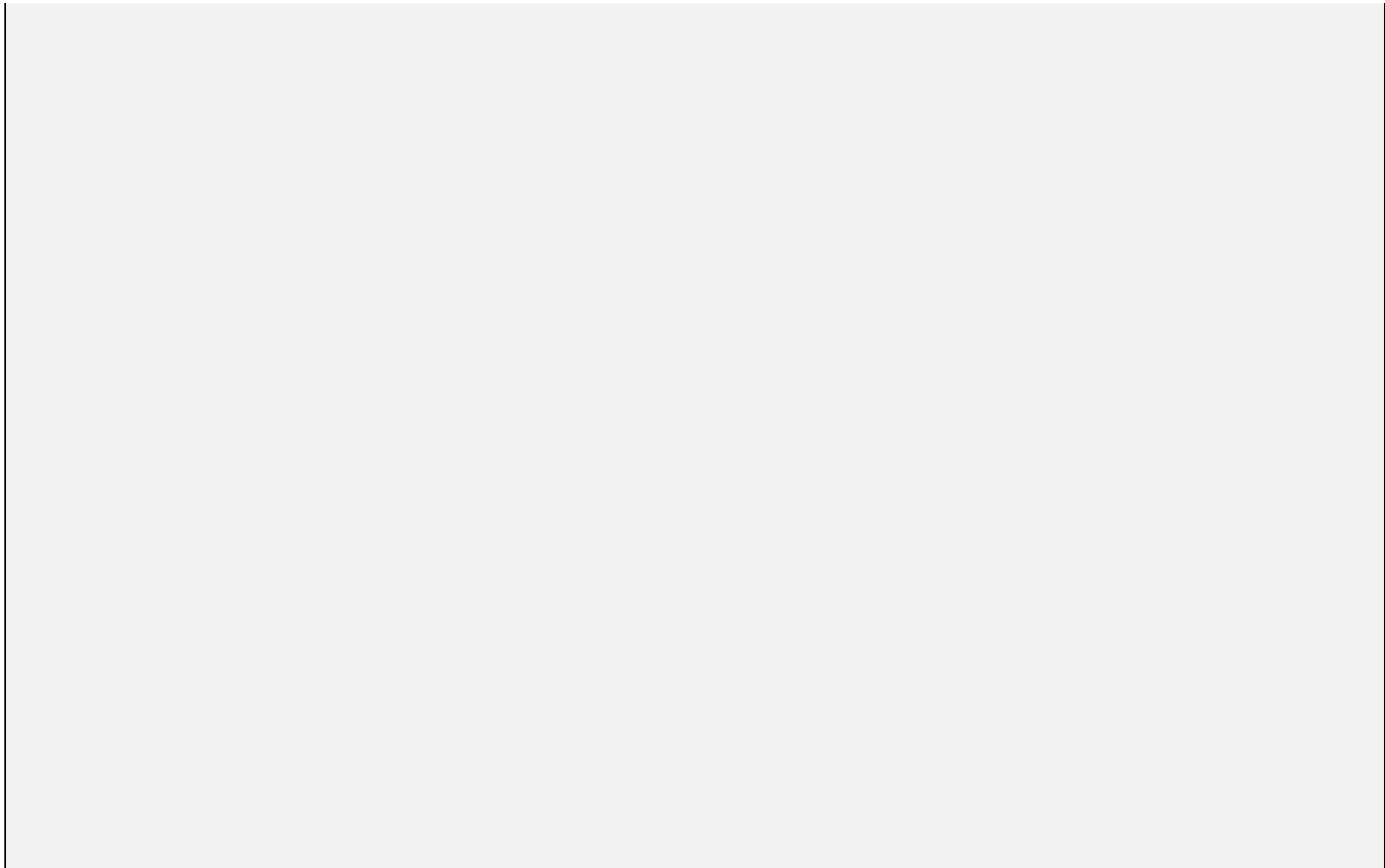


Housing First Standards

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	Project -Specific Standards	Say It	Document it	Do it
Project 1	Projects screen for health and safety needs	Outreach projects screen people contacted through outreach as soon as possible for critical health and safety needs, providing immediate response to people with the most severe needs. <i>Optional notes here</i>	Always	Always	Always
Project 2	Street outreach projects are focused on providing access to housing and services	Participants and staff understand that the primary goals of street outreach are to provide access to temporary housing and services and/or re-housing participants in permanent housing as quickly as possible, regardless of perceived barriers. Street outreach projects reflect the low-barrier orientation of the Coordinated Entry process. <i>Optional notes here</i>	Always	Always	Always
Project 3	Street outreach is linked to Coordinated Entry	Written policy and procedures detail a process by which street outreach staff ensures that persons encountered on the streets are offered the same standardized processes as persons assessed through site-based access points. Outreach teams are coordinated, trained, and have the ability to engage and quickly connect people experiencing homelessness to the local coordinated entry process in order to apply for and obtain permanent housing. Based on the CoC's decision about how street outreach is incorporated into the assessment process, street outreach projects must comply with the <i>Optional notes here</i>	Always	Always	Always
Project 4	Street outreach continuously engages those experiencing homelessness and on the street	Through continuous engagement strategies, a street outreach project provides quick linkage to housing and services when a person is ready to engage. <i>Optional notes here</i>	Always	Always	Always

Project 5	Street Outreach engagements inform the community's efforts to improve their crisis response system	Communities use street outreach engagements with those on the street and in encampments to understand and remove barriers to those accessing the crisis response system.	Always	Always	Always
<p style="text-align: center;"><i>Optional notes here</i></p> <p style="text-align: center;">No additional standards</p> <p style="text-align: center;"><i>Optional notes here</i></p>					
<p style="text-align: center;">No additional standards</p> <p style="text-align: center;"><i>Optional notes here</i></p>					
<p style="text-align: center;">No additional standards</p> <p style="text-align: center;"><i>Optional notes here</i></p>					
Section is not applicable. Please see following section.					





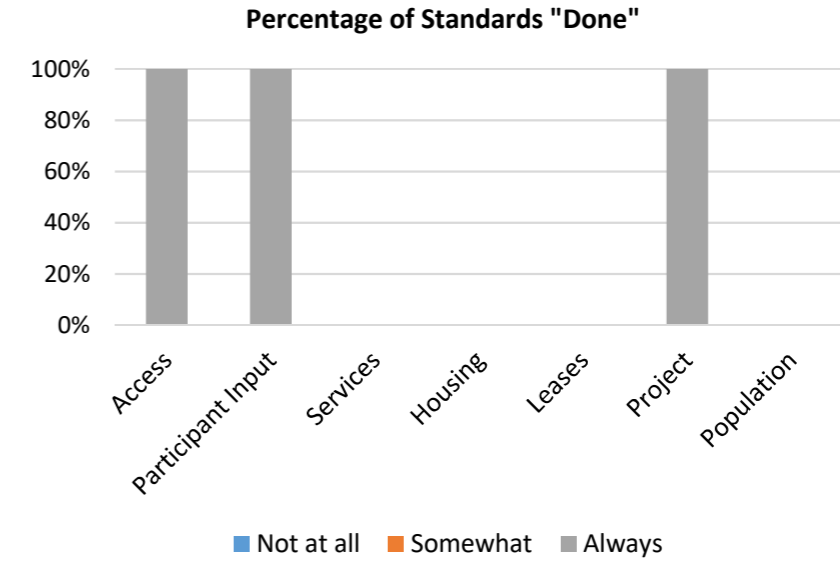
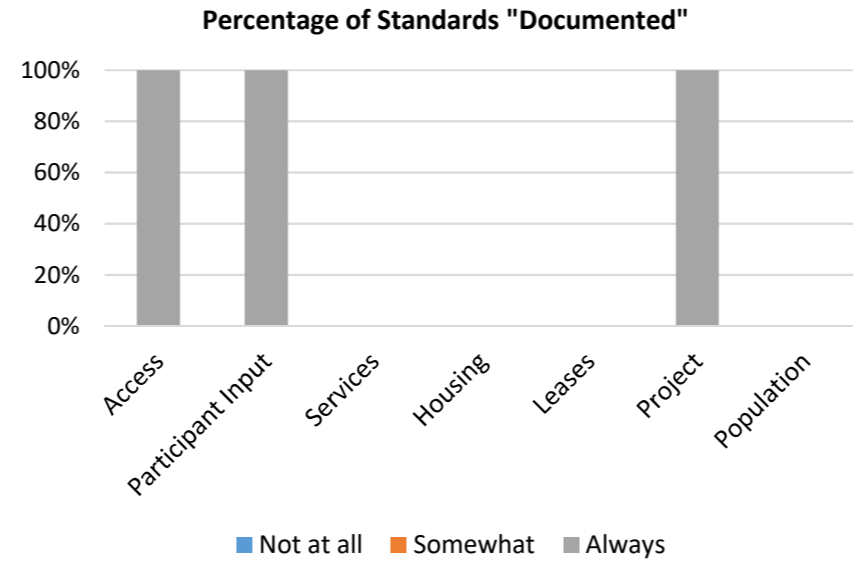
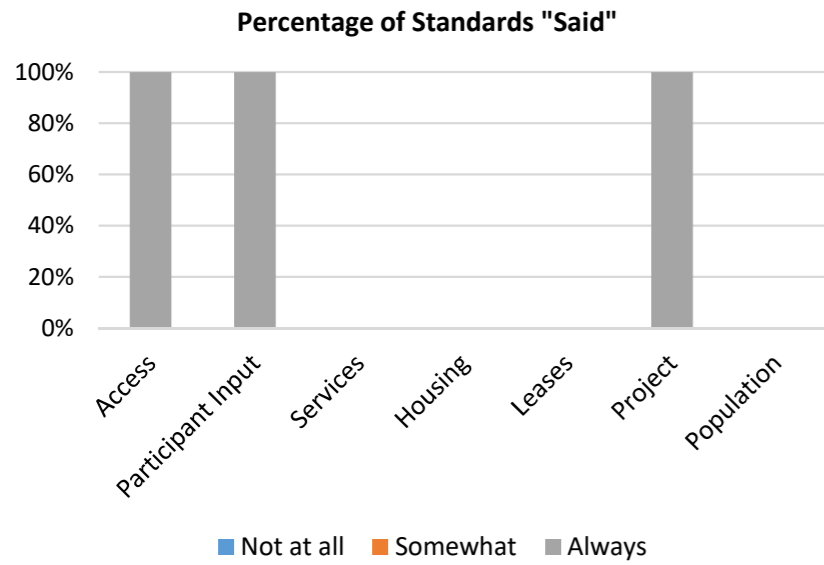
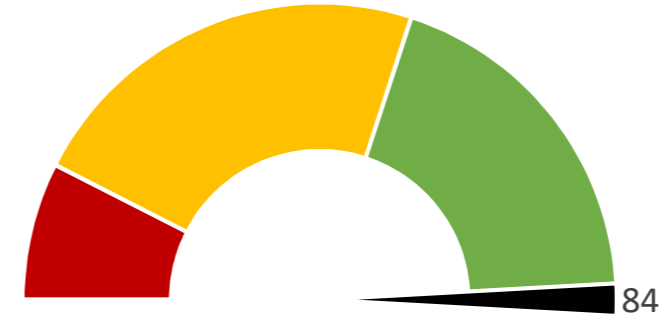
Housing First Standards: Assessment Summary

City of Roanoke
15-Aug-23

Some standards have not been evaluated. Please return and complete all standards before finalizing report.

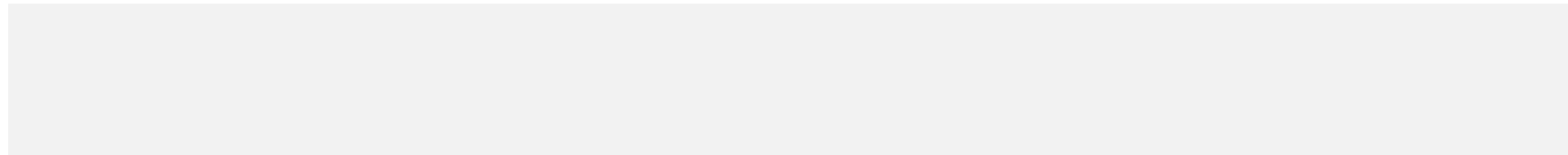
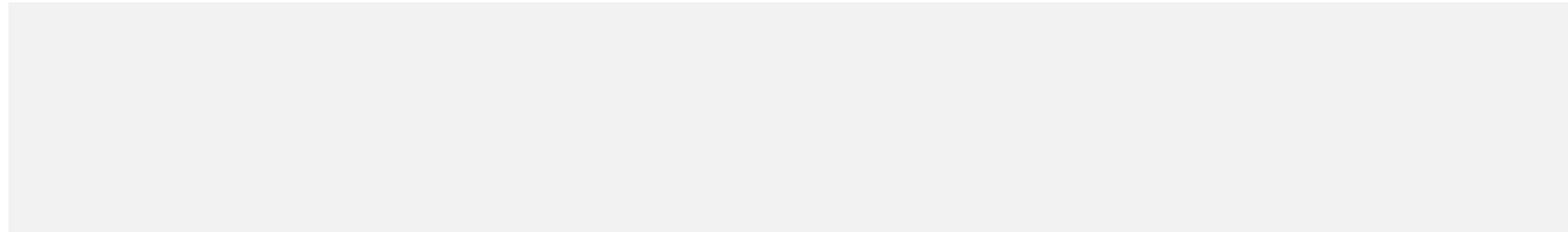
Your score: **84**
Max potential score: 84

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



Non-Compliant Standards ("Not at all" to Whether Standard is Said)

<i>Category</i>	<i>No.</i>	<i>Name</i>	<i>Standard</i>
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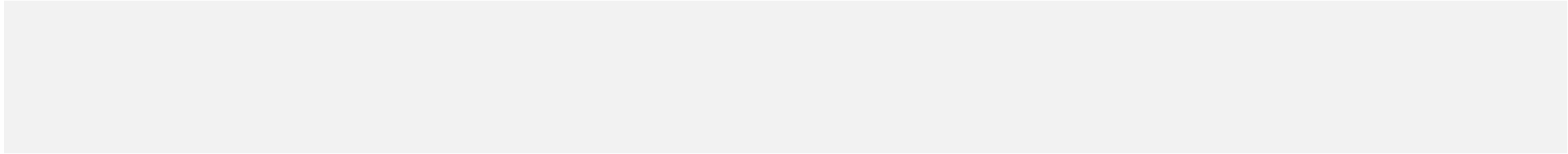
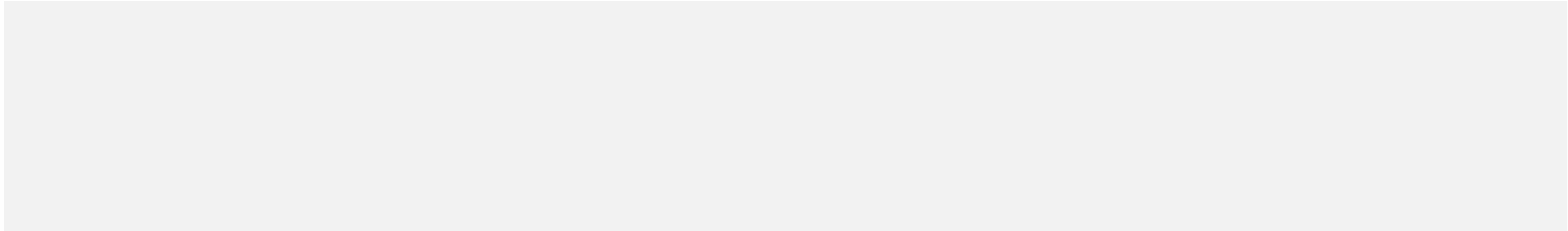


Non-Documented Standards ("Not at All" to Whether Standard is Documented)

Category

No. Name

Standard

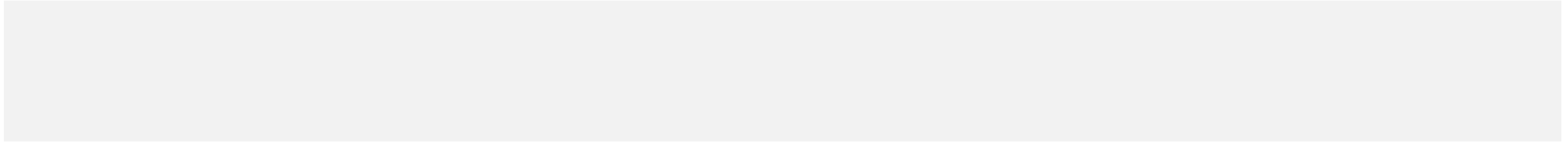
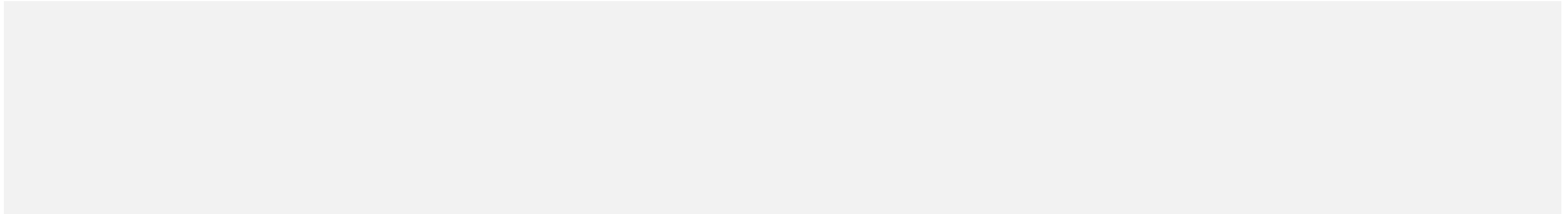


Non-Evidenced Standards ("Not at All" to Whether Standard is Done")

Category

No. Name

Standard



FY23 CoC Program Competition is Now Open

📅 July 28, 2023 / 👤 brcoc / 📁 Uncategorized

The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2023 Continuum of Care (CoC) Program Competition has been posted to the [FY 2023 CoC Program Competition: Funding Availability](#) page on the HUD Exchange. Additional resources are available on the HUD Exchange.

The CoC Application, CoC Priority Listing, and Project Applications will be in *e-snaps*. Collaborative Applicants and project applicants will be able to access the applications to review, update, and enter information that is required for the application process.

The FY23 Competition includes the opportunity to apply for new projects. The projects include:

- PH-PSH projects
- PH-RRH projects
- Joint TH/PH-RRH component projects
- Dedicated HMIS project for the costs that may only be carried out by the HMIS Lead
- SSO-CE project to develop or operate a centralized or coordinated assessment system

Prior to completing a new project application created through the reallocation process or Bonus processes, project applicants should consult with the CoC to determine which of these options will be available in the local CoC competition.

Those interested in applying for funding under the CoC Program Competition should contact Matthew Crookshank at matthew.crookshank@roanokeva.gov or Alison Jorgensen at alisonj@councilofcommunityservices.org for information on local funding priorities, applicant eligibility, and to access a project application. Full project proposals are due to the CoC Lead in *e-snaps* by August 28, 2023.

The CoC Ranking Committee will score and rank projects using the 2023 rating and review procedure included below. The Executive Summary form, also attached below, must be completed by project applicants and submitted to Hope Browning at hope.browning@roanokeva.gov by August 25, 2023.

[2023 CoC NOFO Timeline](#)

[FY23 New and Renewal Project Executive Summary](#)

[2023 Ranking and Review Procedure](#)

Blue Ridge Continuum of Care Facebook Page Announcement



The image shows a screenshot of a Facebook post from the Blue Ridge Continuum of Care. The post is dated July 28 and is public. The main text of the post is "The FY 2023 CoC Program Competition is Now Open!". Below the text is a link to "ENDHOMELESSNESSBLUERIDGE.ORG" and a title "FY23 CoC Program Competition is Now Open – A Place to Call Home". The post includes a collage of logos for various organizations: Blue Ridge Continuum of Care, B+C+O, Roanoke, and others. The text of the post reads: "FY23 CoC Program Competition is Now Open July 28, 2023 brcocUncategorized The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2023 Continuum of Care (CoC) Progra...". At the bottom of the post are the interaction buttons: Like, Comment, and Share.

Blue Ridge Continuum of Care
July 28 · 🌐

The FY 2023 CoC Program Competition is Now Open!

[ENDHOMELESSNESSBLUERIDGE.ORG](https://endhomelessnessblueridge.org)

FY23 CoC Program Competition is Now Open – A Place to Call Home

FY23 CoC Program Competition is Now Open July 28, 2023
brcocUncategorized The Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2023 Continuum of Care (CoC) Progra...

Like Comment Share

Alison Jorgensen

From: Council of Community Services
<amandah+councilofcommunityservices.org@ccsend.com>
Sent: Tuesday, August 8, 2023 9:36 AM
To: Alison Jorgensen
Subject: Nonprofit e-blast 8/8/2023



nonprofit news e-blast

[Visit our Website](#)

In this e-blast:

-) **FY 2023 Blue Ridge CoC Program Competition is Now Open**
-) **Strangulation: Overall and Long-Term Effects**, August 18, 2023
-) **411 on 211 Virginia**, August 22, 2023
-) **CASA Volunteer Training**, September 26, 2023
-) **Carilion Clinic Community Survey**, Closes August 31, 2023
-) **Virginia Tech CareEx Study**



FY 2023 CoC Program Competition is Now Open

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Blue Ridge CoC: FY2023 CoC Competition Timeline



Date	Item	Action	Entity Responsibility
1/13	CoC Registration Review Opened	Agency/Project Applicants review for accuracy Grant Inventory Worksheet (GIW)	CoC Lead, Planning, project applicants
6/28	CoC GIW Review	GIW Change Forms submitted to HUD Field Office	CoC Lead
7/10	FY 2023 NOFO released	Begin thorough review of NOFA	CoC Lead, Planning Agency
7/26	NOFA Review	CoC Planning Team Meets	Matt & Alison
7/28	Executive Summaries	Send guidelines to project applicants for executive summaries	CoC Lead/HUD Community Resources Staff
7/28	Review of Ranking Process	Meet with City HUD Community Resources Division	CoC Lead/HUD Staff
7/31	Public Notice Release	Notify public of release of FY 2023 NOFA, post on social media, lead agency website, community newsletter	Planning Agency, CoC Lead
7/31	Timeline Shared	Publicly Post Competition Timeline	Alison
8/7	Grant Writing Team Meets	Meet to review writing process and assignments	CoC Lead, planning agency
8/16	Notify Perspective Ranking Committee Members	Send email to obtain interest and scheduling	HUD Community Resources Staff, BRICH Chair
8/25	Executive Summaries	Executive Summaries due to City HUD Community Resources Division	Project applicants
8/28	New and Renewal Project Applications Due	All project applicants must submit projects in ESNAPS by COB	Planning Agency/CoC Chair, project applicants
9/1	CoC Application	Draft Copy of Application to CoC Lead/Planning for review	CoC Lead/Planning
9/7	Ranking Committee Meets	HUD Community Resources Division and Ranking Committee	Hope Browning
9/13	CoC Lead	Notice of Project Acceptance/Rejection and Ranking sent to applicants	CoC Lead
9/15	Planning Agency/CoC Chair	Final Draft of Consolidated Application Due	CoC Lead
9/18	Final CoC Application	Submit completed application to City Manager for review	Planning Agency/CoC Chair
9/27	Final CoC Application	Submit Final CoC Competition application	Planning Agency/CoC Chair

HUD CoC Submission Deadline – September 28, 2023



Roanoke City and County/Salem CoC (VA-502) 2023 Continuum of Care Rating and Review Procedure

For the FY 2023 CoC Consolidated Grant Competition, the CoC Ranking Committee will review new and renewal project applications to determine if they meet the following project quality threshold requirements with clear and convincing evidence. The housing and services proposed must be appropriate to the needs of the program participants and the community.

Renewal projects will be scored and ranked using the rubric shown in Attachment 1.

Scoring criteria showed in Attachment 1 include consideration of factors relevant to renewal applications that are in alignment with the HUD System Performance Measures, including:

- % permanent housing exit destinations
- % increasing total income
- % receiving benefits at exit
- % of households who do not return to homelessness within two years of exit
- Severity of needs and vulnerabilities experienced by program participants
- Cost effectiveness of the project
- Organization drawdown rates
- Frequency and/or amount of funds recaptured by HUD
- Services to specialized populations, including youth, victims of domestic violence, families with children, persons experiencing chronic homelessness, and veterans

New projects will be scored as shown in Attachment 2. Scoring for new projects will be distributed as follows:

- Program description and design
- Management of program
- Agency capacity and performance history
- Fiscal management
- Budget
- Scoring criteria showed in Attachment 2 include consideration of factors relevant to new applications that are required or encouraged by HUD, including:
- Organization drawdown rates
- Services to specialized populations, including youth, victims of domestic violence, families with children, persons experiencing chronic homelessness, and veterans

FY 2023 CoC Ranking Sheet – PSH

Permanent Supportive Housing (Including Legacy + Shelter Plus Care)

Reviewer:	Proposal:		
Scoring Elements	Point Values	Score	
<p>1. The percentage of persons who remained in permanent housing program as of the end of the operating year or exited to permanent housing (subsidized or unsubsidized). HUD standard is 80%. Max points =30. Total number of individuals served: Number of individuals who accomplished this measure: Percentage achieving measure: (Source: System Performance Measure 7, Clarity Report)</p>	<p>Housing Results: 90-100% = 30 points 80-89% =20 points 70-79% = 10 points 0-69% = 0 points</p>		
<p>2. The percentage of persons age 18 and older who increased their total income (from all sources) at program exit. Max. points =20 Total number of adults leavers: Number of adults who accomplished this measure: Percentage achieving measure: (Source: HUD APR, Question 19a2)</p>	<p>Income Results: 80-100% = 20 points 50-79% = 10 points 0-49% = 0 points</p>		
<p>3. Percentage of adults receiving benefits at program exit. HUD Standard = 56%. Max. points = 10 Total number of adults exiting: Total number of adults exiting with benefits: Percentage of adults exiting with benefits: (Source: HUD APR, Question 20b)</p>	<p>Mainstream Benefits: 80-100% = 10 points 50-79% = 5 points 0-49% = 0 points</p>		
<p>4. Percentage of households who do NOT return to homelessness (i.e., get a new homeless certification) within two years of exiting the program. HUD Standard 95%. Max. points = 20 Total number of persons who exited to permanent housing destination (2 years prior): Number of returns in 2 years: Percentage of returns in 2 years: (Source: Clarity Report - Exits to Permanent Housing with Return to Homelessness)</p>	<p>Return to Homelessness: 0-5% = 20 points 6-49% = 10 points 49-100% = 0 points</p>		
<p>5. Cost effectiveness: average cost per household served Max. points = 15 Total project spending: Total number of households served: Average cost per household: (Source: CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (PSH): ≤ \$8,000 = 15 points ≥ \$8,000 = 0 points</p>		
<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: Average score of those with completed assessment: (Source: HMIS custom report)</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>		
<p>7. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 5 Total number of individuals served: Total number of individuals who were categorized as chronically homeless: Percentage of individuals categorized as chronically homeless: (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 5 points ≤74% = 0 points</p>		

<p>8. Percentage of households served who were categorized as households with children. Max. points = 5 Total number of households served: Number of households with children: Percentage of households with children: (Source: CoC APR Question 8a)</p>	<p>Homeless Families: ≥75% = 5 points ≤74% = 0 points</p>	
<p>9. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10</p>	<p>Max. points = 10 points.</p>	
<p>10. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20</p>	<p>All elements are included will = 20 points.</p>	
<p>Maximum points available = 150</p>		
<p>Total Points Received by Proposal:</p>		
<p>Comments:</p>		
<p>Reviewer Signature:</p>	<p>Date:</p>	

FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only (Street Outreach)

Reviewer:	Proposal:		
Scoring Elements	Point Values	Score	
<p>1. The percentage persons placed into housing (Emergency Shelter, TH or PH) as a result of the street outreach program during the operating year. Max points =50. Total number of persons exiting during the operating year: Total number of persons placed into housing during the operating year: Percentage of persons placed into housing during the operating year: (Source: HUD APR, Question 23 a&b)</p>	<p>Housing Results: 75-100% = 50 points 60-74% =40 points 46-59% = 30 points 31-45% = 20 points 0-30% = 0 points</p>		
<p>2. The percentage of households who do NOT return to the street or, having exited shelter, return to homelessness (street or shelter) within two years of exiting the program. HUD Standard 95% Max. points =15 Total number of persons who exited to permanent housing destination two years prior: Number of returns in two years: Percentage of returns to homelessness: (Source: System Performance Measure 2, Clarity Report)</p>	<p>Returns to Homelessness: 0-5% = 15 points 6-20% = 10 points 21-30% = 5 points 31-100%=0 points</p>		
<p>3. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of client served during operating year: Total number of chronically homeless clients served during operating year: Percentage of people served who were categorized as chronically homeless: (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>		
<p>4. Percentage of people entered with service connection need for whom that connection is recorded. Max. points = 15 Total number of clients served during operating year: Total number of clients with service connection need for whom that connection is recorded: Percentage of clients with service connection need for whom that connection is recorded: (Source: HUD APR, Question 7)</p>	<p>Service Connections: ≥75% = 15 points ≤74% = 0 points</p>		
<p>5. Cost effectiveness: average cost per household served Max. points = 15 Total project spending: Total number of households served: Average cost per household: (Source: CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (SO): ≤ \$500 = 15 points ≥ \$500 = 0 points</p>		
<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: Average score of those with completed assessment: (Source: HMIS custom report)</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>		
<p>7. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10</p>	<p>Max. points = 10 points.</p>		

8. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20	All elements are included will = 20 points.	
Maximum points available = 150		
Total Points Received by Proposal:		
Comments:		
Reviewer Signature:	Date:	

FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only (Excludes Street Outreach)

Reviewer:	Proposal:		
Scoring Elements	Point Values	Score	
<p>1. The percentage who exited to permanent housing (subsidized or unsubsidized) during the operating year. HUD standard is 80%. Max points =30. Total number of individuals exiting: Total number of individuals exiting to permanent housing destinations: Percentage exiting to permanent housing destinations: (Source: ESG CAPER Report, Question 23a & b)</p>	<p>Housing Results: 80-100% = 30 points 60-79% =20 points 49-69% = 10 points 0-48% = 0 points</p>		
<p>2. The percentage of persons age 18 and older who increased their total income (from all sources) at program exit. Max. points =20 Total number of adults exiting during operating year: Total number of adults increasing income at program exit: Percentage of adults increasing income at program exit: (Source: HUD APR, Question 19a2)</p>	<p>Income Results: 80-100% = 20 points 50-79% = 10 points 0-49% = 0 points</p>		
<p>3. Percentage of adults receiving benefits at program exit. HUD Standard = 56%. Max. points = 10 Total number of adults exiting: Total number of adults with benefits at exit: Percentage of adults with benefits at exit: (Source: HUD APR, Question 20b)</p>	<p>Mainstream Benefits: 80-100% = 10 points 50-79% = 5 points 0-49% = 0 points</p>		
<p>4. Cost effectiveness: average cost per household served. Max. points = 15 Total project spending: Total number of households served: Average cost per household: (Source CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (SSO): ≤ \$500 = 15 points ≥ \$500 = 0 points</p>		
<p>5. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: Average score of those with completed assessment: (Source: HMIS custom report)</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>		
<p>6. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of individuals served during program year: Total number of individuals categorized as chronically homeless: Percentage of individuals categorized as chronically homeless: (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>		
<p>7. Percentage of households served who were categorized as households with children. Max. points = 10 Total number of households served during program year: Number of households served who were categorized as households with children: Percentage of households served who were categorized as households with children: (Source: CoC APR Question 8a)</p>	<p>Homeless Families: ≥75% = 10 points ≤74% = 0 points</p>		
<p>8. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10</p>	<p>Max. points = 10 points.</p>		

<p>9. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20</p>	<p>All elements are included will = 20 points.</p>	
<p>Maximum points available = 140</p>		
<p>Total Points Received by Proposal:</p>		
<p>Comments:</p>		
<p>Reviewer Signature:</p>	<p>Date:</p>	



Roanoke City and County/Salem CoC (VA-502) 2023 Continuum of Care Rating and Review Procedure

For the FY 2023 CoC Consolidated Grant Competition, the CoC Ranking Committee will review new and renewal project applications to determine if they meet the following project quality threshold requirements with clear and convincing evidence. The housing and services proposed must be appropriate to the needs of the program participants and the community.

Renewal projects will be scored and ranked using the rubric shown in Attachment 1.

Scoring criteria showed in Attachment 1 include consideration of factors relevant to renewal applications that are in alignment with the HUD System Performance Measures, including:

- % permanent housing exit destinations
- % increasing total income
- % receiving benefits at exit
- % of households who do not return to homelessness within two years of exit
- Severity of needs and vulnerabilities experienced by program participants
- Cost effectiveness of the project
- Organization drawdown rates
- Frequency and/or amount of funds recaptured by HUD
- Services to specialized populations, including youth, victims of domestic violence, families with children, persons experiencing chronic homelessness, and veterans

New projects will be scored as shown in Attachment 2. Scoring for new projects will be distributed as follows:

- Program description and design
- Management of program
- Agency capacity and performance history
- Fiscal management
- Budget
- Scoring criteria showed in Attachment 2 include consideration of factors relevant to new applications that are required or encouraged by HUD, including:
- Organization drawdown rates
- Services to specialized populations, including youth, victims of domestic violence, families with children, persons experiencing chronic homelessness, and veterans

FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only(Street Outreach)

Reviewer: Lee Clark	Proposal: Homeless Assistance Team (HAT)	
Scoring Elements	Point Values	Score
<p>1. The percentage persons placed into housing (Emergency Shelter, TH or PH) as a result of the street outreach program during the operating year. Max points =50. Total number of persons exiting during the operating year: 631 Total number of persons placed into housing during the operating year: 240 Percentage of persons placed into housing during the operating year: 38.0% (Source: HUD APR, Question 23 a&b)</p>	<p>Housing Results: 75-100% = 50 points 60-74% =40 points 46-59% = 30 points 31-45% = 20 points 0-30% = 0 points</p>	20
<p>2. The percentage of households who do NOT return to the street or, having exited shelter, return to homelessness (street or shelter) within two years of exiting the program. HUD Standard 95% Max. points =15 Total number of persons who exited to permanent housing destination two years prior: 104 Number of returns in two years: 13 Percentage of returns to homelessness: 12.5% (Source: System Performance Measure 2, Clarity Report)</p>	<p>Returns to Homelessness: 0-5% = 15 points 6-20% = 10 points 21-30% = 5 points 31-100%=0 points</p>	10
<p>3. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of client served during operating year: 1,012 Total number of chronically homeless clients served during operating year: 159 Percentage of people served who were categorized as chronically homeless: 15.7% (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>	0
<p>4. Percentage of people entered with service connection need for whom that connection is recorded. Max. points = 15 Total number of clients served during operating year: 1,012 Total number of clients with service connection need for whom that connection is recorded: 49 Percentage of clients with service connection need for whom that connection is recorded: 4.8% (Source: HUD APR, Question 7)</p>	<p>Service Connections: ≥75% = 15 points ≤74% = 0 points</p>	0
<p>5. Cost effectiveness: average cost per household served Max. points = 15 Total project spending: ??? Total number of households served: 984 Average cost per household: ??? (Source: CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (SO): ≤ \$500 = 15 points ≥ \$500 = 0 points</p>	15
<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: 648 Average score of those with completed assessment: (Source: HMIS custom report) 7.25</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>	15

7. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10	Max. points = 10 points.	10
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8. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20	All elements are included will = 20 points.	20
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Maximum points available = 150		90
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Total Points Received by Proposal:	
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Comments: Work is solid, well documented and proven to be effective. Team is equipped with 5 full time case managers. Budget is thorough and well documented. Presentation was strong.

Reviewer Signature: C Lee Clark	Date: 9/7/2023
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FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only(Street Outreach)

Reviewer:

Proposal: Homeless Assistance Team (HAT)

Scoring Elements	Point Values	Score
<p>1. The percentage persons placed into housing (Emergency Shelter, TH or PH) as a result of the street outreach program during the operating year. Max points =50. Total number of persons exiting during the operating year: 631 Total number of persons placed into housing during the operating year: 240 Percentage of persons placed into housing during the operating year: 38.0% (Source: HUD APR, Question 23 a&b)</p>	<p>Housing Results: 75-100% = 50 points 60-74% =40 points 46-59% = 30 points 31-45% = 20 points 0-30% = 0 points</p>	20
<p>2. The percentage of households who do NOT return to the street or, having exited shelter, return to homelessness (street or shelter) within two years of exiting the program. HUD Standard 95% Max. points =15 Total number of persons who exited to permanent housing destination two years prior: 104 Number of returns in two years: 13 Percentage of returns to homelessness: 12.5% (Source: System Performance Measure 2, Clarity Report)</p>	<p>Returns to Homelessness: 0-5% = 15 points 6-20% = 10 points 21-30% = 5 points 31-100%=0 points</p>	10
<p>3. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of client served during operating year: 1,012 Total number of chronically homeless clients served during operating year: 159 Percentage of people served who were categorized as chronically homeless: 15.7% (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>	0
<p>4. Percentage of people entered with service connection need for whom that connection is recorded. Max. points = 15 Total number of clients served during operating year: 1,012 Total number of clients with service connection need for whom that connection is recorded: 49 Percentage of clients with service connection need for whom that connection is recorded: 4.8% (Source: HUD APR, Question 7)</p>	<p>Service Connections: ≥75% = 15 points ≤74% = 0 points</p>	0
<p>5. Cost effectiveness: average cost per household served Max. points = 15 Total project spending: ??? Total number of households served: 984 Average cost per household: ??? (Source: CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (SO): ≤ \$500 = 15 points ≥ \$500 = 0 points</p>	15
<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: 648 Average score of those with completed assessment: (Source: HMIS custom report) 7.25</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>	15

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7. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10	Max. points = 10 points.	10
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8. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20	All elements are included will = 20 points.	20
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Maximum points available = 150		
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Total Points Received by Proposal:		90
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Comments:

Reviewer Signature: Malena Horu	Date: 9-7-23
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FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only(Street Outreach)

Reviewer:

Proposal: Homeless Assistance Team (HAT)

Scoring Elements	Point Values	Score
<p>1. The percentage persons placed into housing (Emergency Shelter, TH or PH) as a result of the street outreach program during the operating year. Max points =50. Total number of persons exiting during the operating year: 631 Total number of persons placed into housing during the operating year: 240 Percentage of persons placed into housing during the operating year: 38.0% (Source: HUD APR, Question 23 a&b)</p>	<p>Housing Results: 75-100% = 50 points 60-74% =40 points 46-59% = 30 points 31-45% = 20 points 0-30% = 0 points</p>	<p>20</p>
<p>2. The percentage of households who do NOT return to the street or, having exited shelter, return to homelessness (street or shelter) within two years of exiting the program. HUD Standard 95% Max. points =15 Total number of persons who exited to permanent housing destination two years prior: 104 Number of returns in two years: 13 Percentage of returns to homelessness: 12.5% (Source: System Performance Measure 2, Clarity Report)</p>	<p>Returns to Homelessness: 0-5% = 15 points 6-20% = 10 points 21-30% = 5 points 31-100%=0 points</p>	<p>10</p>
<p>3. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of client served during operating year: 1,012 Total number of chronically homeless clients served during operating year: 159 Percentage of people served who were categorized as chronically homeless: 15.7% (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>	<p>0</p>
<p>4. Percentage of people entered with service connection need for whom that connection is recorded. Max. points = 15 Total number of clients served during operating year: 1,012 Total number of clients with service connection need for whom that connection is recorded: 49 Percentage of clients with service connection need for whom that connection is recorded: 4.8% (Source: HUD APR, Question 7)</p>	<p>Service Connections: ≥75% = 15 points ≤74% = 0 points</p>	<p>0</p>
<p>5. Cost effectiveness: average cost per household served Max. points = 15 Total project spending: ??? Total number of households served: 984 Average cost per household: ??? (Source: CoC project spending report and CoC APR, Question 8a)</p>	<p>Cost Effectiveness (SO): ≤ \$500 = 15 points ≥ \$500 = 0 points</p>	<p>15</p>
<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: 648 Average score of those with completed assessment: (Source: HMIS custom report) 7.25</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>	<p>15</p>

7. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10	Max. points = 10 points.	10
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8. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20	All elements are included will = 20 points.	10
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Maximum points available = 150		80
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Total Points Received by Proposal:	
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Comments:

Reviewer Signature: <i>Annette Lewis</i>	Date: 9/6/23
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FY 2023 CoC Ranking Sheet – SSO

Supportive Services Only(Street Outreach)

Reviewer:

Proposal: Homeless Assistance Team (HAT)

Scoring Elements	Point Values	Score
<p>1. The percentage persons placed into housing (Emergency Shelter, TH or PH) as a result of the street outreach program during the operating year. Max points =50. Total number of persons exiting during the operating year: 631 Total number of persons placed into housing during the operating year: 240 Percentage of persons placed into housing during the operating year: 38.0% (Source: HUD APR, Question 23 a&b)</p>	<p>Housing Results: 75-100% = 50 points 60-74% =40 points 46-59% = 30 points 31-45% = 20 points 0-30% = 0 points</p>	<p>20</p>
<p>2. The percentage of households who do NOT return to the street or, having exited shelter, return to homelessness (street or shelter) within two years of exiting the program. HUD Standard 95% Max. points =15 Total number of persons who exited to permanent housing destination two years prior: 104 Number of returns in two years: 13 Percentage of returns to homelessness: 12.5% (Source: System Performance Measure 2, Clarity Report)</p>	<p>Returns to Homelessness: 0-5% = 15 points 6-20% = 10 points 21-30% = 5 points 31-100%=0 points</p>	<p>10</p>
<p>3. Percentage of people that were served who were categorized as chronically homeless at intake. Max. points = 10 Total number of client served during operating year: 1,012 Total number of chronically homeless clients served during operating year: 159 Percentage of people served who were categorized as chronically homeless: 15.7% (Source: CoC APR Question 26b)</p>	<p>Chronically Homeless: ≥75% = 10 points ≤74% = 0 points</p>	<p>0</p>
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<p>6. Average VI-SPDAT 2.0 score of individuals and families served during the operating year. Max. points = 15 Total number of individuals with completed VI-SPDAT 2.0 assessment: 648 Average score of those with completed assessment: (Source: HMIS custom report) 7.25</p>	<p>Vulnerability Results: ≥ 7 = 15 points ≤ 6.9 = 0 points</p>	<p>15</p>

7. Project summary was clear and funding for objectives is reasonable for number of outcomes. Max. points = 10	Max. points = 10 points.	10
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8. Project summary included detailed budget and budget narrative. Match is documented, budget narrative included, itemized budget is clear. Max. points = 20	All elements are included will = 20 points.	20
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Maximum points available = 150		
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Total Points Received by Proposal:	90
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Comments:

Reviewer Signature: Paula L. Prince	Date: 7 September 2023
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Alison Jorgensen

From: Matthew R. Crookshank <matthew.crookshank@roanokeva.gov>
Sent: Wednesday, September 13, 2023 4:17 PM
To: Alison Jorgensen; Brian Burnette; Elwell, Christine; Wallen, Anita; matthew.crookshank
Cc: Hope Browning; Prince, Paula
Subject: FY 2023 CoC Project Notification of Acceptance and Ranking
Attachments: FY 2023 Project Ranking.pdf

Good Afternoon CoC Program Project Applicants,

As you all know, the Blue Ridge Interagency Council on Homelessness' (BRICH) Ranking Committee met last Thursday afternoon (9/7/23) to review and rank the project applications that were submitted as part of our local competition for U.S. Department of Housing & Urban Development Continuum of Care Program funding.

Attached is the Ranking Committee's final project ranking. All projects included on the attached project listing have been accepted and recommended for funding by the Ranking Committee and will be submitted as part of our CoC's Consolidated Application. No project applications were reduced or rejected.

Please let me know if you have any questions.

Thank you all for all that you do to meet the needs of individuals experiencing homelessness in our community.

Matt

Matt Crookshank

Human Services Administrator
CoC Lead - Blue Ridge Continuum of Care
City of Roanoke
1 South Jefferson Street
Roanoke, VA 24011
(540) 312-8301
matthew.crookshank@roanokeva.gov

FY 2023 Blue Ridge Continuum of Care - New and Renewal Project Ranking

Ranking	Applicant	Project	Application Type	Project Description	Requested Amount	Tier 1	Tier 2
1	Roanoke City	HAT - Street Outreach - SSO	Renewal	Street Outreach	\$140,422.00	\$140,422.00	
2	Commonwealth Catholic Charities	Heroes Haven - PSH for CH Vets / Healing Haven PSH for CH	Renewal	Request to consolidate these two grants into one PSH grant	\$506,765.00	\$506,765.00	
3	Roanoke City*	Central Intake - CAS - SSO	Renewal	Central Intake/Coordinated Entry	\$49,070.00	\$49,070.00	
4	Council of Community Services*	HMIS	Renewal	HMIS services for CoC	\$129,060.00	\$123,810.00	\$5,250.00
5	Commonwealth Catholic Charities	PSH - SSO	Renewal	Request to use SSO for PSH case management	\$56,476.00		\$56,476.00
6	Council of Community Services	HMIS Expansion	NEW/BONUS	Expand HMIS Services	\$110,000.00		\$110,000.00 BONUS
TOTAL Requested:					\$991,793.00		

*HUD requires communities to have HMIS and CAS/CES in place.

Tier 1:	\$820,067.00
Tier 2:	\$61,726.00
ARD:	\$881,793.00

***\$108,972 is ARA for CoC Planning

Alison Jorgensen

From: Matthew R. Crookshank <matthew.crookshank@roanokeva.gov>
Sent: Wednesday, September 13, 2023 4:17 PM
To: Alison Jorgensen; Brian Burnette; Elwell, Christine; Wallen, Anita; matthew.crookshank
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Please let me know if you have any questions.

Thank you all for all that you do to meet the needs of individuals experiencing homelessness in our community.

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Ranking	Applicant	Project	Application Type	Project Description	Requested Amount	Tier 1	Tier 2
1	Roanoke City	HAT - Street Outreach - SSO	Renewal	Street Outreach	\$140,422.00	\$140,422.00	
2	Commonwealth Catholic Charities	Heroes Haven - PSH for CH Vets / Healing Haven PSH for CH	Renewal	Request to consolidate these two grants into one PSH grant	\$506,765.00	\$506,765.00	
3	Roanoke City*	Central Intake - CAS - SSO	Renewal	Central Intake/Coordinated Entry	\$49,070.00	\$49,070.00	
4	Council of Community Services*	HMIS	Renewal	HMIS services for CoC	\$129,060.00	\$123,810.00	\$5,250.00
5	Commonwealth Catholic Charities	PSH - SSO	Renewal	Request to use SSO for PSH case management	\$56,476.00		\$56,476.00
6	Council of Community Services	HMIS Expansion	NEW/BONUS	Expand HMIS Services	\$110,000.00		\$110,000.00 BONUS
TOTAL Requested:					\$991,793.00		

*HUD requires communities to have HMIS and CAS/CES in place.

Tier 1:	\$820,067.00
Tier 2:	\$61,726.00
ARD:	\$881,793.00

***\$108,972 is ARA for CoC Planning

FY 2023 Blue Ridge Continuum of Care - New and Renewal Project Ranking

Ranking	Applicant	Project Name	Score	Application Type	Project Description	Accepted or Rejected	Requested Amount	Tier 1	Tier 2	Reallocated Funds
1	Roanoke City	HAT - Street Outreach - SSO	350	Renewal	Street Outreach	Accepted	\$140,422.00	\$140,422.00		\$0.00
2	Commonwealth Catholic Charities	Heroes Haven - PSH for CH Vets / Healing Haven PSH for CH	330	Renewal	Request to consolidate these two grants into one PSH grant	Accepted	\$506,765.00	\$506,765.00		\$0.00
3	Roanoke City*	Central Intake - CAS - SSO	No scoring yet for CES project	Renewal	Central Intake/Coordinated Entry	Accepted	\$49,070.00	\$49,070.00		\$0.00
4	Council of Community Services*	HMIS	No scoring yet for HMIS project	Renewal	HMIS services for CoC	Accepted	\$129,060.00	\$123,810.00	\$5,250.00	\$0.00
5	Commonwealth Catholic Charities	PSH - SSO	Project being reallocated from SSO to PSH - SSO	Renewal	Request to use SSO for PSH case management	Accepted	\$56,476.00		\$56,476.00	\$56,476.00
6	Council of Community Services	HMIS Expansion	No scoring yet for HMIS project	NEW/BONUS	Expand HMIS Services	Accepted	\$110,000.00		\$110,000.00	\$0.00
TOTAL Requested:							\$991,793.00			\$56,476.00

*HUD requires communities to have HMIS and CAS/CES in place.

Tier 1:	\$820,067.00
Tier 2:	\$61,726.00
ARD:	\$881,793.00

***\$108,972 is ARA for CoC Planning

2023 HDX Competition Report

PIT Count Data for VA-502 - Roanoke City & County, Salem CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	276	250	216	334
Emergency Shelter Total	246	238	178	297
Safe Haven Total	0	0	0	0
Transitional Housing Total	0	0	0	0
Total Sheltered Count	246	238	178	297
Total Unsheltered Count	30	12	38	37

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	44	56	39	57
Sheltered Count of Chronically Homeless Persons	36	49	28	44
Unsheltered Count of Chronically Homeless Persons	8	7	11	13

2023 HDX Competition Report

PIT Count Data for VA-502 - Roanoke City & County, Salem 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	24	17	10	33
Sheltered Count of Homeless Households with Children	24	17	10	33
Unsheltered Count of Homeless Households with Children	0	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	78	30	27	19	30
Sheltered Count of Homeless Veterans	78	29	25	17	26
Unsheltered Count of Homeless Veterans	0	1	2	2	4

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

2023 HDX Competition Report
HIC Data for VA-502 - Roanoke City & County, Salem 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	476	373	400	93.25%	76	76	100.00%	449	94.33%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	0	0	0	NA	0	0	NA	0	NA
RRH Beds	88	88	88	100.00%	0	0	NA	88	100.00%
PSH Beds	142	142	142	100.00%	0	0	NA	142	100.00%
OPH Beds	37	37	37	100.00%	0	0	NA	37	100.00%
Total Beds	743	640	667	95.95%	76	76	100.00%	716	96.37%

2023 HDX Competition Report
HIC Data for VA-502 - Roanoke City & County, Salem CoC

2023 HDX Competition Report

HIC Data for VA-502 - Roanoke City & County, Salem CoC

Notes

*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.

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	60	36	38	38

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	5	8	13	11

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	42	83	64	88

2023 HDX Competition Report
HIC Data for VA-502 - Roanoke City & County, Salem CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for VA-502 - Roanoke City & County, Salem 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	992	1185	84	34	-50	39	13	-26
1.2 Persons in ES, SH, and TH	992	1185	84	34	-50	39	13	-26

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.

2023 HDX Competition Report
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")	988	1395	387	296	-91	141	89	-52
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	988	1395	387	296	-91	141	89	-52

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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 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	183	36	20%	9	5%	16	9%	61	33%
Exit was from ES	180	33	18%	11	6%	9	5%	53	29%
Exit was from TH	0	0		0		0		0	
Exit was from SH	0	0		0		0		0	
Exit was from PH	164	4	2%	8	5%	3	2%	15	9%
TOTAL Returns to Homelessness	527	73	14%	28	5%	28	5%	129	24%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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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	250	216	-34
Emergency Shelter Total	238	178	-60
Safe Haven Total	0	0	0
Transitional Housing Total	0	0	0
Total Sheltered Count	238	178	-60
Unsheltered Count	12	38	26

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	1006	1358	352
Emergency Shelter Total	1006	1358	352
Safe Haven Total	0	0	0
Transitional Housing Total	0	0	0

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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)	25	0	-25
Number of adults with increased earned income	1	0	-1
Percentage of adults who increased earned income	4%		

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)	25	0	-25
Number of adults with increased non-employment cash income	2	0	-2
Percentage of adults who increased non-employment cash income	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)	25	0	-25
Number of adults with increased total income	2	0	-2
Percentage of adults who increased total income	8%		

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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)	8	12	4
Number of adults who exited with increased earned income	0	0	0
Percentage of adults who increased earned income	0%	0%	0%

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)	8	12	4
Number of adults who exited with increased non-employment cash income	2	3	1
Percentage of adults who increased non-employment cash income	25%	25%	0%

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)	8	12	4
Number of adults who exited with increased total income	2	3	1
Percentage of adults who increased total income	25%	25%	0%

2023 HDX Competition Report

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.	992	1264	272
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.	400	316	-84
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)	592	948	356

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.	1086	1481	395
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.	438	326	-112
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.)	648	1155	507

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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	380	469	89
Of persons above, those who exited to temporary & some institutional destinations	30	27	-3
Of the persons above, those who exited to permanent housing destinations	89	185	96
% Successful exits	31%	45%	14%

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

2023 HDX Competition Report

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	938	1068	130
Of the persons above, those who exited to permanent housing destinations	232	265	33
% Successful exits	25%	25%	0%

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	84	136	52
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	79	131	52
% Successful exits/retention	94%	96%	2%

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FY2022 - SysPM Data Quality

VA-502 - Roanoke City & County, Salem CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	362	362	381				198	143	161	42	83	64			
2. Number of HMIS Beds	362	362	381				198	143	161	42	83	64			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00				100.00	100.00	100.00	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	1712	1181	1377	0	0	0	185	159	214	309	293	380	737	676	896
5. Total Leavers (HMIS)	1511	1055	927	0	0	0	42	25	71	213	217	254	488	393	478
6. Destination of Don't Know, Refused, or Missing (HMIS)	173	37	557	0	0	0	0	6	19	0	1	11	253	14	0
7. Destination Error Rate (%)	11.45	3.51	60.09				0.00	24.00	26.76	0.00	0.46	4.33	51.84	3.56	0.00

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FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for VA-502 - Roanoke City & County, Salem CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/25/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/28/2023	Yes