

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: VT-500 - Vermont Balance of State CoC

1A-2. Collaborative Applicant Name: Vermont Coalition to End Homelessness

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Institute for Community Alliances

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:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.p., and VII.B.1.r.	
	In the chart below for the period from May 1, 2021 to April 30, 2022:	
	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.	Agencies serving survivors of human trafficking	Yes	Yes	Yes
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	Disability Advocates	Yes	Yes	Yes
5.	Disability Service Organizations	Yes	Yes	Yes
6.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
7.	Homeless or Formerly Homeless Persons	Yes	Yes	No
8.	Hospital(s)	Yes	No	Yes
9.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
10.	Law Enforcement	Yes	No	No
11.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
12.	LGBTQ+ Service Organizations	No	No	No
13.	Local Government Staff/Officials	Yes	Yes	No
14.	Local Jail(s)	Yes	No	No
15.	Mental Health Service Organizations	Yes	Yes	Yes
16.	Mental Illness Advocates	Yes	Yes	Yes

17.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	No	No	No
18.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
19.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
20.	Other homeless subpopulation advocates	Yes	Yes	Yes
21.	Public Housing Authorities	Yes	Yes	Yes
22.	School Administrators/Homeless Liaisons	Yes	No	Yes
23.	State Domestic Violence Coalition	Yes	Yes	Yes
24.	State Sexual Assault Coalition	Yes	Yes	Yes
25.	Street Outreach Team(s)	Yes	Yes	Yes
26.	Substance Abuse Advocates	Yes	No	Yes
27.	Substance Abuse Service Organizations	Yes	Yes	Yes
28.	Victim Service Providers	Yes	Yes	Yes
29.	Domestic Violence Advocates	Yes	Yes	Yes
30.	Other Victim Service Organizations	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 VII.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 with individuals with disabilities, including the availability of accessible electronic formats;
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)

1. VT-500 BoS communicates an invitation to new members to join the CoC in a number of ways: (1) we convene CoC board and member meetings ten times per year. Invitations to these meetings go out to our 450-person listserv with “everyone is invited” message; (2) we solicit membership and participation at public events, including this year the Homelessness Awareness Day, Summit on Homelessness statewide gathering, and a statewide meeting for housing practitioners and advocates. Lastly, our most effective outreach is through 11 Local Housing Coalitions:

Vermont has a regional network of 11 Local Housing Coalitions (LHCs) that are responding to homelessness in their communities. These coalitions each meet 10-12 times per year (a total of 110-132 meetings annually!) and participation includes representatives from shelter and services providers, affordable housing developers/owners, school systems (LEAs), DV shelter and service providers, community justice centers, people with lived experience, municipalities and planning commissions, state agency of human services, and advocates. VT-500 BoS staff routinely attend these meetings (almost all meetings are convened via video conferencing), to listen and learn and to report on BoS activities – including how local representatives can participate in BoS activities. The 11 LHCs elect a voting member of the BoS board of directors. Chairs of the LHCs meet monthly for planning, evaluation, and promotion of best practices, convened by the BoS CoC. The LHCs are a vital component of our outreach and communication efforts.

2. VT-500 BoS ensured effective communication with individuals with disabilities by making electronic formats accessible through website/email/phone, PDF, virtual meetings (Zoom and phone options), Teletype (TTY) machines and language translation services available through both the Collaborative Applicant and VT 211.

3. The following organizations serving culturally specific communities experiencing homelessness in the VT-500 BoS CoC were invited (via direct outreach of Membership Committee, email listserv, as well as local CoC and individual CoC member outreach), to and participated in, VT-500 BoS CoC activities to address equity and inclusion: Peer Orgs serving persons with disabilities (Another Way, Peer Plus-CoC Board, Pathways VT-CoC Board, VT Center for Independent Living), Civil/Human Rights (VT Human Rights Commission & VT Legal Aid), LGTBQ & DV/SV (VT Network-CoC Board), and VT 211.

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

1. VT-500 BoS solicited & considered opinions to prevent/end homelessness from a broad array of organizations & individuals: 9/15/21 public meeting (99 people) included multiple sub-populations (affordable housing/funders, shelters, youth, mental health, veteran, disability, seniors, families, DV/SV, substance use) with state/federal reports homeless/housing strategy & public discussion; Local Housing Coalitions present local priorities/updates at monthly BoS CoC public meetings; CoC conducted outreach to persons experiencing homelessness and CoC Board has included (over past year) 2 paid representatives with lived homeless experience, surveys & focus groups, multiple organizations & 11 Local Housing Coalitions (100+ members); invited/hosted focused forums (VT Dept. of Health-COVID, VT Human Rights Commission); CoC membership committee ensures ongoing assessments/recruitment.

2. VT-500 BoS maintains public CoC website & listserv to provide information & seek public input. Invitations to Board and Member meetings go out to our 450-person listserv with “everyone is invited” message; we provide and solicit information at public events, including this year the Homelessness Awareness Day (to recognize the deaths of people experiencing homelessness over the last year), Summit on Homelessness statewide gathering, and a statewide meeting for housing practitioners and advocates. Local Housing Coalition and BoS CoC meeting minutes are distributed widely.

3. VT-500 BoS considered information gathered in public meetings to address improvements/new approaches to preventing/ending homelessness: VT Covid-19 Homeless Response Team (bi-monthly meetings to ensure safety, food, services and transportation of homeless population); public hearings on the Consolidated Plan; ongoing special discussions on changes to Vermont’s Motel Program and alternative projects (motel conversion, diversion/prevention, new/expanded shelters); CoC discussions/approval of new Emergency Housing Vouchers (to serve DV/SV); updated policies and discussion (HMIS, Coordinated Entry, Veterans, Project Ranking, CoC Strategic Planning); participate in over 100 meetings of Local Housing Coalitions.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
NOFO Section VII.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.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.	

(limit 2,500 characters)

1. VT-500 BoS sent a draft Request for Proposals (RFP) public notice via CoC email listserv (450 interested parties) & posted on CoC website (Aug. 10, 2022); the final RFP and scoring tool were distributed via public notice on the CoC email listserv (450 interested parties) and website (Aug. 17, 2022). VT-500 BoS public notices included link to CoC project RFP & related documents; the website and RFP states “All eligible entities, including those that do not currently receive CoC Program funds, are encouraged to submit proposals for any of the VT BoS FFY2022 CoC Program funds.”

CoC partners released information as follows: Vermont Housing Finance Agency distributed public notices via their listserv and public website (Aug. 26, 2022); VT-500 BoS Board chair conducted outreach to the Vermont Network Against DV/SV to apply for DV Bonus funds; announcement of funding made at statewide public meetings: VT-BoS board and membership meeting on July 19, 2022 and Summit on Homelessness July 28, 2022 – in anticipation of the NOFO, and public meetings on Aug. 9, 2022 and Aug. 22, 2022.

2. VT-500 BoS listserv notice, website and RFP document directed all project applicants to complete local application form (one Project request per form) and submit it electronically before 4:00 PM EST Aug. 29, 2022 to the Collaborative Applicant, the Vermont Coalition to End Homelessness.

3. At its meeting on Aug. 22, 2022, the VT-500 BoS Board of Directors appointed a five-person Project Scoring Committee and approved an updated Project Scoring tool. RFP public notices/postings explained the “CoC Project Ranking Committee would use the approved CoC Policy & Scoring Tools, HUD and CoC priorities, as well as CoC Program NOFO thresholds and guidance, to determine funding and project ranking submissions to HUD.” Project ranking policy is public and links available to key documents on the VT BoS website and the NOFO RFP.

4.. VT-500 BoS effectively communicated with individuals with disabilities by making CoC Project RFP available in Microsoft Word and posted on multiple electronic formats; CoC-affiliated board member (VT 211) maintains TTY and language translation services; CoC staff were available by phone, email, in meetings open to the general public, and in-person to assist with accessibility issues.

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 VII.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	Yes
2.	Head Start Program	No
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)	No
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	No
12.	Organizations led by and serving LGBTQ+ persons	No
13.	Organizations led by and serving people with disabilities	No
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.	U.S. Interagency Council on Homelessness	Yes
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV 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 within your CoC's geographic area so it could be addressed in Consolidated Plan update.

(limit 2,500 characters)

1. The VT-500 BoS CoC sole ESG recipient, State of Vermont/Office of Economic Opportunity (OEO), administers ESG as part of the Housing Opportunity Grant Program (HOP). Multiple OEO staff are active VT BoS members on: CoC Board; HMIS Advisory Board; Coordinated Entry Committee/Lead; Education Committee; and Strategic Planning Committee, to ensure feedback was received on impact of ESG funding priorities and allocations. OEO receives CoC input through postings for feedback to State/CoC websites; public presentations at VT BoS Board and membership meetings. VT BoS consulted with OEO on the strategic allocation of ESG funds to support HMIS which serves all federal homeless programs in Vermont.

2. The ESG recipient (OEO) solicits input on performance measures & priorities through meetings with CoC members and other interested parties. ESG performance outcomes and evaluation standards are discussed at CoC Board and general member meetings. There are quarterly evaluations of subrecipient performance by OEO, all HOP (ESG+) subrecipients are required to present outcomes of their project at least annually to their local CoC. In April 2022, OEO presented an annual report on ESG priorities, performance measures, and proposed changes to standards – this report was discussed by the Board and membership.

3. CoC staff provide PIT, HIC, subpopulation data and any annual homeless data reports to the Vermont Department of Housing & Community Development (DHCD), the jurisdiction responsible for preparing Vermont's Consolidated Plan.

4. Every five years DHCD prepares a statewide Con Plan Housing Needs Assessment to assist in guiding Vermont's investment in affordable housing and our response to homelessness. The CoC provides data and feedback on this needs assessment through members and staff. On an annual basis, the CoC supports Con Plan updates through input from Board and Membership and ongoing engagement with DHCD (CDBG) and the Vermont Housing & Conservation Board (HOME and Housing Trust Fund). The VT BoS CoC Executive Director serves on the Vermont's Consolidated Plan Advisory Committee.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section VII.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.	Yes
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 AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	

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

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

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

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section VII.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)

VT-500 BoS CoC maintains a formal partnership with SEA VT Agency of Education (AOE), through a continually active memorandum of understanding in place since April 2018 which details each other's role in implementation of VT YHDP Community Plan to prevent and end youth homelessness. Per the MOU, the parties, "agree to collaborate on the CoC's planning and implementation of a comprehensive community plan to prevent and end homelessness among youth and young adults throughout the State of Vermont. This MOU recognize the parties' shared goal of preventing and reducing homelessness among unaccompanied youth in Vermont schools by keeping these youth in school with stable housing and supports, and their mutual commitment to identify strategies and reduce barriers to doing so." The AOE shares aggregate data on homeless households experiencing homelessness where there are children and youth as they are reported by LEAs to inform CoC assessment of community need.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
NOFO Section VII.B.1.d.		

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

(limit 2,500 characters)

The VT-500 BoS CoC and the VT Agency of Education-AOE (SEA, CoC member and CoC Youth Homeless Prevention Planning Committee member) adopted CoC Governance Policy “Educational Services for Children Policies & Procedures” in the CoC Written Standards to ensure individuals, youth & families are informed of service eligibility during the intake process and designated staff ensures school enrollment & connections with service planning when education needs are unmet.

The VT AOE-Education for Homeless Children & Youth Program (EHCYP) monitors equal access for homeless students to receive the same free, appropriate, public education (including public preschool) provided to other VT children, to meet the same challenging state content & student performance standards. EHCYP, supported by McKinney-Vento/Every Student Succeeds Act and ARP, continues to maintain/disseminate: 1. contact list for VT Homeless Liaisons; 2. Homeless Liaison Responsibilities; 3. VT Homeless Education Data; 4. Homeless Education: M-V Homeless Assistance Act; 5. EHCYP: Non-Regulatory Guidance; and 6. M-V Act: Appeal Processing Procedure.

To ensure operationalization of educational requirements, CoC Program project design & execution requires that recipients/subrecipients/partners designate staff who are responsible for informing individuals/youth/families of their eligibility for educational services & linkage to the local McKinney-Vento liaisons within the school district of their choice at intake. Further, the CoC embedded a question relating to educational service eligibility within the Coordinated Entry Assessment tool and providers informing individuals, youth and families of applicable educational service eligibility. The CoC and providers encourage households to contact Vermont 211 to access a statewide referral service and web-based inventory to access additional education services and other resources.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.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	Yes
2.	Child Care and Development Fund	No	Yes
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	No	Yes
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	Yes
6.	Head Start	No	Yes
7.	Healthy Start	No	Yes
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—Collaborating with Victim Service Providers.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations who help provide housing and services to survivors of domestic violence, dating violence, sexual assault, and stalking to:

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

(limit 2,500 characters)

1. VT-500 BoS CoC collaborates with victim service providers and the state Domestic and Sexual coalition through multiple modes. The VT Network Against Domestic and Sexual Violence (VT Network), the statewide domestic and sexual violence coalition, is regularly consulted for input on written standards, project priorities and to solicit feedback on system flow and possible improvements. The VT Network has 13 member organizations that serve the BoS CoC, including an LGBTQ+ organization. The VT Network also supports a program for Deaf and hard of hearing survivors as well as a program for survivors currently incarcerated or recently incarcerated at the state’s only women’s correctional facility. The VT Network holds monthly meetings with housing and shelter advocates to provide information and gather feedback and regularly updates victim service providers in between meetings.

The CoC Board has a designated seat for a DV/SV provider to ensure input on any CoC-wide polices that will impact housing and service provisions, who is nominated by the VT Network. The current BoS CoC Co-Chair is staff of the VT Network and is an advocate from a local victim-service provider, sits on the BoS CoC Board.

2. VT-500 BoS CoC works with the state domestic and sexual violence coalition to ensure all housing and services in the CoC are trauma-informed and work to meet the needs of survivors through online training modules open to the public that include trauma-informed care and culturally appropriate services. There are specific DV CE access points with DV providers to ensure people get connected quickly while trying to lessen any additional trauma as they seek assistance. The VT Network was consulted in the creation of the online training modules and VT Network staff was on the design team for all CE training modules. When CE trainings are held in person they include a DV 101 and information specific to supporting survivors accessing CE, provided by the VT Network. The Vermont Network offers trauma informed training and leadership development programs to hundreds of advocates each year. They offer leadership development and mentoring for advocates, convene a biannual statewide conference and bring activists across disciplines together to make change. They provide support to direct services programs to serve marginalized survivors such as incarcerated survivors, victims who are deaf or hard of hearing and victims who seek medical care related

1C-5a.	Annual Training on Safety and Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
NOFO Section VII.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)

1. The VT-500 BoS CoC has a series of free, on-demand, online trainings on best practices including on trauma-informed and culturally appropriate services. The VT Network recently provided a training on VAWA housing protections to staff of the state housing authority with plans to offer the training to Victim Service Providers (VSPs) and additional partners including VAWA 2022 updates. The VT Network and a local victim service provider recently held a space at the statewide Summer Summit on Homelessness that centered trauma-informed practices for healing. Victim Service Providers within all of the 11 Local Housing Coalitions are active partners with their local Coordinated Entry Providers and that includes linking with projects for making referrals and providing technical assistance/training on safety planning & victim-specific resources as well as conducting Coordinated Entry Assessments.

2. VT-500 BoS CoC, Coordinated Entry Lead Agency (VT Agency of Human Services), and VT Network Against DV/SV staff, a coalition of Victim Service Providers-VSP in Vermont (including a LGBTQ+ org), reviewed & integrated best practices on safety planning & protocols, including victim-centered and trauma-informed care, in serving survivors of domestic/sexual violence in the development & operation of a free, on-demand virtual training module on Coordinated Entry-CE. VT Network staff ensures best practices where included by partnering with CoC leadership (Co-Chair), as part of the design team that developed the CE training module. The CE training module is required of all CoC Providers who conduct CE assessments, and it reviews policies & procedures to ensure client safety and consistently planning protocols are followed (non-identifiable unique IDs for the master list, client choice regarding at which agency they complete the assessment, and referrals to VSP agencies).

1C-5b.	Using De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
NOFO Section VII.B.1.e.		
Describe in the field below:		
1.	the de-identified aggregate data source(s) your CoC uses 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)

1. The VT-500 BoS CoC collects data on survivors of domestic violence, dating violence, sexual assault and stalking in several different ways. The VT BOS CoC collaborated with the VT Network Against Domestic & Sexual Violence (DV/SV) to receive de-identified aggregate data reports from each Victim Service Provider, with the number of survivors experiencing homelessness, and provided it to VT BoS as a part of the annual 2022 Point-in-Time Count of the Homeless. The VT Agency of Human Services-AHS (which funds DV/SV Providers and is the Coordinated Entry Lead) receives de-identified aggregate data reports from HMIS-comparable databases (Osnum software) operated individually by each of the Domestic & Sexual Violence Service Providers in the form of AHS-HOP (state/federal ESG) reporting.

2. The de-identified aggregate data was used to assess the special needs of DV/SV survivors in the: (a) allocation of AHS-HOP (state/federal ESG) funding, which supported the operations of DV/SV emergency shelters throughout the VT BoS CoC; (b) funding determinations and geographic distribution of AHS emergency shelter funding to support emergency temporary motel voucher placements serving survivors in special projects operated by DV/SV Providers; and (c) continued determination made by VT BoS CoC to dedicate all HUD Emergency Housing Vouchers-EHV allocated to Vermont (99) to serve DV/SV survivors.

The de-identified aggregate data was reviewed by VT BoS CoC to identify gaps in housing & service needs and advocacy for additional funding for dedicated projects or set-aside funding in existing DV projects.

1C-5c.	Communicating Emergency Transfer Plan to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	
	Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:	
	1. the emergency transfer plan policies and procedures; and	
	2. the process for individuals and families to request an emergency transfer.	

(limit 2,500 characters)

1. The CoC written standards incorporated into the body’s governance charter outline emergency transfer plan policy and procedures and are available on the CoC’s public website. Currently funded projects were part of the development and implementation of procedures and have been provided templates to incorporate the CoC-level policies into their participant intake process. Processes includes a lease addendum for all rental assistance clients that is reviewed during lease signing so people know their rights and options and a VAWA client rights document to provide to all households regardless of current status known to provider.

2. The CoC provides sample templates to help explain process to people in projects to request emergency transfers as needed. Advocates from VT Network Against Domestic & Sexual Violence (DV/SV) member orgs which run in most cases 24/7 hotlines can assist survivors in accessing their VAWA rights. It is also required that that notice be given at the time an applicant is denied and with any notice of eviction or termination of assistance. Staff provide information to people about how to request an emergency transfer and assist them through the process so they can attain safe housing.

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1C-5d.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all of the housing and services available within the CoC’s geographic area.

(limit 2,500 characters)

The VT-500 BoS CoC ensures access to all housing and services through coordinated entry (CE) protocols, State-level policy guidance for use of project funds and training staff who are at front door of crisis response system and within projects. There are specific DV CE access points with victim service providers to ensure people get connected quickly while trying to lessen any additional trauma as they seek assistance. Survivors are not required to complete the CE process through a victim service provider, but it is offered as an option where the DV provider is an assessment partner. Survivor choice is key in providing access to resources. All CE assessment partners and Lead Agencies receive training on how to support survivors through the CE process to ensure their access to resources is not limited. All state funded Housing Opportunity Grant (HOP) funded projects are prohibited from using DV to screen out or exit from services. All HOP-funded Rapid Re-Housing projects must abide by the HOP Standards which require them to administer a VAWA lease addendum, develop and follow an Emergency Transfer Plan, and provide all participants with a VAWA Notice of Rights, among other requirements. Within the coordinated entry system, when a housing opportunity becomes available it is the practice to make sure that the list is up to date with deidentified survivor data to ensure that survivor data is up to date on the list before assigning the housing opportunity to the next prioritized households. Survivors are considered for all mainstream resources that are available to any other eligible household, as well as additional resources such as EHV that are dedicated to survivors. The VT Network Against Domestic and Sexual Violence (VT Network) and its member agencies serve as resources and partners to other non-victim service providers to ensure understanding of eligibility criteria to be able to make referrals and support survivors in accessing available housing and services. The VT Network is a HOP-funded administrator of flexible client-based financial assistance, which ensures that survivors can access this resource without having to share their sensitive information with other administrators around the state. The VT Network also administers EHV services fees funding, to support survivors in accessing housing with those funds.

1C-5e.	Including Safety, Planning, and Confidentiality Protocols in Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC's coordinated entry includes:	
1.	safety protocols,
2.	planning protocols, and
3.	confidentiality protocols.

(limit 2,500 characters)

1 VT-500 BoS CoC, VT Network Against Domestic and Sexual Violence (DV/SV) and VT Agency of Human Services ensured prioritization of safety for DV/SV survivors through Coordinated Entry (CE) protocols regarding assessing safety, providing linkages to DV specific providers, and connecting with emergency temporary housing to get to safety. All CE Providers have required online trainings that include DV/SV safety practices designed by VT DV Network. DV/SV Providers who also act as CE access points in many of the 11 Local Housing Coalitions or are part of the local CE partnerships ensure safety planning as part of referrals and transfers.

2. Coordinated Entry protocols include planning protocols for DV household requests to access or change housing and services. All VT BoS CoC-RRH/PSH recipients are PHAs which optimize VT CoC & PHA VAWA Emergency Plans to provide seamless coordination & access to mainstream VT housing resources (HCV/subsidized managed properties) or with a portability process for Survivors to transfer outside of the state. VT Legal Aid & VT Network developed a CoC-approved VAWA Emergency Transfer (ET) Plan with coverage for both VT CoCs, ET policy, statewide list of DV/SV providers trained with trauma-informed care, Self-Certification & ET Request Forms, Client Release of Information Form, and Notice of Rights for Tenants/Property Owners.

3. VT-500 BoS CoC, VT Network Against DV/SV and VT Agency of Human Services ensured confidentiality for DV/SV survivors thru Coordinated Entry-CE protocols about transfers, trainings on confidentiality standards, protocols for release of information and de-identifying survivor information. DV/SV Providers within all 11 regional CoCs make referrals to CE Providers only with client permission to coordinate services, DV/SV hotlines & VT 211 (free & confidential services) are available. Confidentiality is maintained by including de-identified DV households, with household permission, on CE By-Name lists to be prioritized for resources.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+--Anti-Discrimination Policy and Training.	
	NOFO Section VII.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)?	No
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)?	No

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

Describe in the field below:

1.	whether your CoC updates its CoC-wide anti-discrimination policy, as necessary, based on stakeholder feedback;
----	--

2.	how your CoC assisted providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination;
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)

1. The VT BoS' anti-discrimination policies are codified in two places, in our Governance Charter and in Coordinated Entry Policies & Procedures. Both are "living" documents and are updated on a routine basis, either through our Board committee structure (i.e., CE or Veterans committees) or through the recommendations coming from the eleven Local Housing Coalitions that are a component of our BoS coordination. The anti-discrimination policies have been reviewed by the CE committee in the last year but have not been amended.
2. The CoC provides sample anti-discrimination policies in the CoC Written Standards that can be modified and utilized by projects that do not already have them in place. Agencies are encouraged to reach out to CoC staff, peers, and funders for assistance in creating or revising anti-discrimination policies.
3. The VT BoS' ESG partner is the Office of Economic Opportunity within the VT Agency of Human Services. OEO periodically monitors some CoC assisted providers. The monitoring includes a review of financial management, program outcomes, and compliance with policies including anti-discrimination. Monitoring is generally a collaborative exercise and may include assisting providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy
4. The OEO or BoS monitoring includes a written report of findings. If a provider is non-compliant with anti-discrimination policies, this will be noted and will require corrective action by the provider and support is given from funder to remedy the deficiency.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.	
	NOFO Section VII.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 FY 2021 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 2021 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?
Vermont State Housing Authority	42%	Yes-HCV	Yes
Rutland Housing Authority	94%	Yes-HCV	Yes

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.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)

1. VT-500 BoS CoC, via the Local Housing Coalition, engaged with the Rutland PHA to expand homeless preferences and enact a “Moving-up” preference (8/18/21) for TH, RRH and PSH projects serving persons experiencing homelessness.

VT BoS also engaged with largest Vermont PHA (VT State Housing Authority-VSHA) through public CoC discussion to continue the expansion of VSHA Homeless Preferences, preceded by requests from key stakeholders: VT Veterans Committee, VT Coalition of Runaway & Homeless Youth Programs, Pathways VT (mental health provider/peer organization), and VT Agency of Human Services (ESG-CV CARES vouchers). VSHA subsequently adopted an expanded “Move-Up Strategy” (i.e., Move-on) in 2021 to serve currently/recently homeless persons residing in state-funded RRH (VT Rental Subsidy Program), Domestic Violence Transitional Housing (DOJ-funded), CoC-RRH/YHDP (youth served by VT Coalition of Runaway & Homeless Youth Program providers), VSHA CoC-RRH (all homeless subpopulations), VSHA CoC-PSH (chronic homelessness), Family Unification Program (families/youth), VA-SSVF RRH (homeless veterans), and ESG-CV/CARES RRH (VT Agency of Human Services-households impacted by the COVID-19 pandemic).

VT-500 BoS CoC with the VT State Housing Authority continues a limited homeless preference serving persons fleeing DV, SV and human trafficking with new Emergency Housing Vouchers with Service Fees administered VT Network Against DV/SV.

VT-500 BoS CoC and VSHA engaged in planning and implementation for limited homeless preferences for utilization of 200+ multiple project-based vouchers (HCV/Mainstream) to serve persons experiencing homelessness (including chronic) in partnership with CoC-funded PSH projects (Rutland, Washington, Windham, Windsor counties) and non CoC-funded PSH projects (Addison & Windham counties). Additionally, initial partnerships are in process for use of the Housing Stability Vouchers to serve people experiencing homelessness.

2. Not applicable – Our CoC works with PHAs to adopt homeless preferences.

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	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		Yes

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section VII.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)	No
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	No
5.	Mainstream Vouchers	Yes
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	
		No

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section VII.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.	Family Unification Program (FUP), Foster Youth to Independence (FYI)

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section VII.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.	
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PHA	
	Vermont State Hou...

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

Name of PHA: Vermont State Housing Authority

1D. Coordination and Engagement Cont'd

1D-1.	Discharge Planning Coordination.	
	NOFO Section VII.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 VII.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 2022 CoC Program Competition.	7
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 2022 CoC Program Competition that have adopted the Housing First approach.	7
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 2022 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 VII.B.1.i.	

Describe in the field below:

1.	how your CoC evaluates every recipient—that checks Housing First on their Project Application—to determine if they are actually 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 the competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1. All VT BoS PSH and RRH projects implement low barrier/Housing First practices, and CoC PSH and CoC RRH projects are prioritized to serve households with the most complex service needs via the coordinated entry assessment. The CoC evaluates projects committed to Housing First practices through annual funding application, policy and procedure review, and evaluation of practices within the BoS Coordinated Entry Committee. The BOS monthly Coordinated Entry Committee meetings are used review policies, procedures, as well as current/best practices and report back any policy changes and challenges through monthly CoC Board meetings.

2. All VT BoS CoC projects (PSH and RRH) must receive prioritized referrals from CE with local Coordinated Entry Providers adhering to Housing First best practices for prioritized applicant referrals without consideration of (1) income, (2) history of victimization, (3) history of substance use/abuse, or (4) criminal record - except restrictions imposed by federal, state, or local law or ordinance (lifetime sex offender registry, etc.). CE monitors referrals that are turned back by housing projects to ensure people are not being screened out due to housing barriers.

3. As the CoC Recipient of VT BoS Coordinated Entry-CE projects, the VT Agency of Human Services/Office of Economic Opportunity (also the ESG Recipient) monitors and evaluates all Coordinated Entry Providers within the VT-500 BoS CoC to ensure, among other compliance concerns, that housing providers are using a Housing First approach. As part of the Coordinated Entry system there is monitoring of the number of referrals that are returned or refused by a project. The CE committee and lead monitor returned referrals to ensure it is not due to screening out for perceived barriers to success so that project remain low barrier. Returns to homelessness is also reviewed and if a person who was in a PSH or RRH project staff will review with them why they left as part of housing barriers assessment. If during this assessment a participant reported they were terminated for a reason that is in conflict with housing first principles CoC staff would be alerted to provide assistance to prevent further occurrences.

1D-3.	Street Outreach—Scope.	
	NOFO Section VII.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)

1) VT-500 BoS CoC uses multiple street outreach methods to locate persons experiencing unsheltered homelessness. Supportive Services for Veteran Families conducts street outreach in all 251 Vermont towns to identify homeless veterans with referrals to Coordinated Entry & housing (veterans & mainstream). Five PATH providers & Pathways VT (Housing First Program) conduct street outreach to persons experiencing chronic homelessness. The annual PIT Count includes localized street outreach in all 11 Local Housing Coalition regions with innovative methods: shelter guests help, churches, food shelves, community meals, and partnerships with mental health providers and plain-clothed police officers for outreach at encampments and other unsheltered areas.

2) 100% of VT BoS geographic area is covered by street outreach, apart from remote areas inaccessible due to geographical barriers (deep wilderness, swamps, etc.).

3) VT BoS conducts street outreach on an ongoing basis, with each method carried out by different providers & regions of the CoCs. Point in Time (PIT) Count street outreach occurs annually in January

4) Street outreach is tailored to the following subpopulations least likely to request assistance: veterans, people experiencing chronic homelessness and/or severe mental illness. A by-name list of homeless veterans allows providers to conduct street outreach in a repeated, systematic manner to increase service engagement. For those experiencing chronic homelessness, mental health professionals conduct street outreach to ensure services are trauma-informed, client centered and appropriate. Mental health providers partner with plain-clothed police officers for street outreach to encampments, with service engagement as the explicit purpose, to increase positive outcomes for persons experiencing homelessness. Access to services is ensured through available language interpretation services (statewide) and the VT Center for Independent Living conducts trainings/monitoring of TTY devices to assist persons with hearing/speech impairments.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section VII.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:

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

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

		2021	2022
	Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of "Current."	793	738

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section VII.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:

	Resource	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	TANF–Temporary Assistance for Needy Families	Yes
4.	Substance Abuse Programs	No
5.	Employment Assistance Programs	Yes
6.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section VII.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, 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. VT-500 BoS CoC (VT BoS) Board and membership meets monthly. Recent meetings included presentation of the SOAR program by Policy Research Associates; review of a report by the Corporation for Supportive Housing that addresses improving the delivery of housing services in Vermont for people experiencing homelessness; and discussion and training on the successes and challenges in providing access to health services for those who are unsheltered, in emergency shelter, in temporary housing, or are in hotels. These meetings are supplemented by routine distribution through our listserv of information from SAMHSA and the National Alliance to End Homelessness on best practices to create access to mainstream resources. The CoC's website includes a training module on connecting clients with benefits.

2. In December 2021, the Vermont Department of Health (VDH) announced the availability of funding in Health Equity funding from the CDC to enable nonprofit housing and service providers to collaborate with public health and health care agencies in addressing COVID-19 and related health needs. This funding opportunity was deployed with the collaboration of the VT BoS CoC through its local members and \$723,214 was awarded to ten regional organizations. The purpose of this funding is to expressly promote and enhance collaborations with healthcare organizations, including substance abuse treatment and mental health treatment, to assist those who are experiencing homelessness to receive healthcare services. In addition to this initiative the CoC shares information about treatment options through partners and makes local connections between provider agencies as need arises.

3. The SOAR effort in Vermont is an initiative designed to increase access to SSI/SSDI for eligible adults who are experiencing or at risk of homelessness and have a mental illness, medical impairment, and/or a co-occurring substance use disorder. It is coordinated by the VT Dept. of Mental Health (CoC Board member), and there are SOAR trained staff at many service provider organizations. These Caseworkers participate in refresher courses and quality review of applications.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section VII.B.1.n.	

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

(limit 2,500 characters)

People living unsheltered were brought inside beginning March 2020 through a significant increase in the availability of non-congregate shelter in hotels and motels across the state and outreach workers helped to access and remove barriers to entry. Prior restriction on eligibility for housing in a motel were relaxed, allowing for more Vermonters to qualify for motel stays. Additional waivers and rule variances were implemented to reduce barriers to entering motels. The expansion of what had been Vermont’s General Assistance program was made possible through additional State appropriations and federal resources through FEMA and ARPA. In July 2022, the State of Vermont launched a Transitional Housing Program to help the hundreds of households in hotels and motels due to the pandemic to have more stability while continue to work on permanent housing options.

Pre-Covid and currently, Vermont also a General Assistance Emergency Housing Program which provides a motel voucher to eligible homeless Vermonters when an appropriate shelter space is not available. The two programs continue to house more than 1,700 Vermonters experiencing homelessness compared to approximately 500 households in publicly supported emergency shelters. In addition, Vermont’s emergency shelters have continued to expand non-congregate options and create less-congregate space to be able to prevent infectious disease and protect medically vulnerable guests. In some cases, this has been through new and/or expanded facilities.

Vermont’s “emergency shelter” system is more than 90% non-congregate. Further, as a rural state and a best practice, Vermont has only expanded emergency shelter capacity for families with children using “emergency apartments” which provide for short-term, emergency stays with one household per unit. This supports a more trauma-informed and normalizing experience for children and has proven to be a strong model in smaller, rural communities.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section VII.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)

1. The onset of the Covid pandemic resulted in heightened collaboration between the CoC, shelter and service providers, and the Vermont Department of Health (VDH). This began in March 2020 with daily statewide virtual meetings to share information on Covid health and safety protocols; strategies for getting unsheltered and emergency sheltered people into non-congregate housing; getting access to PPP and training staff; understanding the symptoms and transmission of the disease. This statewide intervention resulted in the development of (1) meaningful partnerships – and new personal relationships -- with state and regional public health agencies, and (2) CoC-wide policies and procedures regarding our response to an infectious disease outbreak as it impacts those who are experiencing homelessness. These policies and procedures are codified by VDH and will be used in the event of a new infectious disease outbreak.

2. Housing instability, frequent mobility, and congregate living situations increase the risk of exposure to infectious disease. Many people who experience homelessness are older adults or have underlying medical conditions, so are at increased risk for severe illness. Limited access to health care services, particularly in Vermont’s rural communities, compounds this risk. Issues of shame and trauma may prevent unhoused people from seeking medical care. To address these risks and prevent the spread of an infectious disease we can deploy (1) the policies, procedures, and collaboration with VDH developed as a response to the Covid pandemic, and (2) the statewide capacity built with VDH Health Equity funding, the purpose of this funding is to expressly promote and enhance collaborations with healthcare organizations, including substance abuse and mental health treatment, to assist those who are experiencing homelessness to receive services. All projects were trained and provided information on universal precautions for cleaning and sharing space and receive updates on any potential outbreak warnings so they can be proactive in alerting VDH and others to reduce outbreaks. VDH has local epidemiologists in place that work with any shelter who reports a staff or guest COVID infection. The epidemiologists help shelters determine if they should cease new intakes and help them set up testing. In these situations, OEO offers financial support to use motel rooms for isolation/quarantine, if needed.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section VII.B.1.o.	
	Describe in the field below how your CoC effectively equipped providers to prevent or limit infectious disease outbreaks among program participants by:	
1.	sharing information related to public health measures and homelessness, and	
2.	facilitating 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 onset of Covid resulted in significant efforts to share information regarding the appropriate response to the growing pandemic. Sources of information included the Vermont Department of Health and their network of local health offices and the US Center for Disease Control & Prevention. Top priorities included determining the appropriate Personal Protective Equipment for staff, shelter guests, and for people who were unhoused – and how to obtain and use the PPE; protocols for social distancing and the need for non-congregate housing options; and determining protocols for transporting and housing homeless individuals who tested positive for Covid. (There were many other complex public health measures to be considered.) The Vermont Energy Investment Corporation provided free consulting services for shelters on the equipment needed to improve ventilation and other Covid-safe building improvements.

2. The information regarding the Covid response was disseminated primarily through the Vermont Department of Health using (1) daily, then weekly, then monthly (and now on an as-needed basis) virtual meetings to convey information and respond to questions and concerns; and (2) the CoC listserv with approximately 500 recipients. The recipients for this information included emergency shelter staff, outreach workers, public employees supporting moving people from shelters and the outdoors and into hotels; and staff who provide support and housing navigation services for the homeless.

1D-9.	Centralized or Coordinated Entry System–Assessment Process. NOFO Section VII.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. VT-500 BoS Coordinated Entry (CE) covers 100% of the CoC geographic area through 11 Local Housing Coalitions, which include CE lead agencies and assessment/referral partners (access points). CE written partnership agreements and policies specify roles and responsibilities, including intake/assessment, uniform referrals for connecting those experiencing homelessness to services and housing, and participant information privacy protocols.

2. VT BoS CE assessment and prioritization is a standardized process which assigns each household a needs score to guide case conferencing and identify priority populations based on CoC CE written standards. Each local CE partnership maintains a standardized household-level master list which has basic information, length of time homeless, and assessment score to expedite referrals for households with higher scores. The CE referral process is standardized to ensure priority populations with high complex needs score, people experiencing chronic homelessness, and those with long lengths of time homeless get rapid referrals to available resources.

3. The VT BoS has an active CE committee that meets monthly and includes representatives from the CE lead agencies, assessment partners, and BoS CoC staff. The committee is chaired by staff at the VT Agency of Human Services which manages the BoS CE funding from HUD and is a party to the HUD-funded HMIS contract. The CE committee promotes problem solving and sharing best practices. It oversees ongoing updating of the CE Assessment tool, Partnership Agreement between lead agencies and assessment partners, Release of Information form, and CE Policies and Procedures. The CE Committee also manages the annual evaluation of CE which involves surveying consumers, community partners, and staff from the lead agency. Last year, approximately 110 surveys were submitted in the BoS and the results were used to identify training and technical assistance needs, with special attend to roadblocks, bottlenecks, and challenges within the system, and inform the CE Committee's yearly workplan. In addition, feedback from consumers was analyzed by Local Housing Coalitions who were asked to report to the CE Committee on action steps related to the analysis. This information was used to determine that 1) a standardized consumer feedback survey is needed and 2) sample advertisement materials should be evaluated and updated. These items have been incorporated into the Committee's yearly workplan.

	1D-9a. Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section VII.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)

1. Outreach is designed to reach subpopulations least likely to request assistance: veterans, people experiencing chronic homelessness (CH) and/or severe mental illness. A by-name list of homeless veterans allows providers to conduct outreach in a repeated, systematic manner to increase service engagement. For those experiencing CH, mental health professionals conduct outreach to ensure services are trauma-informed, client centered & appropriate. Mental health providers partner with plain-clothed police officers for outreach to encampments, with purpose of service engagement. Language services and TTY devices to assist persons with hearing/speech impairments is offered as needed for access.

2. VT BoS CE assessment and prioritization process assigns each household a complex needs score to guide case conferencing & identify priority populations based on CoC CE written standards. Each local CE partnership maintains a household-level master list which has basic information, length of time homeless, and assessment score to expedite referrals for households with higher scores who are prioritized for housing resources.

3. VT BoS CE referral process is designed to ensure priority populations with high complex needs score, people experiencing chronic homelessness, and those with long lengths of time homeless get quick referrals to available resources. CE partners schedule assessments within 3 days of referral receipt, to provide an opportunity to do a housing assessment within one week of CE referral. Standardized assessment includes client preferences and CE policies require that household who turn down a referral to a housing opening do not lose their place on the master list if they elect not to take it.

4. VT BoS CoC, through its CE committee, has a continuous improvement commitment including reducing the burdens on people accessing CE. We evaluate and remove structural barriers such as to provide access at many locations to assessment partners, provide convenient office hours, and to create a positive environment for client meetings. Training on creating trauma-informed spaces and experiences is provided to all staff conducting assessments. CoC approved a CoC-wide HMIS data sharing agreement to reduce the number of times a household is required to share their story/update their data. We seek ensure adequate funding for staffing and training, and work towards statewide access to resources such as substance use disorder treatment

1D-10.	Promoting Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section VII.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.	10/04/2021

1D-10a.	Process for Analyzing Racial Disparities—Identifying Racial Disparities in Provision or Outcomes of Homeless Assistance. NOFO Section VII.B.1.q.	
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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)

1. The VT BoS uses the (1) CoC Racial Equity Analysis Tool and (2) HMIS reports to identify racial and ethnic disparities in how people experience of homelessness. The VT BoS CoC’s HMIS data manager is the Institute for Community Alliances (ICA). ICA provides technical assistance, reporting, case studies, and data analysis to support programming and efforts to positively affect homelessness in Vermont – a centerpiece of their work is to assist in identifying and understanding racial disparities of homelessness. ICA’s data is then used by the BoS Coordinated Entry Committee to develop a response to the data, which is then considered by to the BoS Board of Directors.

2. VT-500 BoS data: Black, Native American, and Other/Mixed Race Vermonters experience homelessness disproportionately to white Vermonters. (Whites are 96% of the total population and 91% of homeless are white. Blacks are 1% of the total population and 4% of homeless are Black. Other/Mixed Race are 2% of the total population and 3% of homeless are Other/Mixed Race. Native Americans are 0% of the total population and 1% of the homeless are Native Americans.) This disproportionate impact is nearly identical in (1) percent of successful exits from street outreach to permanent housing, and (2) percent of successful exits from ES/SH/TH/RH-RRH to permanent housing.

1D-10b.	Strategies to Address Racial Disparities. NOFO Section VII.B.1.q.	
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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.	No
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.	No
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.	No
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.	No
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.	No
	Other:(limit 500 characters)	
12.		

1D-10c.	Actions Taken to Address Known Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the steps your CoC and homeless providers have taken to address disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The VT BoS and homeless providers took the following steps to improve racial equity in the provision and outcomes of assistance: identified need for strategic approach and inclusive committee structure to help CoC move forward; hosted an open meeting to review data reports to increase understanding of current landscape so information gaps and disparities can be identified in the future; hosted trainings on racial justice to build understanding of diversity, equity and inclusion, history of race and racism and frameworks to guide future actions. The VT-500 BoS CoC has reviewed system-wide data to identify and plan to address racial equity issues in access to resources and attaining positive outcomes. The CoC has added four questions to the renewal and new project scoring process to assess for representation of under-represented population in agency and Board members and commitment to reviewing project level data if funded.

The VT BoS has prioritized projects which identify specific partnerships with BIPOC organizations in order to reach these populations and improve service delivery. Project applicants are asked to commit to reviewing project data disaggregated by race, ethnicity, gender identify and/or age, and projects are prioritized if their Board of Directors includes BIPOC members. The VT BoS CoC is committed to deepening our understanding of the data, both upstream from homelessness (discrimination in the rental housing market and eviction proceedings) and in homelessness shelter/housing/service networks – and continuing to developing effective responses to the data.

1D-10d.	Tracking Progress on Preventing or Eliminating Disparities.	
	NOFO Section VII.B.1.q.	

Describe in the field below the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The VT BoS is committed to offering equitable housing interventions to address needs. The annual Coordinated Entry Evaluation looks at data by region and statewide which considers the number and percentage of households on the master (i.e., by-name) list and the number and percentage on the list longer than 3 months who are chronically homeless. The annual evaluation also reviews the average time a household is on the regional master list both for “leavers” and “stayers” by subpopulation – including race and ethnicity.

Coordinated entry data is the most comprehensive and uniform data regularly available on homelessness in Vermont. The addition of regional analysis is critical in a rural CoC which encompasses a broad geographic area, with distinct partners and service systems in each area; however, review of the data at the regional level can also complicate meaningful analysis and obscure equity review when the total population is relatively small. PIT data, which represents only one night, is particularly vulnerable to misrepresenting the experience of homelessness amongst different populations. For this reason, the Coordinated Entry Committee has set a goal to expand both regional and statewide data reporting and analysis – particularly with regards to additional equity metrics. The VT BoS has reviewed the Corporation for Supportive Housing’s Racial Equity Metrics for VT that identified negative disparity indexes for those experience homelessness and experiencing institutionalization and agrees that more work must be done to identify specific partnerships and strategies to address existing disparities.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts. NOFO Section VII.B.1.r.	
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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 VT BoS seeks elevate the voices of people with lived experience of homelessness so that they have a meaningful role in homelessness program planning and evaluation as well as communications and messaging regarding homelessness. The BoS conducts outreach to persons with lived experience of homelessness primarily through direct outreach built on relationships by BoS staff and CoC current and former board members who work with people who are unhoused, are in shelter, or have recently moved into temporary or permanent housing. We also recruit participation through the VT Youth Homelessness Demonstration Program and their subrecipients and through the CoC listserv with routine messaging seeking broad and diverse participation in board and committee meetings. The VT BoS has board has 29 members. Two seats are currently filled by people with lived experience and other members have experienced housing insecurity. Many VT BoS board members who work with organizations that provide services and shelter also have board seats at the organizational level which are designated for people with lived experience. We recently formed a Board committee to enhance the voices of lived experience. This is a new committee with six members with lived experience. People with lived experience are compensated for their time preparing for, and participating in, BoS meetings and events. Projects applying for HUD CoC funding are incentivized if more than one board member of project applicants are intentionally people with lived experience as well as projects which hire people with lived experience.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section VII.B.1.r.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five 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 and provide input that is incorporated in the local planning process.	4	1
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	4	1
3.	Participate on CoC committees, subcommittees, or workgroups.	4	1
4.	Included in the decisionmaking processes related to addressing homelessness.	2	0
5.	Included in the development or revision of your CoC's local competition rating factors.	4	1

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

VT BoS board members with lived experience have participated in training and policy conferences sponsored by the National Coalition for the Homelessness, HUD, and the National Low Income Housing Coalition (most recently, a webinar on Housing First). Training opportunities will also be extended to members of our newly formed committee for voices of those with lived experience. VT BoS has an on-line training platform with on-demand trainings to help any person working within housing and service provider agencies, including those with lived experience to gain skills/knowledge in best practices such as housing first, trauma informed and culturally appropriate services, housing problem solving and other topics.

BoS members include emergency shelter and service providers (who typically have a street outreach program), community action agencies, youth services providers – organizations that provide direct service for those experiencing homelessness. Most, if not all, of these organizations make an affirmative effort to hire and retain staff with lived experience. CoC funded projects are incentivized to include at least two persons with lived experience on their Board which provides professional development opportunities. One DV partner agency, NewStory Center, has a project “Turning the Page,” that is an economic empowerment program that connects survivors with career opportunities through education and apprenticeships at local businesses. Local Coalition housing and service providers connect people who are looking to increase their income through employment to VT Dept. of Labor resources through Career Resource Centers (Job Centers), that have in-person and virtual appointment options, to provide resources remove barriers to employment.

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

(limit 2,500 characters)

1. The VT BoS CE Committee manages the annual evaluation of CE which involves surveying people experiencing homelessness as well as community partners, and staff from the lead agency. Feedback from consumers was analyzed by Local Housing Coalitions who were asked to report to the CE Committee on action steps related to the analysis. The VT BoS Coordinated Entry committee meets monthly and includes representatives from the CE lead agencies, assessment partners, and BoS CoC staff and it promotes problem solving and sharing best practices. The VT BoS Youth Action Board provides input on CoC Programming as part of their formal committee role within the CoC. They meet with the agency leading implementation of Youth Demonstration Program projects to provide input and suggestions.

2. The information from the annual CE survey was used to determine that 1) a standardized consumer feedback survey is needed and 2) sample advertisement materials should be evaluated and updated. These items have been incorporated into the Committee's yearly workplan. The Youth Action Board and participants of the CoC's Youth Demonstration Projects (YHDP) provided feedback to staff about the negative impact on their ability to achieve housing stability and maintain choices for services because of some of the restrictive CoC Program requirements mandated for YHDP projects. This feedback resulted in the YHDP agency applying to HUD for waivers to restrictive rules to put into place allowable special activities that give youth serving projects more flexibility in providing housing and services. Using feedback from the newly formed committee for voices for those with lived experience, we have improved how meetings are conducted and we will seek to improve the experience of virtual meetings.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section VII.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months that 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)

1. For the current fiscal year, BoS members supported legislation to address exclusionary zoning that creates barriers to the development of affordable housing including emergency shelters. Members communicated their support to lawmakers through email, phone calls, and/or social media. The proposed legislation was drafted to identify a method to determine if rules or municipal bylaws have an exclusionary effect on affordable, mixed-income, transitional and emergency, and middle-income housing consistent with the state’s smart growth principles, and to promote socio-economically diverse and integrated neighborhoods and communities throughout the State of Vermont. Unfortunately, this legislative effort was not successful, but remains a priority for some members for the upcoming legislative session.

2. For the current fiscal year, Vermont lawmakers approved first time funding for Bylaw Modernization Grants, and CoC members supported this appropriation with their lawmakers. Members communicated their support to lawmakers through email, phone calls, and/or social media. The funding to the VT Department of Housing and Community Development has up to \$650,000 to grant to Vermont municipalities to update their zoning to reduce regulatory barriers to housing. The program includes funding for accommodations and incentives for survey, focus group, survey, or event participation by under-represented and lower-resourced people who want to participate in increasing housing choices in their community. The program seeks to reduce barriers such as requirements for parking, density, and housing types such single-family zoning.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.B.2.a. and 2.g. You must upload the Local Competition Deadline attachment to the 4B. Attachments Screen.	
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	Enter the date your CoC published the deadline for project applicants to submit their applications to your CoC's local competition.	08/17/2022
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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 VII.B.2.a., 2.b., 2.c., and 2.d. 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:	
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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

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 VII.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)?	100
2.	How many renewal projects did your CoC submit?	7
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 VII.B.2.d.	

- Describe in the field below:
- | | |
|----|---|
| 1. | how your CoC collected and 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. VT-500 BoS CoC collects and analyses data for each project housing participants through HMIS data, data submitted as part of local project applications, and CoC administrative records. HMIS data reports are generated and used to review renewal project performance for the previous calendar year for utilization rate and performance on key system performance measures. Project applicants submit information on their project structure, and administrative functions (drawdowns, recaptured funds, and Board staff composition).

2. The CoC analyzed HMIS APR data for length of time to help people obtain permanent housing by reviewing the average # of days from project entry to residential move-in date. PSH and RRH projects had different targets for max points due to the population differences due to coordinated entry prioritization factors and project design. PSH average days for max points was increased due to additional housing market challenges during pandemic which lead to additional hurdles to secure units for people being assisted by PSH projects.

3. When reviewing and ranking projects, the VT-500 BoS CoC considers the following severity of needs & vulnerabilities: serving those experiencing chronic homelessness, commitment to housing first principles including low barrier admissions to ensure access to those with low/no income, criminal histories, histories of abuse, domestic violence or sexual assault, current or past substance abuse, and serving people who have disability(ies). Projects must agree to lenient policies so persons are not terminated for failure to: engage in services, make income gains, meet service plan goals, or held to higher housing standards than other typical households renting in Vermont.

4. The VT-500 BoS CoC has Housing First Principles as a threshold criterion so people are prioritized and not screened out. Projects serving the hardest-to-house populations (those with severe needs or vulnerability) received pts to help increase their overall project score and offset pts that may be lost in performance measures (e.g. employment income). Renewal projects admitting people with zero income and disabilities are awarded points. Projects dedicated to serving survivors of DV have lower targets for exits to permanent housing & rapid exit because of additional challenges faced by this population. All projects receive Coordinated Entry referrals where policies/needs assessment prioritize serving households with the most severe needs f

1E-3.	Promoting Racial Equity in the Local Competition Review and Ranking Process.	
	NOFO Section VII.B.2.e.	
	Describe in the field below:	
1.	how your CoC obtained input and included persons of different races, particularly those over-represented in the local homelessness population;	
2.	how the input from persons of different races, particularly those over-represented in the local homelessness population, affected how your CoC determined the rating factors used to review project applications;	
3.	how your CoC included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; and	
4.	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)

1. Each year the rate and rank policies and forms are posted and reviewed to identify improvements to the process. This process occurs through distribution of materials through the CoC’s listserv, posting on website and discussing at open CoC Board and membership meetings. Draft tools with revisions are publicly posted prior to CoC Board vote so input can be given.
2. Any input received is reviewed and rating factors adjustments are made to incorporate feedback about of race or project outcomes or design. The CoC continues to work on diversifying membership to increase input.
3. The Project Ranking committee is comprised of members who do not have conflict of interest for the projects being considered for annual CoC Program funding. An open invitation is made requesting volunteers. The CoC did not identify a person of an over-represented race for the FY22 review team. As part of larger efforts to identify and address racial disparities, committee membership and recruitment will continue to be reviewed.
4. The VT-500 BoS CoC has reviewed system-wide data to identify and start planning to address racial equity issues in access to resources and attaining positive outcomes. This project scoring process to assess for representation of under-represented population in agency and Board members and commitment to reviewing project level data if funded. The Coordinated Entry (CE) process controls referrals for project openings and they complete an annual evaluation of flow and outcomes that is reviewed by CoC to CE committee identify actions needed.

1E-4.	Reallocation–Reviewing Performance of Existing Projects.	
	NOFO Section VII.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 projects through this process during your 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)

1. VT-500 BoS CoC (VT BoS) projects are reviewed for performance, current best practices, and utilization of beds/funding to determine if future funding levels are maintained, reduced or fully reallocated. Performance data is reviewed by Project Ranking Committee which review CoC priorities, best practices, selection criteria and reallocation opportunities. Projects are offered the opportunity to voluntarily reallocate some or all of their funds, and voluntary reallocation is first offered to that recipient to design another project to meet local goals if all existing renewals have enough funding. If a project is chronically underperforming the Board may vote to reallocate part or all of their funding. Involuntarily reallocated funding is included in the public competition & announced through the CoC listserv & website. Since FY16 all reallocation have been voluntary.

2. Yes, the VT BoS identified one projects through it performance review process that was underutilized based on review of performance outcomes and utilization rates, as well as talking with local CoCs about current housing type needs.

3. Yes, the VT BoS and recipient voluntarily reallocated partial funds from one projects that was underspending due to lack of housing units and supportive services in project’s geographic area.

4. Not applicable. An underutilized less needed project was partially reallocated in FY22 competition to address unspent funds and changing housing market and services available in different counties across Vermont.

1E-4a.	Reallocation Between FY 2017 and FY 2022.	
	NOFO Section VII.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2017 and FY 2022?	Yes
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	Did your CoC inform applicants why their projects were rejected or reduced?	Yes
3.	If you selected Yes for element 1 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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/13/2022

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	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 06/26/2022, 06/27/2022, and 06/28/2022, then you must enter 06/28/2022.	09/13/2022
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1E-5b.	Local Competition Selection Results–Scores for All Projects.	
	NOFO Section VII.B.2.g.	
	You must upload the Final Project Scores for All Projects attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Applicant Names; 2. Project Names; 3. Project Scores; 4. Project Rank–if accepted; 5. Award amounts; and 6. Projects accepted or rejected status.	Yes
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1E-5c.	1E-5c. Web Posting of CoC-Approved Consolidated Application.	
	NOFO Section VII.B.2.g.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website–which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/28/2022
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section VII.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application has been posted on the CoC’s website or partner’s website.	09/28/2022
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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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 Clarity
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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.	Statewide
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section VII.B.3.a.	

	Enter the date your CoC submitted its 2022 HIC data into HDX.	04/14/2022
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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 VII.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 databases that meet HUD’s comparable database requirements; and	
2.	state whether your CoC is compliant with the 2022 HMIS Data Standards.	

(limit 2,500 characters)

In its role as the state/federal ESG Recipient, the Vermont Agency of Human Services-Office of Economic Opportunity funds and oversees the comparable database (Osnum Software), via individual Victim Service Providers, within the VT-500 BoS to ensure that DV housing and service providers in our CoC have a comparable database that collects the same data elements required in the HUD-published 2022 HMIS Data Standards. In addition, the VT-500 BoS CoC HMIS Lead (Institute for Community Alliances-ICA) maintains a contract with the VT Network Against Domestic & Sexual Violence (State DV Coalition) to analyze the comparable database. HMIS Lead (ICA) ensures DV housing and service providers in our CoC submit de-identified aggregated system performance measures data for each project in the comparable database to our CoC and HMIS lead.

2. Yes, we are compliant with the 2022 HMIS Data Standards

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

Enter 2022 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2022 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	524	108	365	87.74%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	190	52	105	76.09%
4. Rapid Re-Housing (RRH) beds	738	0	624	84.55%
5. Permanent Supportive Housing	352	0	173	49.15%
6. Other Permanent Housing (OPH)	111	87	24	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 VII.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)

1. The VT-500 BoS CoC will take the following steps over the next 12 months to increase the bed coverage rate to at least 85% for TRANSITIONAL HOUSING & RAPID REHOUSING - CoC Board (VT Coalition to End Homelessness): HMIS Lead (Institute for Community Alliances) and the Collaborative Applicant will continue to work with the VT Agency of Human Services (Office of Economic Opportunity) to identify & remove barriers for HMIS data entry of state-funded RRH (“VT Rental Subsidy” and state-funded Transitional Housing projects)

PERMANENT SUPPORTIVE HOUSING - CoC Board (VT Coalition to End Homelessness), HMIS Lead (Institute for Community Alliances), Collaborative Applicant and the Vermont Veterans Committee will continue to meet with Vermont State Housing Authority and Vermont Veterans Committee to further develop the plan for the VASH Voucher project data entry in to HMIS and provide training, as required.

2. The VT-500 BoS CoC HMIS Lead (ICA) will offer all non-participating TH, RRH, and PSH projects technical support & training to ease the burden and improve accuracy of HMIS data entry. The CoC will set aside time in HMIS subcommittee meetings to identify barriers and solutions to participation and then report out to full CoC board by January 2023 on project participation needed to achieve 85% or better participation and options to offer. In early 2023, CoC will work with TH and RRH non-participating agencies to address barriers and implement solutions. The CoC Executive Committee, Collaborative Applicant, and HMIS lead will continue to meet with Vermont State Housing Authority and Vermont Veterans Committee to further develop the plan for the VASH Voucher project data entry in to HMIS and provide training, as required. The recent change of HMIS software vendor could provide the option to increase PSH participation rates.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by February 15, 2022, 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC conducted its 2022 PIT count.	01/26/2022
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section VII.B.4.b	

	Enter the date your CoC submitted its 2022 PIT count data in HDX.	04/14/2022
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2B-3.	PIT Count–Effectively Counting Youth.	
	NOFO Section VII.B.4.b.	

Describe in the field below how during the planning process for the 2022 PIT count your CoC:

1.	engaged stakeholders that serve homeless youth;
2.	involved homeless youth in the actual count; and
3.	worked with stakeholders to select locations where homeless youth are most likely to be identified.

(limit 2,500 characters)

1. The VT BoS annually forms a PIT committee to review and approve outreach strategies and counting methodology. The Youth Homelessness Demonstration Project Coordinator with a regional youth service organization, the Northeast Kingdom Youth Services, serves on the CoC board and also the PIT committee. Other committee members have direct associations with youth programming including shelters and transitional housing, family centers, and crisis centers. Social media was used to solicit input on the PIT planning.
2. The BoS Board of Directors has a seat for the Vermont Coalition of Runaway & Homeless Youth Programs. VCRHP is guided, in part, by a Youth Action Board with a membership of youth with lived experience of homelessness
3. Regional shelter and service providers for youth -- including McKinney-Vento Liaisons -- provided information to PIT coordinators on youth who were unhoused or in transition to or from motels. Many homeless people, including youth and families with children, were brought inside beginning March 2020 to non-congregate shelter in hotels and motels across the state. This arrangement allowed the State of Vermont, HMIS Lead Agencies, advocates, and service and shelter providers to organize a coordinated and thorough PIT.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section VII.B.5.a and VII.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 2021 and 2022, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022, 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 2022.

(limit 2,500 characters)

1. The VT CoC PIT Committee recommended that we not make any changes our sheltered PIT count implementation, including methodology or data quality changes between 2021 and 2022.
2. Due to the pandemic, the VT CoC did not conduct an unsheltered PIT count in 2021, but an unsheltered count was conducted in 2022.
3. The VT CoC PIT Committee recommended that we not make any changes to methodology or data quality methods between 2021 and 2022, so there was no impact.
4. 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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.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)

1) VT-500 BoS CoC continues to identify risk factors through the review of interview data conducted with participants by CoC providers, income at entry from coordinated entry forms, and housing needs assessments (includes disabling conditions, fleeing DV, etc.). ESG Recipient (Agency of Human Services) reviews data reports for statewide prevention/diversion programs. CoC members work with local agencies & peer groups to identify risk factors within subpopulations through partnerships & data analysis (i.e., General Assistance Motel Voucher Program, Mental Health bed stays, LGBTQ+ youth factors with Foster Care Program, VT Governor’s Opioid Coordination Council, Peer Organizations, and Early Childhood Council with pediatricians who screen for housing instability).

2) VT BoS best practices & strategies to address families at risk of homelessness includes connections to financial resources support and voluntary case management services. RESOURCES - VT ESG. PREVENTION – CARES Act/American Rescue Act funds for VT Rental Housing Stabilization Program & VT Emergency Rental Assistance Program (back rent, security deposits, short-term rent & utility assistance), childcare referrals; and resources to help stretch limited household income like food shelves & transportation vouchers. INCOME/EMPLOYMENT – CoC providers connect at-risk persons with VT Dept. of Labor (Career Resource Centers/state Workforce Innovation plan to remove barriers to employment), VT Dept. of Disabilities, Aging, and Independent Living; VT SOAR trained staff for successful SSI/SSDI applications; financial coaching with Family Self-Sufficiency Program/VT TANF. SERVICES – care coordination; benefits/housing counseling; tenant-landlord mediation; substance disorder/mental health; VA Medical Center (CoC Board member) coordinates statewide strategies to assist Veterans remain stably housed with prevention services.

3) The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies to reduce first time homelessness.

2C-2.	Length of Time Homeless—CoC’s Strategy to Reduce.	
	NOFO Section VII.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)

1) VT-500 BoS CoC strategy to reduce Length of Time homeless included increasing housing stock (\$53.8m CARES acts funds for 389 rehabilitated/new units, many with homeless set-asides and referred from CoC Coordinated Entry with highest needs/longest time homeless) due to ongoing housing crisis (<1% unit vacancy) intensified by COVID-19 pandemic. VT BoS worked with VT Agency of Human Services to expand Landlord Liaison Project (ESG-CV) and increase voluntary services/resources (Care Coordination and “Rapid Resolution Housing Initiative”). VT BoS engaged VT State Housing Authority (PHA) to successfully expand “Move-Up” homeless preference to serve up to 500 participants in multiple homeless programs (TH, RRH, PSH serving youth, DV/SV, chronic homelessness, families, veterans, and households impacted by the COVID-19 pandemic). Referrals for specialized care are made to remove housing barriers and help with service connections (Back Rent/Security Deposits, Legal, DV/SV, mental health, substance use, other medical care).

2) VT BoS CoC Coordinated Entry (CE) continues to identify people with the longest Length of Time homeless with HMIS data review and by interviewing people with the housing assessment prioritization tool to gather location and Length of Time homeless. Interviews and record gathering are utilized when homeless episodes for people living in shelters and places not meant for human habitation were not in HMIS. Local coordinated entry teams utilize this data for case conferencing & prioritized referrals based upon complex service needs score & longest Length of Time homeless. Veterans committee meets bi-weekly to review By-Name List and ensure connections with VA and non-VA funded resources. All CoC RRH and PSH receive prioritized CE referrals of persons with longest Length of Time homeless.

3) The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies to reduce the Length of Time people are experiencing homelessness.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC’s Strategy	
	NOFO Section VII.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)

1) VT-500 BoS CoC's strategy to increase exits to permanent housing (PH) for people in shelter (ES), transitional housing (TH), and rapid rehousing (RRH) included increasing subsidized exit options, expanding Landlord Liaison Project to identify units, and using housing first practices in projects. Allocating \$53.8m CARES Act funding for 389 new/rehabilitated homes, with homeless set-asides; ongoing 15% set-aside for people who are homeless in publicly funded housing. Supporting self-sufficiency by increasing income with VT SOAR trained staff, VocRehab, and VT Dept. of Labor.

CoC requested (6/15/21) and received (7/1/2021) expansion of Homeless Admission Preferences at VT State Housing Authority (VSHA) (largest VT PHA) for expanded "Move-Up Strategy" to serve persons residing in RRH projects (state-fund, YHDP funded, SSVF and ESG-CV vouchers), Domestic Violence TH (DOJ and ESG-funded) and Family Unification Program (at-risk and homeless families/youth).

PHA-CoC-VT Network for DV/SV MOU to serve persons fleeing DV/SV (including from ES/TH/RRH/PSH) with new Emergency Housing Vouchers (99). New VSHA PSH projects serving 30 households connected to CoC-funded services and Rutland Housing Authority (10 households) with dedicated project-based vouchers for persons experiencing homelessness. There are no Safe Haven projects in Vermont.

2) VT BoS strategies to increase rate of stayers in permanent supportive housing (PSH) and leavers to a PH destination are: VT BoS Written Standards policy to only terminate as an option of last resort; effective connection to/coordination of supportive services, retention assistance & income supports to maintain their housing; PSH leavers maintain connections to supportive services, linkages to income & prevention resources at exit to ensure maintaining PH; expansion of CoC move-on strategy so PSH/RRH households may transition to Section 8 HCV to ensure PH stability/financial feasibility; and review of housing retention outcomes to ensure people are maintaining or exiting to PH.

3) The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies to exit to or maintain permanent housing placements.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.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)

1. The VT-500 BoS CoC strategy to identify people returning to homelessness includes: a partially open HMIS to identify if previous shelter or housing was provided to allow staff to reconnect households to known resources; reviewing Coordinated Entry (CE) reports to identify trends/reasons for homeless returns by exited participants, and each local CoC reviews common factors of people who return. Tracking returns to homelessness on a CE By-Name List enhances real time understanding of causes for returns to inform prevention programming. We utilize information from a statewide Eviction Prevention Initiative review of over 3,000 units which reviewed reasons for evictions and household demographics (race/gender/age/household size) and, in partnership with VT Legal Aid, identify possible system-level interventions and resources.

2. Current VT BoS strategies to reduce the rate of people returning to homelessness are: training property managers on substance use issues & trauma to decrease evictions & increase referrals to supportive services; educating households & providers on tenant-landlord rights and referrals to VT Tenants Inc.; increasing HMIS project participation to understand homeless recurrence & factors faced by those households; follow-up care/ongoing services after project exits; VT SOAR trained providers increased participant incomes; Housing Resource Orientation and housing retention training for providers to assist those at-risk of returning. The Vermont State Housing Authority provides eviction prevention assistance thru CARES funding to help and now federal ERAP to help maintain housing. Housing Stability Service grants support over 20 agencies to offer assistance and education on eviction prevention and tenant rights.

3. The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies to reduce returns to homelessness.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section VII.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 cash income; and	
	3. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

1. VT-500 BoS CoC strategy to increase employment income: assist with job applications, on-going staff education on vocational programs & mainstream resources, provide job connections/readiness skills & resources to reduce employment barriers. PSH & RRH project service partners provide direct employment services or through partnerships, on the job training, readiness training & self-employment resources. Providers are informed of local/state employment resources through CoC meetings, listserv notices & CE case conferencing.

Gains/deficits in employment linkages are identified by reviewing HMIS data and sharing best practices between local CoCs. Agencies cultivate relationships with employers and staffing agencies and provide job training, trials, and on the job support to help people return to work. Local CoC strategies to increase employment access opportunities are partnerships with VT Dept. of Aging & Independent Living/VocRehab, VT Adult Learning; in-house employment programs; employer outreach; Employment 101 trainings; and participation in a job club organized by local Mental Health Agencies.

2. VT BoS builds relationships with mainstream employment organizations to ensure participant access to job listings, fairs, readiness resources (assistance with resumes/interview skills & attain interview clothing). CoC invites employment organizations to present their programs & receive feedback on participant challenges. Project staff link people to community resources to assist with childcare & transportation to remove barriers to sustaining employment. OUTREACH to strengthen partnerships with/involvement of employment-focused entities like VT Dept. of Labor (Career Resource Centers/state Workforce Innovation plan to remove employment barriers); VT Dept. of Labor/Community Colleges of VT classes; TANF work assistance; J.O.B.S Program for Youth (16-21); Creative Workforce Solutions. Voc Rehab services provided virtual access during pandemic, removed barriers of transportation and travel time, which increased enrollment and access to help for people with a disability. People were connected to free classes/trainings funded by American Rescue Plan from VT State College System & VT Dept of Labor to increase skills to secure employment income.

3. The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies for increasing income from employment strategy.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section VII.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)

1. The VT-500 BoS CoC strategy to increase non-employment cash income includes education, resource connections and follow-up services to ensure linkages of eligible participants to applicable resources. The CoC continues to promote/support additional providers to become SOAR-trained, including a strong relationship with the VT Dept. of Mental Health (CoC Board member) who oversees the statewide VT SOAR program to ensure increased access to SSDI by getting assistance with application and appeal process. Projects are also scored on their success in linking eligible participants to non-employment income sources to incentivize income as an integral part of every project. The CoC offers free on-line training modules to orient new staff to mainstream non-employment cash resource options for people.

2. The VT-500 BoS CoC strategy to increase access to non-employment income includes conversations with State agencies to reduce barriers to the application process and conversations to identify resources to assist eligible participants to receive benefits without multiple appeals. All VT BoS CoC funded projects are supported by VT Agency of Human Services to train providers to assist participants complete VT Consolidated Benefits Application, access other income (SSA/VA/child support), as well as linkages to legal services as needed. Mainstream benefit programs are members of the CoC and are invited to present on benefit availability & eligibility, the application process and any changes that would assist providers in better linking eligible people.

3. The executive director of the Vermont Coalition to End Homelessness is responsible for overseeing strategies to increase non-employment cash income.

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.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?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section VII.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?	Yes
--	--	-----

3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.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
VSHA CoC-PSH (PTH...	PH-PSH	8	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? VSHA CoC-PSH (PTH) FY22 Expansion

2. Enter the Unique Entity Identifier (UEI): YNZLHMRJDB19

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 8

5. Select the type of leverage: Healthcare

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.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
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section VII.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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 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 VII.C.	

	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 VII.C.	

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

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) 2022 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2022 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section II.B.11.e.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2022 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section II.B.11.(e)(1)(c)	

1.	Enter the number of survivors that need housing or services:	1,489
2.	Enter the number of survivors your CoC is currently serving:	848
3.	Unmet Need:	641

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

Describe in the field below:	
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

1. VT-500 BoS CoC calculated the number of DV survivors in need by taking the sum of: VT Dept. of Children & Families/General Assistance (DCF-GA) Emergency Housing point in time count of the total persons fleeing DV/SV; total served by VT Network Against Domestic & Sexual Violence (VNADSV) in motels, DV/SV shelters, and TH in FY21; point in time count of the number of persons listed as survivors of DV/SV on the CoC's HMIS CE master list (does not include persons in comparable databases/other sources); total persons receiving a Housing Choice Voucher with the DV transitional housing preference in FY21; and total survivors receiving an Emergency Housing Voucher. The number currently being served was calculated by taking the sum of those in need and subtracting those persons listed as survivors of DV/SV on the CoC's HMIS Coordinated Entry (CE) master list still waiting for assistance.

2. DCF (GA utilization data), VNADSV (FY21 utilization data for motel placements, shelters and transitional housing), Institute for Community Alliances (HMIS Coordinated Entry data), Vermont State Housing Authority (Housing Choice Voucher data, EHV data).

3. A primary barrier for survivors in moving from literal homelessness into housing is a lack of safe, affordable housing units within the VT BoS geographic area. This barrier can be seen both for survivor households who have income to sustain housing independently as well as households who have been granted housing resources such as EHV's. Low vacancy rates lead to higher rental prices which makes housing unattainable for those in need of Fair Market Rent housing. Additional vouchers are also needed in order to serve those that are currently on our coordinated entry lists waiting for assistance.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

Applicant Name
NewStory Center

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

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2022 Priority Listing:

1.	Applicant Name	NewStory Center
2.	Project Name	NewStory Center
3.	Project Rank on the Priority Listing	9
4.	Unique Entity Identifier (UEI)	ULQVEBM23ML5
5.	Amount Requested	\$140,287
6.	Rate of Housing Placement of DV Survivors–Percentage	31%
7.	Rate of Housing Retention of DV Survivors–Percentage	100%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(c)	

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

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

1. NewStory Center reviewed the FY 22 project data and determined how many people left their emergency shelter for a permanent housing placement and how many, to their knowledge, has not returned to homelessness or a non-PH destinations. They identified the number of people who exited the shelter during the time period and then reviewed the number of people who exited to permanent housing destinations. The number of people who went to PH was divided by the total to calculate the percentage.

For retention, NewStory reviewed project data to see if any person has returned to shelter or reported leaving PH for another non-PH destinations. The number of people who returned to shelter or reported leaving PH for non-PH was divided by the number of people who exited to PH to calculate the percentage.

2. NewStory Center works with all participants to help identify their choice of safe housing destination exits. The people represented in the data provided did exit to safe housing destinations.

3. We used our Osniium (comparable database, other sources) as the data source for these calculations.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,500 characters)

1. We assess current needs at intake, identify steps towards housing and explain the range of services and confidentiality protections. Staff seek out financial resources from local agencies/churches to fund security/utility deposits and assist survivors to complete Section 8 and other housing applications. Local landlords are contacted about potential available units and we keep a list of available units so that survivors can quickly see what is available.
2. We works with coordinated entry(CE) to ensure people fleeing DV have access to resources through local partners collaboration to prioritize households most in need of permanent housing. After assessments people go on the CE list and safety and confidentiality are kept by assigning each household a number. Staff know the VAWA rules and advocate for survivors in need of an emergency transfer and work to find a safe, suitable location.
3. Our services are trauma informed and client centered and are determined based on the individual needs, at intake and on-going during engagement. We work to build trusting relationships, meet them where they are at and listen their identified needs to make service referrals. This is a partnership with the survivor in a support role as they know what they need and our staff help people to connect to available resources and implement their housing plans.
4. Service referrals are made and staff help with follow-up for medical and mental health, substance use disorder, childcare, legal services, and other needed services. People experiencing DV have lost all power and control over their lives and each household is supported to gain some of that power and control back. We provide advocacy and emotional support, including case management, assistance finding permanent housing, safety planning, vocational and employment assistance, assistance with transportation and referrals to community resources and services.
5. We support people by helping understand their financial situation and doing budget plans. Financial counseling (saving strategies, bank accounts, and credit repair), support to develop employment goals and connections to our program for career opportunities thru education and local business apprenticeships are available. Applications for income from mainstream and state programs such as REACHUP, 3Squares are done. Survivors can also always connect with center for follow-up services if housing stability is in jeopardy.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;
2.	making determinations and placements into safe housing;
3.	keeping information and locations confidential;
4.	training staff on safety and confidentially policies and practices; and
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.

(limit 2,500 characters)

1. NewStory Center adheres to a strict confidentiality policy. Just as with all services, intakes and interviews are client led, meaning that survivors are encouraged to share only what they feel comfortable with. This is shared before the intake process begins and survivors are told that they can choose not to answer a question or end the intake at any time, without an impact on services. Survivors who enter the emergency shelter program and/or rapid rehousing must sign a confidentiality agreement in to protect the privacy/confidentiality of the other survivors they come in contact with.

2. Placement for safe housing is determined based on the needs of each individual survivor. If the survivor feels as though a safe location is needed immediately, they will be offered a spot in the emergency shelter program while permanent housing is secured. The residential emergency shelter is in a confidential location.

3. NewStory Center maintains our own intake and service records, using the Osnum database to record information on client demographics and case notes along with keeping confidential paper files in the office. Client information is never shared without explicit permission and a signed release of information from the client. The client may choose to end a release of information at any time. Shelter locations are kept confidential and addresses are not shared with the community.

4. All staff sign confidentiality statements upon joining the organization. Staff regularly receives training on best practices regarding survivor safety and confidentiality. Trainings are led by experts in the field including the Office of Victims of Crime Training and Technical Assistance, the Vermont Center for Crime Victim Services, and the VT Network Against Domestic & Sexual Violence. Direct service staff meets weekly and regularly reviews policies and procedures, which include the safety and confidentiality of the people we serve.

5. In order to help ensure safety, NewStory Center has installed security cameras at each of the buildings the organization owns, including those where housing is available. At each location, doors are locked and visitors may only enter after a security screening. For those residing in scattered site housing, NewStory Center has purchased security cameras for survivors. Each survivor develops a safety plan that takes their specific situation into consideration. Safety plans are reviewed and updated on a regular basis.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	
	Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.	

(limit 2,500 characters)

NewStory Center works directly with survivors to help create safety plans that incorporate their specific needs. They understand they can never ensure the safety of a survivor but work in partnership to identify plans and as an agency we review how our process can be improved and enhanced. Survivors work with an advocate to complete a safety plan that enhances the survivors safety and the safety of their children, as well as strategies for minimizing or escaping dangerous situations. This document is reviewed at each case management meeting and revised as often as the survivor feels is necessary.

Additionally, NewStory Center collects feedback from survivors on the safety planning process via surveys and in person conversation and uses that to improve or enhance the process. The survey asks, “do you know more ways to plan for your safety?” At times, NewStory Center has shifted how we ask questions or changed the language in a question. We’ve also had to adjust safety plans taking into consideration law enforcement response time due to staffing changes at local departments and/or changes at 911 call centers. NewStory Center has planned and formal discussions regularly scheduled during the year to review policies but will also make changes based on situations and informal feedback we receive.

One of the areas identified for improvement is that of landlord education and safety planning. It can be challenging to get a landlord to take survivor/tenant safety seriously and work in a quick and efficient manner. For instance, if a survivor/tenant requests that locks are changed or security cameras installed, landlords can sometimes be reluctant to fulfill the request or unwilling to spend the funds. NewStory Center will try, both via conversation and written materials, to educate landlords on why this is important and how it can have a positive impact on their relationship with the survivor/tenant.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section II.B.11.e.(1)(d)		
Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:		
1.	prioritizing placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;	
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;	
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;	
4.	emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;	
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;	
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and	
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.	

(limit 5,000 characters)

1. NewStory Center uses a trauma informed, client led approach to assist survivors in seeking permanent housing that meets the needs of their households by gaining background information such as household size, income and financial status, credit history, housing history, etc. Much of this information is collected during the housing assessment that is completed with each household. A survivors identified safety needs are also addressed in order to prioritize placement. A survivor is never forced to take a permanent housing unit that does not feel comfortable to them and/or does not fit their needs. Once permanent housing is secured stabilization is the focus and supportive services such as financial education, employment, childcare, etc. are offered to ensure a successful transition to independence. Survivors, as needed, also receive referrals for area resources such as mental health and medical care, substance use disorder services, legal services, etc.
2. NewStory Center is a trauma informed agency and offers a client centered approach to the work. To ensure equality and minimize power differentials, NewStory Center keeps the five tenets of trauma informed work – safety, choice, collaboration, trustworthiness, and empowerment, at the forefront. During the intake process, survivors are invited to share their story, at their own pace, and express their needs. They are provided with a welcome packet that explains services, expectations, and how to express grievances. Survivors are never told what to do, rather they are given options and an opportunity to discuss the consequences of those options. As the work continues and relationships are established survivors are working in a collaborative manner. When issues arise, survivors are given the opportunity to express concerns both with their advocate and the advocate’s supervisor.
3. NewStory Center provides resources (pamphlets, web-based resources, etc.) to survivors on how trauma can impact the mind and body. If a survivor chooses, they can discuss the impact of their trauma during case management. NewStory Center is a trauma informed organization and staff regularly attends trainings and continuing education opportunities.
4. Emphasizing a program participants’ strengths is at the root of what NewStory Center does. Each survivor works with their assigned advocate to develop goals and aspirations that will help them move toward a life of safety. The method used to establish goals varies depending on the survivor. This can include general discussion, assessments, referrals to area resources, etc. Goals can be around permanent housing, gaining employment, establishing childcare, connecting with estranged family/friends, etc.
5. NewStory Center works to create an environment of equity and inclusivity. We welcome all survivors and even underwent an organizational rebranding in 2017 to be more inclusive. Staff works to offer culturally responsive services by being client centered and meeting the client where they are. Staff attend trainings led by Office of Victims of Crime, Vermont Center for Crime Victim Services and the Vermont Network Against Domestic and Sexual Violence, among others. Staff who attend trainings are expected to bring back resources and share their experience at the following staff meeting. All staff also receive regular supervision where the topic of client interaction is regularly addressed. It is standard practice to ask the question, “who holds the privilege in this situation?” and “what can you do to minimize it?” It is not uncommon for NewStory Center staff to access Language Line to support those for whom English is not their first language.

6. NewStory Center offers a weekly DV Survivors Support Group, facilitated by NewStory Center staff. Each support group has specific theme which rotates through physical, emotional, spiritual, and social self-care and offers an activity to help survivors process their trauma as well as connect with others. Previous themes have included stress management, DIY healthy snacks, and affirmations for anxiety. Those residing in the residential shelter are offered a weekly house meeting facilitated by the shelter coordinator.

7. Parenting survivors are able to work with their advocate to navigate the issues they are facing as they work toward a life free of violence. This can include referrals to area parenting resources such as the Rutland County Parent Child Center, support communicating with schools, and helping parents navigate issues with the Dept of Children & Families. It is not uncommon for a NewStory Center advocate to attend a meeting with DCF at the request of the survivor parent. NewStory Center advocates are well versed in the rights and opportunities afforded under the McKinney-Vento Homeless Assistance Act and have supported families with ensuring their rights. Many survivors have accessed the NewStory Center Legal Assistance Project for support with child custody issues.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

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

(limit 5,000 characters)

During funding year 2022, NewStory Center staff provided the following supportive services to domestic violence survivors:

- Legal Advocacy:** In The Legal Coordinator/Systems Advocate provides legal advocacy for survivors who are navigating the civil and/or criminal court system. With the support from a grant from the Vermont Bar Foundation, the Legal Coordinator/Systems Advocate can make referrals for consultation with a local attorney to help with issues such as divorce and child custody. NewStory Center advocates assisted with completing civil legal forms/applications such as relief from abuse orders, stalking orders, etc. Additionally, advocates were available during stalking court hearings and relief from abuse order hearings and other criminal and civil hearings.

- Emergency Shelter:** Survivors were provided with emergency shelter while transitioning from a violent situation into permanent housing. Survivors were receiving case management that included emotional support, financial counseling, housing search and placement, etc. Most residents in shelter also worked with the Homeless Prevention Center, the local housing service provider.

- Crisis Services:** NewStory Center ran the 24/7 crisis line that connected survivors with supportive services including emotional support, emergency housing, safety planning, and assistance with protection orders.

- Housing Services:** NewStory Center staff supported survivors as they sought permanent housing. This included completing housing assessments, application assistance, acting a landlord liaison, and increasing financial resources. Thirty-one households transitioned to permanent housing.

- Employment Training and Support:** Survivors participated “Turning the Page,” an economic empowerment program offered by NewStory Center. “Turning the Page” connects survivors with career opportunities through education and apprenticeships at local businesses. Survivors also received referrals to BROCC Community Action, Vermont Department of Labor, and VocRehab to help them reach their employment goals.

- Support Group:** The Domestic Violence Survivors Support Group, was facilitated by NewStory Center staff. Each support group had a specific theme which rotated through physical, emotional, spiritual, and social self-care and offered an activity to help survivors process their trauma as well as connect with others. Activities included stress management, DIY healthy snacks, and affirmations for anxiety.

- Medical Advocacy:** NewStory Center provided emotional support and advocacy during sexual assault nurse exams as the local emergency department to 12 survivors. Advocates explained the process and possible next steps, as well as their individual rights, and provided emotional support. Advocates also assisted survivors with connecting with primary care physicians and mental health resources.

- Foodbank:** NewStory Center, through a longstanding partnership with the Vermont Foodbank, provided food to households in need. This included canned goods and other shelf stable provisions as well as produce and fresh food from local Vermont farms. NewStory Center also provided the tools necessary to prepare the food including can openers and microwave safe containers for

those residing in motels.

- Referrals to Community Partners: NewStory Center made referrals and to community partners to help meet the needs of survivors. This included health care professionals, mental health clinicians, substance abuse disorder services, homeless service providers, pastoral care, financial assistance, and/or other culturally appropriate services. In many cases, this led to a collaborative effort to support the survivor.

- Supportive Case Management: Advocates provided supportive case management to survivors as they moved toward a life free of violence. This included emotional support, goal setting, financial education, etc.

- Relocation Services: NewStory Center assisted survivors with relocating to safe locations where they had support systems in place. This included purchasing bus and train tickets, motel rooms, gas cards, and replacement identification as well as covering the cost of minor vehicle repairs.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Approaches for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(e)	

Provide examples in the field below of how the new project will:	
1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans works towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. The needs and wishes of the program participant are of utmost importance from the very beginning. The intake process will be client-led and a time for the participant to share what their immediate and short-term concerns are, develop goals, and create next steps for services and support. The Housing Equity Advocate will ask questions about the participant's physical and emotional concerns, safety concerns, any legal issues, and/or any financial concerns. The Housing Equity Advocate will work with the participant to develop a plan in order to alleviate these concerns.

The NSC (NSC) RRH program will be a scattered site model and will benefit survivors that are living in some of the most rural areas of Rutland County. The survivor will work with the Housing Navigator to locate a safe, affordable housing unit. Together they will locate an apartment that accommodates the participants needs - physically, emotionally and financially. The flexibility of the scattered site housing model will afford participants the opportunity to maintain employment, keep their children in the schools of their choice, and remain in the community where they are most comfortable.

2. NSC is always conscious of the power differentials that exist between staff and the people we serve. In order to minimize those issues, NSC will ensure that the expectations and responsibilities of both parties are clear and concise. A Welcome Packet and a Rental Assistance Agreement will be completed to ensure that the participant fully understands their rights and responsibilities, policies and procedures and the grievance process. Participants, as with all survivors we serve, will be encouraged to ask questions and share feedback in an effort to help make the experience a positive one for all involved.

3. NSC follows a trauma-informed, victim centered philosophy. This approach with a domestic violence victim advocacy perspective provides a more integrated framework for working with survivors, including services that are based on respect, dignity, inclusiveness, trustworthiness, , choice, connection, and hope. NSC will offer supportive case management which includes an opportunity for survivors to reflect on and process the trauma they have experienced, share resources, and offer referrals to community partners. Trauma, and its impact on the mind and body, is also a common topic at the weekly DV Survivor Support Group facilitated by NSC staff. Supervision and support for staff to safely reflect on and attend to their own responses and to learn and grow from their experiences is another critical aspect of trauma-informed work that NSC will incorporate

4. The goal of the NSC Rapid Rehousing program will be to work one-on-one with survivors, building on their own strengths and personal goals, to help successfully transition the survivor into permanent, safe, affordable and independent living. The program will operate with the values of social justice, personal dignity, integrity, and competence and focuses on a non-judgmental, culturally responsive, strength-based approach in working with the people we serve. Each participant will be offered supportive case management which includes referrals to other agencies and setting goals surrounding employment, education, and other client identified priorities.

5. NSC staff will work with each survivor to assess their individual needs. If a survivor needs are beyond what NSC can provide, an effort will be made to connect with a community partners, including, but not limited to, Disability Rights VT, Deaf VT Advocacy Services, VT Center for Independent Living,

Language Line, Pride Center of VT, Rutland Mental Health, and the Southwestern VT Council on the Aging. NSC to seek improve cultural responsiveness and inclusivity by participating in trainings that expand the knowledge and experience among the staff.

6. Rapid Rehousing participants will be encouraged to participated in the weekly DV Survivors Support Group, which is facilitated by NSC staff. Each support group has a specific theme which rotates through physical, emotional, spiritual, and social self-care and offers an activity to help survivors process their trauma as well as connect with others. Previous themes have included stress management, DIY healthy snacks, and affirmations for anxiety.

7. NSC will support survivors with parenting based on their individual needs. NSC staff will make referrals to area parenting resources such as the Rutland County Parent Child Center and support parents as they communicate with schools. NSC advocates are well versed in the rights and opportunities afforded under the McKinney-Vento, including the provision which allows children to attend the school of origin and said school district must provide transportation free of charge. Those who are dealing with child custody issues will be able to access the NSC Legal Assistance Project.

4A-3h.	Plan for Involving Survivors in Policy and Program Development of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(f)	

Describe in the field below how the new project(s) will involve survivors with a range of lived expertise in policy and program development throughout the project's operation.

(limit 2,500 characters)

NewStory Center will work from an empowerment model, therefore when changes are necessary, we will ask for input from Rapid Rehousing program participants to ensure that survivors needs are being met and they are comfortable with the environment.

NewStory Center will regularly evaluate our effectiveness in both formal and informal ways. Every client will be given the opportunity to assess the usefulness of our services via an outcome survey which asks the following questions:

- Do you feel you know more about community resources?
- Do you know more ways to plan for your safety?
- Do you know more about your rights and options?

Further input will be gained through one-on-one conversation at case management which will take place, at least, monthly, if not more. In an effort to increase survivor feedback and enhance the RRH project, NewStory Center will introduce focus groups for RRH participants. Focus groups will occur twice yearly and will be facilitated by staff members, with every effort being made to increase equality, minimize power differentials, and ensure confidentiality. Focus groups will begin with warm up activities and then lead to into questions about the project, participants experience, and suggestions for improvement. Staff will gather feedback and will discuss at a future staff meeting. No decision will be made regarding Rapid Rehousing program operations without keeping the well-being of residents in mind. Given that we work with people in crisis, we can't adopt a "one size fits all" method. If we find that something is not working we try quickly and efficiently to find a solution using all the resources we have available.

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. |

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/25/2022
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/25/2022
1E-1. Local Competition Deadline	Yes	Local Competition...	09/25/2022
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/25/2022
1E-2a. Scored Renewal Project Application	Yes	Scored Form for O...	09/25/2022
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/26/2022
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/25/2022
1E-5b. Final Project Scores for All Projects	Yes	Final Project Sco...	09/26/2022
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		

3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/27/2022
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Form for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/26/2022
1B. Inclusive Structure	09/28/2022
1C. Coordination and Engagement	09/28/2022
1D. Coordination and Engagement Cont'd	09/29/2022
1E. Project Review/Ranking	09/29/2022
2A. HMIS Implementation	09/28/2022
2B. Point-in-Time (PIT) Count	09/29/2022
2C. System Performance	09/29/2022
3A. Coordination with Housing and Healthcare	09/29/2022
3B. Rehabilitation/New Construction Costs	09/29/2022
3C. Serving Homeless Under Other Federal Statutes	09/29/2022

4A. DV Bonus Project Applicants	09/28/2022
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

PHA Homeless Preference (1C-7)

Attachment Coversheet

1. Vermont State Housing Authority – homeless preference
2. Rutland Housing Authority – homeless preference

Vermont State Housing Authority



www.vsha.org
Please Reply To:

Central Office:

- One Prospect Street
Montpelier
VT 05602-3556
802/828-3295 (Voice)
800/798-3118 (TTY)
800/820-5119 (Messages)
802/828-3248 (Fax)

Regional Offices:

- Hillcrest Views
Management Office
3 Clyde Allen Drive, B7
St. Albans VT 05478
802/527-1071 (Voice)
802/524-0301 (Fax)
- Middlebury Commons
Management Office
249 Buttolph Drive
Middlebury VT 05753
802/388-1005 (Voice)
802/388-1719 (Fax)
- Northwoods
Management Office
95 Templeton Avenue
White River Jct. VT
05001
802/295-8883 (Voice)
802/295-8884 (Fax)

November 10, 2021

US Department of Housing and Urban Development
Office of Community Planning and Development
Thomas P. O'Neil Federal Building
10 Causeway Street, Room 535
Boston, MA 02222

To Whom It May Concern,

This past year, Vermont State Housing Authority (VSHA) eliminated its general homeless preference for application to the Housing Choice Voucher Program and established a "Move-on" preference to support the need to move several hundred households residing in temporary programs (Rapid Rehousing, DV Transitional Housing and CoC-PSH) to permanent housing programs to maintain long-term housing stability.

In addition, VSHA maintains limited homeless preferences, soon to be updated in our Administrative Plan, for both:

- Emergency Housing Vouchers (99) - to serve persons fleeing domestic & sexual violence coming from shelters and homeless programs AND
- Project-Based Vouchers (200+) funded by HCV, Mainstream 811, etc.; to serve literally homeless and chronically homeless households coming from streets and shelters.

Vermont State Housing Authority remains committed to serving the needs of homeless households. We are accomplishing this goal by working in partnership with the Agency of Human Services and other state housing partners to fill-in the gaps of provide long-term housing stability to Vermont's most vulnerable.

Sincerely,

Kathleen R. Berk
Executive Director





**RUTLAND
HOUSING AUTHORITY**

**ADMINISTRATIVE PLAN
FOR THE
SECTION 8
HOUSING CHOICE VOUCHER PROGRAM**

**Original Date: December 10, 2007
Resolution # 635**

Revision Date	Revision Date
12/08/2008 Resolution #691	12/08/2014 Resolution #2014-35
01/11/2010 Resolution #733	11/30/2015 Resolution #2016-075
01/11/2010 Resolution #2011-03	04/11/2016 Resolution #2016-09
10/03/2011 Resolution #2011-34	06/05/2017 Resolution #2017-16
03/12/2012 Resolution # 2012-09	07/01/2018 Resolution #2019-03
12/12/2012 Resolution # 2012-26	06/01/2019 Resolution #2019-26
01/03/2014 Resolution #2014-03	04/01/2020

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

RHA Policy

RHA will offer public notice when changing its preference system. The notice will be publicized using the same guidelines as those followed for amending the agency's PHA plan or opening and closing the waiting list, depending on when the change is planned to occur.

RHA uses the following local preference system prioritized using a point system for its waiting list. (Lincoln Place Supportive Housing with Project-Based Vouchers maintains a separate project-specific PBV waiting list with preferences established in collaboration with the owner, Housing Trust of Rutland County)

1. **Disaster Preference - 1 point:** This preference is available to Vermont families who are displaced due to fire, flood, natural disaster or condemnation by a local, State or Federal Agency.
2. **Moving-up Preference – 2 points:** This preference is available to individuals and families who are transitioning from the following programs administered or affiliated with the Rutland Housing Authority:
 - Individuals /families transitioning from a Domestic Violence Transitional Housing Program
 - Individuals / families transitioning from the Bridge and Permanent Housing Program
 - Individuals / families transitioning from Lincoln Place Permanently Supportive Housing
 - Individuals / families transitioning from VCRHVP Transitional Housing Program.

To be considered for this preference, applicants **must** meet the following additional criteria:

1. Actively participating in a case-management plan – which includes an exit plan with an appropriate organization providing these services; **and**
2. Be in compliance with any lease agreement (verbal or written). Families must be current in their rent and any other conditions of tenancy. Families cannot be subject to an eviction action. RHA will require Certification from the applicant's current landlord stating they are *in good standing and in compliance with their lease agreement*.

3. Preference for Homeless Families with Case Management Support – 2 points:

Preference will be provided to families who are homeless as defined by HUD's Category 1 definition of homelessness: An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:

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

And, who will be receiving regular on-site case management support from a local homeless services, social services or mental health agency for at least one year after moving into a voucher-assisted unit. Status will be verified through the agency providing case management.

4. Preference for Mainstream eligible households – 1 point:

This preference is available for eligible household who are:

- Transitioning out of institutions; or
- At serious risk of institutionalization; or
- Homeless or at risk of becoming homeless; or
- Previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project;

5. Preference for Vermont Residents – 1 point:

This preference is available for applicants who either live or work in the state of Vermont and can prove residency through a verified current address or verification from an employer.

6. Preference for Working Families or Elderly/Disabled – 1 Point:

This preference is available for families in which the head, spouse or sole member is employed a minimum of 20 hours per week. An applicant where the head, spouse or sole member is a person age 62 or older or is a person with disabilities.

7. Preference for Insufficient Program Funding – 1 point:

This preference is available for any individual/family that has been terminated from its HCV program due to insufficient program funding.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

RHA Policy

The PHA will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

Order of Selection

The PHA system of preferences may select families based on local preferences according to the date and time of application or by a random selection process (lottery) [24 CFR 982.207(c)]. If a PHA does not have enough

funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

RHA Policy

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the PHA's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected on a first-come, first-served basis according to the date and time their complete application is received by the PHA. Documentation will be maintained by the PHA as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that the PHA does not have to ask higher placed families each time targeted selections are made.

4-III.D. NOTIFICATION OF SELECTION

When a family has been selected from the waiting list, the PHA must notify the family [24 CFR 982.554(a)].

RHA Policy

The PHA will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of the following:

- Date, time, and location of the scheduled application interview, and/or briefing, including any procedures for rescheduling the interview

- Who is required to attend the interview.

- All documents that must be provided at the interview, including information about what constitutes acceptable documentation

If a notification letter is returned to the PHA with no forwarding address, the family will be removed from the waiting list. A notice of denial (see Chapter 3) will be sent to the family's address of record, as well as to any known alternate address.

PHA Moving On Preference (1C-7)

Attachment Coversheet

1. Vermont State Housing Authority – move-on preference
2. Rutland Housing Authority – move-on preference

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

VSHA will offer public notice when changing its preference system. The notice will be publicized using the same guidelines as those followed for amending the agency's PHA plan or opening and closing the waiting list, depending on when the change is planned to occur.

VSHA uses the following local preference system:

1. **Disaster Preference:** This preference is available to Vermont families who are displaced due to fire, flood, natural disaster, or condemnation by a local, State, or Federal Agency.
2. **Move-Up Preference:** This preference is available to recently/formerly homeless households who meet all of the following criteria –
 - household certifies a need for, as well as readiness and willingness, to achieve housing stability by transitioning to a non-homeless permanent housing voucher;
 - prioritized and referred by a local Vermont Coordinated Entry Provider;
 - in compliance with referring program (*as certified by their current service provider*);
 - in good standing* with the current lease and/or occupancy agreement (*as certified by the property manager/owner, program operator or VSHA staff*);
 - connected to a local service provider with a minimum of monthly housing case management services available for six months (*VSHA may waive this requirement on a case-by-case basis dependent upon household need*); AND
 - currently residing in one of the following programs:
 - A) State of Vermont/Agency of Human Services/Vermont Rental Subsidy Program – Rapid Rehousing serving homeless families (*eligible at 6 months* of initial lease date);
 - B) Domestic Violence Transitional Housing projects dedicated to serving persons fleeing domestic violence, sexual violence and/or human trafficking which are currently listed on, or eligible to be included on, the VT CoC Homeless Inventory Charts of Homeless Beds (*eligible at 6 months* of initial lease/program start date);
 - C) VCRHYP-YHDP/CoC RRH Program – Rapid Rehousing dedicated to serving homeless youth (*eligible at 6 months* of initial lease start date);
 - D) VSHA Continuum of Care Program - Permanent Supportive Housing serving persons

- experiencing chronic homelessness (*eligible at 24 months* of initial lease date);
- E) VSHA Continuum of Care Program - Rapid Rehousing serving individuals and families experiencing homelessness (*eligible at 6 months* of initial lease date);
- F) VSHA Family Unification Program for Youth In Transition (FUP-Y);
- G) Veterans Affairs Homeless Programs/SSVF – Rapid Rehousing serving Veterans, who are experiencing homelessness, in a project located in Vermont (*eligible at 6 months* of initial lease/program start date);
- H) AHS CARES Vouchers (ESG-CV) – Rapid Rehousing serving Vermont homeless households impacted by the COVID-19 pandemic (*eligible at 6 months of initial lease date*).

To be considered for this preference, applicants **must** meet the following additional criteria:

1. Actively participating in a case-management plan – which includes an exit plan with an appropriate organization providing these services; **and**
2. Be in compliance with any lease agreement (verbal or written). Families must be current in their rent and any other conditions of tenancy. Families cannot be subject to an eviction action. VSHA will require Certification from the applicant’s current landlord stating they are *in good standing and in compliance with their lease agreement*.

**Applicants transitioning from HUD’s/VSHA’s Shelter plus Care program MUST provide certification from the (Shelter + Care) Sponsoring Organization that the applicant has participated in the Shelter + Care program for no less than 36 months and has met the goals of their case management plan.*

3. Preference for non-elderly persons with disabilities transitioning out of institutions:

This preference is available for non-elderly disabled applicants who are transitioning out of institution or other segregated settings, or are at serious risk of institutionalization, are homeless, or at risk of becoming homeless. Verification of eligibility will be obtained upon selection from the waiting list.

4. Preference for Vermont Residents: This preference is available for applicants who either live or work in the state of Vermont and can prove residency through a verified current address or verification from an employer.



**RUTLAND
HOUSING AUTHORITY**

**ADMINISTRATIVE PLAN
FOR THE
SECTION 8
HOUSING CHOICE VOUCHER PROGRAM**

**Original Date: December 10, 2007
Resolution # 635**

Revision Date	Revision Date
12/08/2008 Resolution #691	12/08/2014 Resolution #2014-35
01/11/2010 Resolution #733	11/30/2015 Resolution #2016-075
01/11/2010 Resolution #2011-03	04/11/2016 Resolution #2016-09
10/03/2011 Resolution #2011-34	06/05/2017 Resolution #2017-16
03/12/2012 Resolution # 2012-09	07/01/2018 Resolution #2019-03
12/12/2012 Resolution # 2012-26	06/01/2019 Resolution #2019-26
01/03/2014 Resolution #2014-03	04/01/2020

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

RHA Policy

RHA will offer public notice when changing its preference system. The notice will be publicized using the same guidelines as those followed for amending the agency's PHA plan or opening and closing the waiting list, depending on when the change is planned to occur.

RHA uses the following local preference system prioritized using a point system for its waiting list. (Lincoln Place Supportive Housing with Project-Based Vouchers maintains a separate project-specific PBV waiting list with preferences established in collaboration with the owner, Housing Trust of Rutland County)

1. **Disaster Preference - 1 point:** This preference is available to Vermont families who are displaced due to fire, flood, natural disaster or condemnation by a local, State or Federal Agency.

2. **Moving-up Preference – 2 points:** This preference is available to individuals and families who are transitioning from the following programs administered or affiliated with the Rutland Housing Authority:

- Individuals /families transitioning from a Domestic Violence Transitional Housing Program
- Individuals / families transitioning from the Bridge and Permanent Housing Program
- Individuals / families transitioning from Lincoln Place Permanently Supportive Housing
- Individuals / families transitioning from VCRHVP Transitional Housing Program.

To be considered for this preference, applicants **must** meet the following additional criteria:

1. Actively participating in a case-management plan – which includes an exit plan with an appropriate organization providing these services; **and**
2. Be in compliance with any lease agreement (verbal or written). Families must be current in their rent and any other conditions of tenancy. Families cannot be subject to an eviction action. RHA will require Certification from the applicant's current landlord stating they are *in good standing and in compliance with their lease agreement*.

3. **Preference for Homeless Families with Case Management Support – 2 points:**

Preference will be provided to families who are homeless as defined by HUD's Category 1 definition of homelessness: An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:

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

And, who will be receiving regular on-site case management support from a local homeless services, social services or mental health agency for at least one year after moving into a voucher-assisted unit. Status will be verified through the agency providing case management.

4. Preference for Mainstream eligible households – 1 point:

This preference is available for eligible household who are:

- Transitioning out of institutions; or
- At serious risk of institutionalization; or
- Homeless or at risk of becoming homeless; or
- Previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project;

5. Preference for Vermont Residents – 1 point:

This preference is available for applicants who either live or work in the state of Vermont and can prove residency through a verified current address or verification from an employer.

6. Preference for Working Families or Elderly/Disabled – 1 Point:

This preference is available for families in which the head, spouse or sole member is employed a minimum of 20 hours per week. An applicant where the head, spouse or sole member is a person age 62 or older or is a person with disabilities.

7. Preference for Insufficient Program Funding – 1 point:

This preference is available for any individual/family that has been terminated from its HCV program due to insufficient program funding.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

RHA Policy

The PHA will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

Order of Selection

The PHA system of preferences may select families based on local preferences according to the date and time of application or by a random selection process (lottery) [24 CFR 982.207(c)]. If a PHA does not have enough

funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

RHA Policy

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the PHA's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected on a first-come, first-served basis according to the date and time their complete application is received by the PHA. Documentation will be maintained by the PHA as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that the PHA does not have to ask higher placed families each time targeted selections are made.

4-III.D. NOTIFICATION OF SELECTION

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RHA Policy

The PHA will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of the following:

- Date, time, and location of the scheduled application interview, and/or briefing, including any procedures for rescheduling the interview

- Who is required to attend the interview.

- All documents that must be provided at the interview, including information about what constitutes acceptable documentation

If a notification letter is returned to the PHA with no forwarding address, the family will be removed from the waiting list. A notice of denial (see Chapter 3) will be sent to the family's address of record, as well as to any known alternate address.

Local Competition Deadline (1E-1)

Attachment Coversheet

HUD 2022 Continuum of Care Funding

August 17, 2022

FY2022 HUD Continuum of Care Notice of Funding Opportunity (NOFO)

In response to HUD's Notice of Funding Opportunity, the Vermont Coalition to End Homelessness, as the Vermont Balance of State Continuum of Care (VT BoS CoC - VT-500), has issued a revised Request for Proposals (RFP) for projects to be submitted for funding to HUD for the FY22 Competition.

The RFP document is updated to reflect HUD guidance released since our initial announcement on August 10th. The project application submission timeline and the full RFP with application deadline are linked below. In summary:

Applications are to be submitted electronically to:

Vermont Coalition to End Homelessness

Attention: Martin Hahn: mhahn@helpingtohousevt.org

- Housing Project (NEW or RENEWAL) Initial Application forms must be submitted electronically before 4:00 PM EST Monday, August 29, 2022.

Applications are to be submitted electronically to:

Vermont Coalition to End Homelessness

Attention: Martin Hahn: mhahn@helpingtohousevt.org

- Housing Project (NEW or RENEWAL) Initial Application forms must be submitted electronically before 4:00 PM EST Monday, August 29, 2022.
- Coordinated Entry (CE) and Homeless Management Information System (HMIS) (NEW or RENEWAL) projects letter of intent are due electronically before 4:00 PM EST, Tuesday, August 23, 2022

Applications will be submitted to the Vermont Coalition to End Homelessness (VCEH), who serves as the "Collaborative Applicant" for the Vermont Balance of State Continuum of Care geographic area. The VT BoS CoC geographic area encompasses all counties in Vermont, except Chittenden.

We are seeking proposals to provide housing and services with a priority to serve vulnerable populations including individuals & families experiencing chronic homelessness, persons fleeing domestic violence and families with children under 18.

Applications from entities that have not previously been awarded CoC Program funds are welcome.

Links related to NOFO on CoC Program funding:

- HUD CoC NOFO
- A summary of the NOFO highlighting priority content and key changes
- FY22 Request for Proposals (RFP) for projects to address housing and service priorities for households experiencing homelessness including deadlines for project submission
- VT BoSCoC FY22 NOFO timeline and due dates
- FY22 VT BoSCoC New Project Scoring Tool, Final
- FY22 VT BoSCoC Renewal Project Scoring Tool, Final
- VCEH policies related to HUD CoC Program funding

August 10, 2022

HUD 2022 Continuum of Care Fu x +

helpingtohousevt.org/hud-2022-continuum-of-care-funding/

- VCEH policies related to HUD CoC Program funding

August 10, 2022

Dear Colleagues,

The US Department of Housing & Urban Development has published the **Notice of Funding Opportunity (NOFO) for Fiscal Year 2022 Continuum of Care Competition** and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants.

[NOTE that the NOFO linked here and accompanying materials are for the 2022 Continuum of Care NOFO, **not** the Special NOFO to Address Unsheltered and Rural Homelessness.]

In response to this NOFO, the Vermont Balance of State Continuum of Care (VT BoS CoC – VT-500), has issued a *preliminary* Request for Proposals and Application for projects to be submitted for funding to HUD for the FY22 Competition. (Upon receipt of additional information from HUD the application will be finalized.) Application deadlines are in the RFP, link below.

Applications will be submitted to the Vermont Coalition to End Homelessness, which serves as the “Collaborative Applicant” for the Vermont Balance of State Continuum of Care. The VT BoS CoC geographic area encompasses all counties in Vermont, except Chittenden.

- The HUD CoC NOFO.
- HUD landing page for information related to the NOFO.
- Request for Proposals (RFP) and Application for projects to respond to the housing and service priorities for households experiencing homelessness **described in the NOFO.**
- VCEH policies related to HUD CoC funding.

The tool that will be used to score applications will be released at a later date after review and approval by the VT BoS CoC Board.

A. Program Description. The Continuum of Care (CoC) Program (24 CFR part 578) is designed to promote a community-wide commitment to the goal of ending homelessness; to provide funding for efforts by nonprofit providers, states, Indian Tribes or tribally designated housing entities, and local governments to quickly rehouse homeless individuals, families, persons fleeing domestic violence, dating violence, sexual

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8/17/2022

Local Competition Scoring Tool (1E-2)

Attachment Coversheet

- New project scoring tool (blank)
- Renewal project scoring tool (blank)
 - All questions were objective
 - System Performance Measures (purple rows) – 50 points of 100 total = 50%

FY2022 VT BoS CoC NEW Project Scoring Tool

Project Name: _____ Project Agency: _____
 Evaluator Name: _____ Date: _____

THRESHOLD - ALL PROJECTS		
1. Project proposes to serve an eligible population for the project type	Yes	No
2. Project proposes to use eligible costs for the project type	Yes	No
3. Project applicant and subrecipient are eligible entities	Yes	No
4. Match is greater than or equal to 25%	Yes	No
5. Project agrees to participate in Coordinated Entry System and VT HMIS or comparable database for victim service providers?	Yes	No
6. Project agrees to use Housing First principles and be low barrier	Yes	No
IF ANY ANSWERS ARE 'NO' PROJECT DOES NOT MEET THRESHOLD		
THRESHOLD - DV BONUS PROJECTS ONLY		
7. All participants in the project will meet the qualifications of Category 4 of the homeless definition which includes fleeing or attempting to flee domestic violence	Yes	No
IF ANY ANSWERS ARE 'NO' PROJECT DOES NOT MEET THRESHOLD		

Part A: Project Type (Maximum Points – 20)	Points	Awarded
1. Permanent Supportive Housing (PSH)	18	
2. Rapid Re-Housing (RRH)	20	
3. Joint Transitional Housing-RRH (TH-RRH)	5	
Part B: VT HMIS or Comparable Database Participation (Maximum Points - 5)		
1. Does agency participate in VT HMIS or a comparable database if VSP for other homeless dedicated projects?*		
Yes	5	
No	0	
Part C. Experience and Project Description (Maximum Points – 50)		
Participant Project Performance		
1. Does the applicant describe their experience with administering PSH and/or RRH projects? <i>DV projects - also must address how safety outcomes have been met in the past.</i>	Up to 6	
2. Does the applicant have past experience in leveraging other funds to support housing projects?	Up to 2	
3. How many months before the project is near 100% capacity		
Within 4 months	2	
Within 6 months	1	
More than 6 months or no response	0	
4. Does the applicant describe basic organization and management structure to successfully implement the project?	Up to 6	
5. Does the project description meet a CoC identified need and provide a clear description of project type, scale, location and supportive services and projected outcomes to obtain and/or remain in permanent housing?	Up to 10	

Continue to page 2

Project Name: _____

Project Agency: _____

Evaluator Name: _____

Date: _____

	Points	Awarded
6. Does the applicant describe a strong plan to obtain and retain permanent housing including landlord engagement strategies? <i>DV projects must also address past experience in housing survivors in PH</i> <i>DV projects must also address how safety outcomes will be met in the future.</i>	Up to 9	
7. Does project description clearly describe how linkages to employment and other mainstream income resources and services will occur?	Up to 8	
8. Is the proposed budget clear and realistic to carryout proposed activities?		
8. Does project propose to leverage housing resources? 50% leverage - full points 25-49% leverage - half points 24% or below - no points		
8. Does project propose to leverage healthcare resources? 50% leverage - full points 25-49% leverage - half points 24% or below - no points		
8. Is the proposed budget clear and realistic to carryout proposed activities?	Up to 7	
Part D. Target Population (Multiple choices allowed; Maximum Points - 16)		
1. What is the target population of the grant 100% Individuals or Families Experiencing Chronic Homelessness or DedicatedPLUS populations Households with Children under 18	8	
	5	
2. Will the project prioritize people with zero income from the referrals received from the Coordinated Entry System? Yes No	3 0	
Part E: Monitoring (Maximum Points - 5)		
1. Does applicant have an agency representative who participates in at least 75% of CoC meetings?	2	
2. Does the applicant have any unresolved HUD Monitoring and/or OIG Audit findings covering any previous grant? Yes = 0 points No=full points	1	
3. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units) Yes=full pt No=0 points	2	
Part F: Equity Factors (Maximum Points - 4)		
1. Agency management and leadership staff include people from typically under-represented populations (black, indigenous, people of color, people who identify as LGBTQIA+, etc.)?	1	
2. Board of Directors (or equivalent decision making entity) include people from typically under-represented populations (black, indigenous, people of color, people who identify as LGBTQIA+, etc.)	1	
3. Board of Directors (or equivalent decision making entity) includes representation from more than one person with lived experience	1	

Project Name: _____ Project Agency: _____
 Evaluator Name: _____ Date: _____

4. Applicant will commit to working with HMIS lead to develop a schedule for reviewing HMIS/ Comparable database data with disaggregation by race, ethnicity, gender identity, and/ or age within the next year.	1	
FINAL SCORE (Maximum Points = 100) TOTAL		
CoC Ranking Team comments:		

*If agency has no other homeless dedicated projects they will receive full points

FY2022 VT BoS CoC RENEWAL Project Scoring Tool

Project Name: _____ Project Agency: _____
 Evaluator Name: _____ Date: _____

THRESHOLD	Yes	No
1. Project proposes to serve an eligible population for the project type	Yes	No
2. Project proposes to use eligible costs for the project type	Yes	No
3. Project applicant and subrecipient are eligible entities	Yes	No
4. Match is greater than or equal to 25%	Yes	No
5. Project agrees to participate in Coordinated Entry System and HMIS (or comparable DB)	Yes	No
6. Project agrees to use Housing First principles and be low barrier	Yes	No
IF ANY ANSWERS ARE 'NO' PROJECT DOES NOT MEET THRESHOLD		

Part A: Project Type (Maximum Points – 15)	Points	Awarded
1. Permanent Supportive Housing (Shelter Plus Care)	10	
2. Rapid Re-Housing (RRH)	15	
3. Joint Transitional Housing (TH and RRH (TH-RRH))	10	
4. SSO (Youth)	10	
Part B: VT HMIS or Comparable Database Data Quality & APR (Maximum Points - 6)*		
1. APR Data Quality (most recent APR): All data elements are 0% missing elements	6	
Part C. Performance (Maximum Points – 54)*		
Participant Project Performance (Source: HMIS or Comparable Database)		
ALL PROJECTS		
1. % of households that have increased non-employment income:		
PSH	RRH	
40% or more	35% or more	6
30% to 39%	25% to 34%	4
20% to 29%	20% to 24%	2
19% or less	19% or less	0
2. Employment: % participants with increased employment income:		
PSH	RRH	
10% or more	20% or more	5
6% to 9%	11% to 19%	3
2% to 5%	6% to 10%	1
2% or less	5% or less	0
3. Non-Cash Benefits: % HHs with at least one source: 85% or higher		8
4. Returns to Homelessness - % of households who returned to homelessness at exit:		
	10% or less	10
	11% or higher	5

Continue to page 2

Project Name: _____

Project Agency: _____

Evaluator Name: _____

Date: _____

		Points	Awarded
SEVERITY OF NEEDS and VULNERABILITY			
5. Admission Income: % of households who had zero income at entry:	30% or higher	2	
	10-29%	1	
	Less than 10%	0	
6. People entering with a disability: % of households who have a disabling condition of long-duration at entry			
	20% or higher	2	
	10-19%	1	
	Less than 10%	0	
EXITS TO PERMANENT HOUSING			
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS			
7. Housing Stability: PSH % who stayed in PSH or exited to PH or RRH % of exited to PH			
	90% or more 80% or more	15	
	75% - 89% 65% to 79	10	
	74% or less 64% or less	0	
8. Safety of survivors improved:			
	90% or more	5	
	80% to 89%	3	
	79% or less	0	
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS			
9. Housing Stability - PSH % who stayed in PSH or exited to PH or RRH % of exited to PH			
	90% or more 80% or more	20	
	80% - 89% 70% to 79	15	
	70% - 79% 60% to 69	5	
	69% or less 59% or less	0	
RAPID EXIT - LENGTH OF TIME HOMELESS			
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS			
10. Rapid Exit: Average days from project entry to residential move-in:			
	45 days or less	6	
	46-90 days	4	
	91-120 days	3	
	121+ days	0	
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS			
11. Rapid Exit: Average days from project entry to residential move-in:			
	PSH RRH		
	60 days or less 30 days or less	6	
	61 - 90 days 31-90 days	4	
	91-120 days 91-120 days	2	
	121+ days 121+ days	0	

Continue to page 3

Project Name: _____

Project Agency: _____

Evaluator Name: _____

Date: _____

	Points	Awarded
Part D. Target Population (Multiple choices allowed; Maximum Points - 10)		
1. 100% Individuals or Families Experiencing Chronic Homelessness or DedicatedPLUS population	6	
2. Households with Children under 18	4	
Part E: Monitoring (Maximum Points - 6)		
1. Drawdown at least every 60 days	2	
2. Utilization rate of housing units at least 95% *	1	
3. Recaptured funds is less than 10% of total award *	2	
4. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units)	1	
Part F: Equity Factors (Maximum Points - 4)		
1. Agency management and leadership positions include representation from any of the following groups: black, indigenous, people of color, people who identify as LGBTQIA+?	1	
2. Board of Directors (or equivalent decision making entity) includes representation from any of the following groups: black, indigenous, people of color, people who identify as LGBTQIA+?	1	
3. Board of Directors (or equivalent decision making entity) include representation from persons with lived experience?	1	
4. Applicant will commit to working with HMIS lead to develop a schedule for reviewing HMIS/ Comparable database data with disaggregation by race, ethnicity, gender identity, and/ or age within the next year.	1	
FINAL SCORE (Maximum Points = 100) TOTAL		
CoC Ranking Team comments:		

*If project is a first time renewal or has not completed a full operating it will receive full points on this question

Scored Forms for One Project (1E-2a)

Attachment Coversheet

FY2022 VT BoS CoC RENEWAL Project Scoring Tool

Project Name: VSHA CoC-PSH ("Shelter+Care") Project Agency: Vermont State Housing Authority
 Evaluator Name: VT BOS Scoring Committee Date: 9/2/2022

THRESHOLD		
1. Project proposes to serve an eligible population for the project type	Yes	No
2. Project proposes to use eligible costs for the project type	Yes	No
3. Project applicant and subrecipient are eligible entities	Yes	No
4. Match is greater than or equal to 25%	Yes	No
5. Project agrees to participate in Coordinated Entry System and HMIS (or comparable DB)	Yes	No
6. Project agrees to use Housing First principles and be low barrier	Yes	No
IF ANY ANSWERS ARE 'NO' PROJECT DOES NOT MEET THRESHOLD		

Part A: Project Type (Maximum Points – 15)	Points	Awarded
1. Permanent Supportive Housing (Shelter Plus Care)	10	10
2. Rapid Re-Housing (RRH)	15	
3. Joint Transitional Housing (TH and RRH (TH-RRH))	10	
4. SSO (Youth)	10	
Part B: VT HMIS or Comparable Database Data Quality & APR (Maximum Points - 6)*		
1. APR Data Quality (most recent APR): All data elements are 0% missing elements	6	0
Part C. Performance (Maximum Points – 54)*		
Participant Project Performance (Source: HMIS or Comparable Database)		
ALL PROJECTS		
1. % of households that have increased non-employment income:		
PSH	RRH	
40% or more	35% or more	6
30% to 39%	25% to 34%	4
20% to 29%	20% to 24%	2
19% or less	19% or less	0
2. Employment: % participants with increased employment income:		
PSH	RRH	
10% or more	20% or more	5
6% to 9%	11% to 19%	3
2% to 5%	6% to 10%	1
2% or less	5% or less	0
3. Non-Cash Benefits: % HHs with at least one source: 85% or higher	8	8
4. Returns to Homelessness - % of households who returned to homelessness at exit:		
	10% or less	10
	11% or higher	5

Continue to page 2

	Points	Awarded
SEVERITY OF NEEDS and VULNERABILITY		
5. Admission Income: % of households who had zero income at entry:	30% or higher	2
	10-29%	1
	Less than 10%	0
6. People entering with a disability: % of households who have a disabling condition of long-duration at entry	20% or higher	2
	10-19%	1
	Less than 10%	0
EXITS TO PERMANENT HOUSING		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
7. Housing Stability: PSH % who stayed in PSH or exited to PH or RRH % of exited to PH	90% or more	80% or more
	75% - 89%	65% to 79
	74% or less	64% or less
		15
		10
		0
8. Safety of survivors improved:	90% or more	5
	80% to 89%	3
	79% or less	0
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
9. Housing Stability - PSH % who stayed in PSH or exited to PH or RRH % of exited to PH	90% or more	80% or more
	80% - 89%	70% to 79
	70% - 79%	60% to 69
	69% or less	59% or less
		20
		15
		5
		0
RAPID EXIT - LENGTH OF TIME HOMELESS		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
10. Rapid Exit: Average days from project entry to residential move-in:	45 days or less	6
	46-90 days	4
	91-120 days	3
	121+ days	0
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
11. Rapid Exit: Average days from project entry to residential move-in:		
	PSH	RRH
	60 days or less	30 days or less
	61 - 90 days	31-90 days
	91-120 days	91-120 days
	121+ days	121+ days
		6
		4
		2
		0

Continue to page 3


Project Name: VSHA CoC-PSH ("Shelter+Care") Project Agency: Vermont State Housing Authority
 Evaluator Name: VT BOS Scoring Committee Date: 9/2/2022

	Points	Awarded
Part D. Target Population (Multiple choices allowed; Maximum Points - 10)		
1. 100% Individuals or Families Experiencing Chronic Homelessness or DedicatedPLUS population	6	6
2. Households with Children under 18	4	
Part E: Monitoring (Maximum Points - 6)		
1. Drawdown at least every 60 days	2	2
2. Utilization rate of housing units at least 95% *	1	1
3. Recaptured funds is less than 10% of total award *	2	0
4. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units)	1	0
Part F: Equity Factors (Maximum Points - 4)		
1. Agency management and leadership positions include representation from any of the following groups: black, indigenous, people of color, people who identify as LGBTQIA+?	1	1
2. Board of Directors (or equivalent decision making entity) includes representation from any of the following groups: black, indigenous, people of color, people who identify as LGBTQIA+?	1	0
3. Board of Directors (or equivalent decision making entity) include representation from persons with lived experience?	1	1
4. Applicant will commit to working with HMIS lead to develop a schedule for reviewing HMIS/ Comparable database data with disaggregation by race, ethnicity, gender identity, and/ or age within the next year.	1	1
FINAL SCORE (Maximum Points = 100) TOTAL		78
CoC Ranking Team comments:		

*If project is a first time renewal or has not completed a full operating it will receive full points on this question

Notification of Projects Rejected-Reduced (1E-5)

Attachment Coversheet

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:31 PM
To: Daniel Blankenship daniel@vsha.org
Cc: Martin Hahn mhahn@helpingtohousevt.org, Melany Mondello mmondello@tacinc.org

MS

Hi Daniel,

Please see attached for final FY22 project funding,

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org



FFY22 Final
Project...HA.pdf



Sent Electronically

September 13, 2022

Daniel Blankenship
Vermont State Housing Authority
1 Prospect Street
Montpelier, VT 05602

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Daniel,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee scores stand as the final determination of your proposals based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

RENEWAL PROJECT PROPOSALS

PSH: VSHA COC-PSH (“AWH”) FY22 (RNW)

- **Final Award \$494,902**
- **Rank #1** out of 9 (89 out of 100 total points)
- **Full Award** - Project was fully awarded eligible amount for renewal activities

PSH: VSHA COC-PSH (S+C) FY22 (RNW)

- **Final Award \$1,113,873**
- **Rank #3** out of 9 (78 out of 100 total points)
- **Full Award** - Project was fully awarded eligible amount for renewal activities

RRH: VSHA COC-RRH FY22 (RNW)

- **Final Award \$553,972**

- **Rank #4** out of 9 (71 out 100 total points)
- **Reduced Award** - Renewal project was eligible for \$923,684 and voluntarily reduced by \$369,712 – final approved amount is as listed above

PSH: VSHA COC-PSH (PTH) FY22 (RNW)

- **Final Award \$379,927**
- **Rank #5** out of 9 (65 out 100 total points)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

NEW PROJECT PROPOSAL

PSH: VSHA COC-PSH (PTH) FY22 (Reallocation/Expansion/NEW)

- **Final Award \$369,712**
- **Rank #8** out of 9 (85 out of 100 total points)
- **Full Award** – Project was fully awarded eligible amount for new project activities

I look forward to our continued work together.


Sincerely,



Martin Hahn
Executive Director

Notification of Projects Accepted (1E-5a)

Attachment Coversheet

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:32 PM
To: chazzard@brattleborohousing.org
Cc: Martin Hahn mhahn@helpingtohousevt.org, Melany Mondello mmondello@tacinc.org



Hi Christine,

Please see attached for final FY22 project funding.

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org





September 13, 2022

Christine Hazzard
Executive Director
Brattleboro Housing Partnerships
PO Box 2275
Brattleboro, VT 05303

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Christine,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee score stands as the final determination of your proposal based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

RENEWAL PROJECT PROPOSAL

PSH: "BRAHA FY22 (RNW)"

Final Award \$258,046

Rank #2 out of 9 (81 out of 100 total points)


Full Award – Project was fully awarded eligible amount for renewal activities

I look forward to our continued work together.

Sincerely,

A handwritten signature in black ink, appearing to read 'Martin Hahn', is written in a cursive style.

Martin Hahn
Executive Director

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:22 PM
To: Adam Smith adam.smith@icalliances.org
Cc: Melany Mondello mmondello@tacinc.org, Martin Hahn mhahn@helpingtohousevt.org



Hi Adam,

Please see attached for final FY22 project funding.

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org



FFY22 Final
Project...CA.pdf



Sent Electronically

September 13, 2022

Adam Smith
Institute for Community Alliances
1111 9th Street
Des Moines, IA 50314

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Adam,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee score stands as the final determination of your proposal based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

RENEWAL PROJECT PROPOSALS

HMIS: HMIS Renewal

Final Award \$59,382

Rank #6 out of 9 (not scored per CoC policy)


Full Award – Project was fully awarded eligible amount for renewal activities

I look forward to our continued work together.

Sincerely,

A handwritten signature in black ink, appearing to read 'Martin Hahn', written in a cursive style.

Martin Hahn
Executive Director

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:21 PM
To: jyakunovich@nscvt.org
Cc: Martin Hahn mhahn@helpingtohousevt.org, Melany Mondello mmondello@tacinc.org



Hi Jennifer,

Please see attached for final FY22 project funding.

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org





Sent Electronically

September 13, 2022

Jennifer Yakunovich, Development Director
NewStory Center
PO Box 313
Rutland, VT 05702

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Jen,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee score stands as the final determination of your proposal based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

NEW PROJECT PROPOSALS

NewStory: NewStory Center (NEW – DV Bonus)

Final Award \$140,287

Rank #9 out of 9 (84 out 100 total points)


Full Award – Project was fully awarded eligible amount for new project activities.

I look forward to our continued work together.

Sincerely,

A handwritten signature in black ink, appearing to read 'Martin Hahn', is positioned above the printed name.

Martin Hahn
Executive Director

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:30 PM
To: Phillips, Sarah Sarah.Phillips@vermont.gov
Cc: Martin Hahn mhahn@helpingtohousevt.org, Melany Mondello mmondello@tacinc.org



Hi Sarah,

Please see attached for final FY22 project funding.

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org



FFY22 Final
Project...EO.pdf



Sent Electronically

September 13, 2022

Sarah Phillips
Vermont Office of Economic Opportunity
280 State Drive
Waterbury, VT 05671

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Sarah,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee score stands as the final determination of your proposal based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

RENEWAL PROJECT PROPOSAL

SSO-CE: Coordinated Entry Partnership Combined (RNW)

Final Award \$576,075

Rank #7 out of 9 (not scored per CoC policy)


Full Award – Project was fully awarded eligible amount for renewal activities

I look forward to our continued work together.

Sincerely,

A handwritten signature in black ink, appearing to read 'Martin Hahn', written in a cursive style.

Martin Hahn
Executive Director

From: Molly Shimko MShimko@helpingtohousevt.org 
Subject: FY22 CoC Program Project Final Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Date: September 13, 2022 at 1:31 PM
To: Daniel Blankenship daniel@vsha.org
Cc: Martin Hahn mhahn@helpingtohousevt.org, Melany Mondello mmondello@tacinc.org



Hi Daniel,

Please see attached for final FY22 project funding,

Thank you so much!

Molly

Molly Davis Shimko
CoC Program Coordinator
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org

Please note new email address: mshimko@helpingtohousevt.org



FFY22 Final
Project...HA.pdf



Sent Electronically

September 13, 2022

Daniel Blankenship
Vermont State Housing Authority
1 Prospect Street
Montpelier, VT 05602

Re. FY22 Final CoC Funding Notice, Vermont Balance of State

Dear Daniel,

Thank you for submitting FY22 CoC project proposals for funding to be considered by the VT Coalition to End Homelessness (VCEH)/VT Balance of State Continuum of Care.

On behalf of the VCEH, the Ranking Committee met on 9/2/22. No appeals were submitted, and the ranking committee scores stand as the final determination of your proposals based upon CoC-approved policies, scoring tools, and HUD priorities with objective data derived from APRs, eLOCCS, and other sources:

RENEWAL PROJECT PROPOSALS

PSH: VSHA COC-PSH (“AWH”) FY22 (RNW)

- **Final Award \$494,902**
- **Rank #1** out of 9 (89 out of 100 total points)
- **Full Award** - Project was fully awarded eligible amount for renewal activities

PSH: VSHA COC-PSH (S+C) FY22 (RNW)

- **Final Award \$1,113,873**
- **Rank #3** out of 9 (78 out of 100 total points)
- **Full Award** - Project was fully awarded eligible amount for renewal activities

RRH: VSHA COC-RRH FY22 (RNW)

- **Final Award \$553,972**

- **Rank #4** out of 9 (71 out 100 total points)
- **Reduced Award** - Renewal project was eligible for \$923,684 and voluntarily reduced by \$369,712 – final approved amount is as listed above

PSH: VSHA COC-PSH (PTH) FY22 (RNW)

- **Final Award \$379,927**
- **Rank #5** out of 9 (65 out 100 total points)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

NEW PROJECT PROPOSAL

PSH: VSHA COC-PSH (PTH) FY22 (Reallocation/Expansion/NEW)

- **Final Award \$369,712**
- **Rank #8** out of 9 (85 out of 100 total points)
- **Full Award** – Project was fully awarded eligible amount for new project activities

I look forward to our continued work together.

Sincerely,



Martin Hahn
Executive Director

Final Project Scores for All Projects (1E-5b)

Attachment Coversheet

**VT-500 - VT BoSCoC FY2022 CoC Program Project Ranking
September 15, 2022**

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("AWH") FY22 (RNW)	\$494,902	1	89
Brattleboro Housing Authority	PSH	BRAHA FY22 (RNW)	\$258,046	2	81
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("S+C") FY22 (RNW)	\$1,113,873	3	78
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY22 (RNW)	\$553,972	4	71
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY22 (RNW)	\$379,927	5	65
Institute for Community Alliance (ICA)	HMIS	HMIS Renewal	\$59,382	6	n/a
State of Vermont	SSO-CE	Coordinated Entry Partnership Combined (RNW)	\$576,075	7	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY22 (Reallocation/Expansion/NEW)	\$179,418	8	85
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY22 (Reallocation/Expansion/NEW)	\$190,294	8	85
NewStory Center	DV	NewStory Center (NEW - DV BONUS)	\$140,287	9	84
Vermont Coalition to End Homelessness (VCEH)	Planning	VT BoSCoC Planning FY22	\$143,773	n/a	n/a
YHDP Renewals					
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP RRH FY22	\$430,071	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	TH-RRH - YHDP	VCRHYP TH-RRH FY22	\$241,355	n/a	n/a

FUNDING TYPE - FY22	AMOUNT
Tier 1 (95% ARD) - YHDP)	\$3,615,595
Tier 2 (Remaining ARD + CoC Bonus - YHDP)	\$190,294
DV Bonus	\$140,287
Planning	\$143,773
YHDP	\$986,552
TOTAL	\$5,076,501

Unclaimed CoC Bonus	\$239,622
Unclaimed DV Bonus	\$71,560

**VT-500 - VT BoSCoC FY2022 CoC Program Project Ranking
September 15, 2022**

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Washington County Youth Service Bureau/ Boys & Girls Club	SSO - YHDP	VCRHYP LLP FY22	\$116,760	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP HN FY22	\$131,220	n/a	n/a
YHDP New/Replacement Projects					
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP DIV FY22	\$67,146	n/a	n/a
TOTAL			\$5,076,501		

Highlights from the VT BoS CoC Ranking Committee's project funding/ranking determinations:

REDUCED PROJECT AMOUNTS - VOLUNTARY REALLOCATION

Applicant Name	Project Type	Project Name	Reduced Amount		
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY22 (RNW)	\$369,712		

- Ranking and allocation of funding for new projects was based on: project's ability to increase overall CoC score leveraging mainstream resources; housing market; and ability to fund activities from other federal funds.

Healthcare Formal Agreements (3A-2a)

Attachment Coversheet

One project with healthcare services, mental health, without admission restrictions.



ending homelessness
rethinking mental health

PO Box #127
Winooski, VT 05404
(888) 492-8218

September 20, 2022

To Vermont State Housing Authority [CoC Project Applicant]:

Please accept this letter as certification that Pathways Vermont commits to providing the following otherwise non-obligated, eligible match and leverage support for the entire duration of the grant term for the following CoC project as part of the FFY2022 HUD CoC Program NOFO.

PROJECT NAME: VSHA CoC-PSH ("PTH" - Pathways Vermont) FY22 - EXPANSION

PROJECT/GRANT NUMBER: VT0077

GRANT TERM: December 1, 2023 - November 30, 2024

PROJECT APPLICANT: Vermont State Housing Authority

ELIGIBLE COC SERVICES (*check all that apply*):

- | | |
|---|---|
| <input type="checkbox"/> Outreach and Assess Service Needs | <input type="checkbox"/> Transportation and/or Food |
| <input type="checkbox"/> Moving Costs and/or Utility Deposits | <input type="checkbox"/> Housing Search & Counseling Services |
| <input checked="" type="checkbox"/> Case Management | <input type="checkbox"/> Life Skills Training |
| <input type="checkbox"/> Child Care and/or Legal Services | <input checked="" type="checkbox"/> Mental Health Services |
| <input type="checkbox"/> Education Services | <input type="checkbox"/> Outpatient Health Services |
| <input type="checkbox"/> Employment Assistance & Job Training | <input type="checkbox"/> Substance Abuse Treatment Services |

IN-KIND MATCH SOURCE/AMOUNT (i.e., *VT Medicaid, Federal/State grant, fundraising, etc.*):

1. Source: *VT DMH-Medicaid Billing* Type: *Government* Amount: *\$99,000*

IN-KIND MATCH SERVICES [i.e. *VT Medicaid Billing, Insurance, volunteers, etc.*] provided by a modified Assertive Community Treatment Team (comprised of service coordinators, housing coordinators, team leaders and specialists) with an average hourly rate of \$168 per hour.

- | | |
|--------------------------------|-------------------------------|
| • Housing Coordination - \$168 | • Psychiatrist - \$168 |
| • Case Management - \$168 | • Clinical Assessment - \$168 |

Sincerely,

Hilary Melton
Executive Director