



North Carolina Balance of State Continuum of Care

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ESG Regional Application Answers for CoC-Wide Questions

NCCEH staff have prepared the answers for CoC-wide questions on the ESG Regional Application. Please enter the answers below into the Regional Application for your Regional Committee.

Section 1

1.1 Does your LPA Agency have paid staff to provide administrative support to the Local Planning Area as a part of their job description.

No (This is not NCCEH staff because the LPA in the BoS is the Regional Committee ESG Lead Agency. Only answer yes if your ESG Lead Agency has this role in their job description)

Section 7

7.7 Explain the annual evaluation of the Coordinated Entry System

The annual evaluation will be conducted every spring, unless the Coordinated Entry Council designates another time of year due to unforeseen circumstances.

The CoC uses a combination of surveys and data to conduct its evaluation. Data from the HMIS and from regional by-name lists are used to evaluate the performance of the system in placing people quickly into housing.

Procedure

The CoC surveys two groups for its annual coordinated entry evaluation:

1. The CoC distributes electronic surveys to participating providers to understand their experience with the system, understanding of coordinated entry, and current participation in coordinated entry.
2. The CoC distributes surveys to participants who have experienced the coordinated entry system. The CoC distributes surveys to participants who are currently experiencing homelessness and who have been recently housed.

Surveys to providers:

Provider surveys will be distributed electronically. The person or persons most familiar with the coordinated entry system will complete the survey. All providers required by their funding sources to participate in coordinated entry should submit a survey. All other providers that participate in the CE system are highly encouraged to submit surveys.

Surveys to clients:

- The CoC distributes surveys to people experiencing homelessness during a two-week period, designated by the Coordinated Entry Council, every spring after the VI-SPDAT is conducted. Each Regional Committee should make sure people living unsheltered also receive the VI-SPDAT and the survey during this period.
- The CoC distributes surveys to people enrolled in rapid re-housing throughout the year within 30 days of when they are housed.
- The CoC distributes surveys to people newly enrolled in permanent supportive housing

in the last year during a two-month period every spring, during regular case management meetings. This two-month period ends the same date the period for surveys to people experiencing homelessness ends.

- All providers that are required by their funding sources to participate in coordinated entry must distribute surveys to their clients. All other providers that participate in the CE system are highly encouraged to distribute surveys to their clients.
- Completing the surveys is optional for clients.

Survey collection:

The Regional Committee’s Coordinated Entry Lead will confidentially collect all client surveys and send them to NCCEH for analysis.

Section 8

8.3 How are providers included in the decision making about Written Standards?

NCCEH staff worked with a NC BoS CoC Steering Committee workgroup to draft written standards for all CoC- and ESG-funded activities. NC BoS CoC stakeholders provided feedback during the process. The Steering Committee approved both programmatic and coordinated entry written standards on September 6, 2016. Street Outreach Written Standards were not a part of the original package, because the CoC did not have CoC- or ESG-funded Street Outreach activities in the CoC until 2018. Street Outreach Written Standards were reviewed by SSVF providers and the Steering Committee and approved May 2018. These written standards have been updated as needed to reflect HUD and CoC priorities.

NC BoS CoC is broken down into local Regional Committees, which represent the totality of homeless services and providers in a given area. Regional Committees serve as a community resource for coordination and networking on the local level. Each Regional Committee elects a Regional Lead and Regional Alternate to represent their Region’s needs and priorities on the NC BoS CoC Steering Committee, which governs the NC BoS CoC.

When revisions to Written Standards are necessary, the revised Written standards are submitted to the Steering Committee for review and discussion prior to the Steering Committee voting to approve Written Standards. The role of the Regional Lead/Alternate is to ensure they receive feedback on from their region’s providers on new or revised Written Standards.

Section 14

14.1 Is the LPA Lead Agency or Selection Committee imposing any additional requirement beyond the ESG contract requirements on one or more of the project applications?

Please include any Regional grantee expectations you have set. Common expectations have been:

- participation in the Regional Committee or sub-committees
- Reporting QPR information to the Regional Committee
- Seeking approval from the Regional Committee prior to significant ESG budget change or a change in activity type.

Regional Application Required Documents

CoC Policies (in order)

Written Standards	• Street Outreach Program Standards
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	<ul style="list-style-type: none"> • Emergency Shelter Program Standards • Transitional Housing Program Standards • Prevention and Rapid Rehousing Program Standards • Permanent Supportive Housing Program Standards • Coordinated Entry System Standards
Coordinated Entry Policies	<p>Submit your Local Coordinated Entry Plans, posted on your Regional Committee Webpage, found at http://www.ncceh.org/bos/regionalcommittee/Coordinated Entry System Standards</p>
Most recent annual evaluation of coordinated entry process (findings and outcomes)	NC BoS CoC's 2018-2019 CE Evaluation Report
Violence Against Women Act Policies	<p>VAWA Emergency Transfer Plan Projects will also submit their program policy</p>
Nondiscrimination Policy with Complaint Procedure identified	<p>Anti-Discrimination Policy Projects will also submit their program policy</p>
Materials used to evaluate ESG Project applications	<p>NC BoS CoC's 2019 ESG Funding Priorities 2019 NC BoS CoC Regional Committee Scorecard</p>

APPENDIX A: WRITTEN STANDARDS COVER PAGE

Include this page with the completed Regional Application under Tab 4. In the table below, enter the page number of the CoC's Written Standards where the corresponding requirements can be found.

ALL PROGRAM REQUIREMENTS	POLICY PAGE NUMBER
Standards include the area of service where assistance shall be offered.	SO 2-3 ES 2-3 HP/RRH 2-4 CE 2-3
Standards include all type(s) of assistance that will be offered through the ESG program.	SO 8-9 ES 8-9 HP/RRH 9-14- CE 8-17
Standards summarize the procedure in place that defines how program participants will be evaluated for eligibility of assistance under the ESG program. (Note: DV shelters must follow the requirements of the Violence Against Women Act and the Family Violence Prevention and Services Act which prohibits agencies from making its shelter or housing conditional on the participant's acceptance of service)	SO 7-8 ES 3, 7-8 HP/RRH 8-9 CE 8-11
Standards include procedures describing the coordination (coordinated entry) emergency shelter providers, essential services providers, homelessness prevention, and rapid re-housing assistance providers, other homeless assistance providers, and mainstream service and housing providers.	SO 3, 8-9 ES 3, 7 HP/RRH 3-4 CE 1-19
Standards include a list of available programs that program participants will be referred, including all programs reflected in 576.400 (b) and (c) such as Shelter + Care, VASH Voucher, Section 8, Emergency Food and Shelter program, etc. if available to program participants in the agency's area of service.	SO 8-10 ES 8 HP/RRH 13-14 CE 14-15
Standards describe the formal termination process established by the agency that recognizes the rights of individuals affected. The agency must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so that a program participant's assistance is terminated only in the most severe cases.	SO 10 ES 9-10 HP/RRH 14-16
Standards describe the program participant's formal grievance process. Included shall be the right for the participant to contact the agency's Director, the Housing Division or HUD.	SO 10 ES 9-10 HP/RRH 14
Standards include summaries regarding the requirement that clients served and activities provided with ESG funds will be entered into HMIS (or comparable database if a DV shelter), the timeframe for data to be entered, and the process for ensuring confidentiality of client records.	SO 10 ES 8, 11 HP/RRH 9, 17 CE 11
Standards include steps used to ensure clients receiving ESG assistance are provided all applicable HMIS releases, forms, client complaint process, etc. as required by HMIS regulations.	SO 8, 10-11 ES 8, 11 HP/RRH 9, 16-17 CE 11

STREET OUTREACH AND EMERGENCY SHELTER REQUIREMENTS	
Standards include a summary of how agency staff will target and provide services related to street outreach.	SO 8-10
Standards include steps for admission, diversion, referral, and discharge by emergency shelters assisted under ESG, including standards regarding length of stay limits, if any, and safeguards to meet the safety and shelter needs of special populations, such as victims of domestic violence, sexual assault, etc.	ES 2-3, 7-8
Standards include steps for admission, diversion, referral and discharge by emergency shelters assisted under ESG for individuals and families who have the highest barriers to housing and are likely to be homeless the longest.	ES 2-3, 7-8
Standards include assessing, prioritizing, and reassessing individuals and families' needs for essential services related to emergency shelter.	ES 3, 7-8
HOMELESS PREVENTION AND RAPID RE-HOUSING REQUIREMENTS	
Standards shall include definitions of who is considered to be homeless and at-risk of homelessness, as defined in 576.2.	5-6
Standards include a process for determining and prioritizing which eligible families and individuals will receive homeless prevention or rapid re-housing assistance.	8-9
Standards include standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving homelessness prevention or rapid re- housing assistance.	10, 11
Standards include process for evaluating and documenting income eligibility since program participant's income must be below 30% of area median income as established by HUD for the area in which the participant lives when entering the program. Agencies must follow guidelines found under 24 CFR 5.609 when calculating income.	13
Standards include the steps to determine the eligibility of rental assistance, including steps to determine that rent + utilities do not exceed Fair Market Rents for the area of service.	9-12
Standards include how agency staff will document FMR and rent reasonableness standards, lead based paint inspections, and housing inspections. Included shall be procedures to verify and document the age of the units built before 1978 may contain lead-based paint.	9-12
Standards include steps for determining how long a program participant will be provided rental assistance and whether or not (and how) the amount of that assistance will be adjusted over time, if applicable.	10, 11- 12
Standards include steps for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the homelessness prevention or rapid re-housing assistance that each program participant may receive, such as the maximum amount of assistance, the maximum number of months the program participant receives assistance, or the maximum number of times the program participant may receive assistance.	10,11-12

<p>Standards that includes the requirements of program participants to meet with a case manager not less than once per month to assist the program participant in ensuring long-term housing stability (and be documented in client case file and HMIS). Included shall be the agency's plan to assist the program participant to retain permanent housing after the ESG assistance ends, taking into account all relevant considerations such as the program participant's current or expected income and expenses, other public or private assistance for with the program participant will be eligible and likely to receive, and the relative affordability of available housing in the area. (Note DV shelters must follow the requirements of the Violence Against Women Act or the Family Violence Prevention and Services Act which prohibits agencies from making its shelter or housing conditional on the participants acceptance of service.)</p>	<p>13</p>
<p>Standards include requirements that clients will be re-evaluated for program eligibility and the types and amounts of assistance the program participant needs. This re-evaluation process shall be conducted not less than once every 3 months for program participants receiving homelessness prevention assistance and not less than once annually for program participants receiving rapid re-housing assistance. Income limits shall not exceed 30% of AMI; the participants still lack the resources and support networks necessary to retain housing.</p>	<p>13</p>
<p>Standards shall include any requirements the agency may have regarding the requirement of the program participant to notify the agency of any change in income, stability, support circumstances that would affect the program participant's need for assistance under the ESG program. If applicable, when notified of the relevant change, the agency shall include steps to re-evaluate the program participant's eligibility and amount and types of assistance the program participant needs.</p>	<p>13</p>
<p>If the program participant receives rental assistance or housing relocation and stabilization services, the Standards shall include the formal process for terminating a program participant that includes: 1) Written notice to the program participant containing a clear statement of the reasons for termination; 2) a review of the decision, in which the participant is given the opportunity to present written or oral objections before a person other than the person who made or approved the termination decision; and 3) prompt written notice of the final decision to the program participant. Included shall be language stating that termination does not bar the program participant from receiving assistance at a later date if the issue that caused the termination is resolved.</p>	<p>14-16</p>

APPENDIX B COORDINATED ENTRY POLICY COVER PAGE

Include this page with the completed Regional Application under Tab 4. In the table below, enter the page number of the CoC's Coordinated Entry Policy where the corresponding requirements can be found.

COORDINATED ENTRY POLICY REQUIREMENTS	POLICY PAGE NUMBER
CES covers the entire geographic area claimed by the CoC.	4-5
CES is easily accessed by individuals and families seeking housing or services.	3
CES is well-advertised.	4
CES includes a comprehensive and standardized assessment tool(s).	11-12
CES includes a comprehensive and standardized assessment tool(s).	11-12
CES provides an initial, comprehensive assessment of individuals and families for housing and services.	12-14
CES includes a specific policy to guide the operation of the centralized or coordinated assessment system to address the needs of individuals and families who are fleeing, or attempting to flee, Domestic Violence / Victim Service Provider, dating violence, sexual assault, or stalking, but who are seeking shelter or services from non-victim specific providers.	17



APPENDIX C VAWA EMERGENCY TRANSFER PLAN COVER PAGE

Include this page with the completed Regional Application under Tab 4. In the table below, enter the page number of the CoC's VAWA/Emergency Transfer Plan Policy where the corresponding requirements can be found.

EMERGENCY TRANSFER PLAN REQUIREMENTS	POLICY PAGE NUMBER
Definition of Internal Emergency Transfer	2
Definition of External Emergency Transfer	2
Definition of Safe Unit	2
<p>A tenant receiving rental assistance through, or residing in a unit subsidized under, a covered housing program who is a victim of domestic violence, dating violence, sexual assault, or stalking qualifies for an emergency transfer if:</p> <ul style="list-style-type: none"> • The tenant expressly requests the transfer; and • The tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying; or • In the case of a tenant who is a victim of sexual assault, either the tenant reasonably believes there is a threat of imminent harm from further violence if the tenant remains within the same dwelling unit that the tenant is currently occupying, or the sexual assault occurred on the premises during the 90-calendar-day period preceding the date of the request for transfer. 	2-3, 12
<p>The plan must detail the measure of any priority given to tenants who qualify for an emergency transfer under VAWA in relation to other categories of tenants seeking transfers and individuals seeking placement on waiting lists.</p> <ul style="list-style-type: none"> • Tenant Selection Plans (TSPs) should be amended to include any VAWA preference (this does not require HUD approval). 	5, 15

Commented [JVE1]: These definitions will be approved at the September Steering Committee Meeting



<p>The plan must incorporate strict confidentiality measures to ensure that the housing provider does not disclose the location of the dwelling unit of the tenant to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the tenant.</p>	<p>4-5, 14</p>
<p>The plan must allow a tenant to make an internal emergency transfer under VAWA when a safe unit is immediately available.</p> <p>The plan should define the term “immediately available.” For example, “a vacant unit, ready for move-in with a reasonable period of time.”</p> <ul style="list-style-type: none"> • Include time frames, possible internal transfer locations, and priority status relative to other tenants seeking an internal transfer. 	<p>5-6, 14-15</p>
<p>The plan must describe policies for assisting a tenant in making an internal emergency transfer under VAWA when a safe unit is not immediately available, and these policies must ensure that requests for internal emergency transfers receive, at a minimum, any applicable additional priority that housing providers may already provide to other types of emergency transfer requests (e.g., transfers based on disability).</p>	<p>6, 15</p>
<p>The plan must describe reasonable efforts the housing provider will take to assist a tenant who wishes to make an external emergency transfer when a safe unit is not immediately available. The plan must include policies for assisting a tenant who is seeking an external emergency transfer under VAWA out of the housing provider’s program or project, and a tenant who is seeking an external emergency transfer under VAWA into the housing provider’s program or project. These policies may include:</p> <ul style="list-style-type: none"> • Arrangements, including memoranda of understanding, with other housing providers to facilitate moves (such documents should be attached to the plan); and • Outreach activities to organizations that assist or provide resources to victims of domestic violence, dating violence, sexual assault, or stalking. 	<p>5-6, 14-15</p>
<p>Nothing may preclude a tenant from seeking an internal emergency transfer and an external emergency transfer concurrently if a safe unit is not immediately available. It is recommended that this policy be clearly stated in the plan.</p>	<p>15</p>

Commented [JVE2]: This will be voted for approval on September steering committee meeting



<p>The plan should state that a request does not guarantee continued assistance or an external transfer to other HUD housing.</p>	<p>3</p>
<p>Where applicable, the plan must describe policies for a tenant who has tenant-based rental assistance (e.g., voucher) and who meets the requirements of #1 above to move quickly with that assistance.</p> <p>Housing providers should coordinate with local providers of the tenant-based assistance (e.g., local PHA).</p>	<p>5-6, 14-15</p>
<p>The plan may require documentation from a tenant seeking an emergency transfer, provided that:</p> <ul style="list-style-type: none"> • The tenant's submission of a written request to the housing provider, where the tenant certifies that they meet the eligibility requirements to request a VAWA transfer, shall be sufficient documentation of the requirements necessary to request an emergency transfer; • The housing provider may, at its discretion, ask an individual seeking an emergency transfer to document the occurrence of domestic violence, dating violence, sexual assault, or stalking, in accordance with 24 CFR §5.2007, for which the individual is seeking the emergency transfer, if the individual has not already provided documentation of that occurrence; and • No other documentation is required to qualify the tenant for an emergency transfer. 	<p>3-4, 13-14</p>
<p>The housing provider must make its emergency transfer plan available upon request and, when feasible, must make the plan publicly available.</p>	<p>3, 12-13</p>
<p>The housing provider must keep a record of all emergency transfers requested under its plan, and the outcomes of such requests, and retain these records for a period of three years, or for a time period as specified in program regulations. Requests and outcomes of such requests must be reported to HUD annually.</p>	<p>8, 18</p>

