

Before Starting the CoC Application

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

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

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

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

1A-2. Collaborative Applicant Name: Vermont State Housing Authority

1A-3. CoC Designation: CA

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

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
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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.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:	
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 of 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.	CoC-Funded Victim Service Providers	Yes	Yes	Yes
5.	CoC-Funded Youth Homeless Organizations	Yes	Yes	Yes
6.	Disability Advocates	Yes	Yes	Yes
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	Yes	Yes
10.	Homeless or Formerly Homeless Persons	Yes	Yes	No
11.	Hospital(s)	Yes	No	No
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
13.	Law Enforcement	Yes	No	No
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
15.	LGBT Service Organizations	No	No	No
16.	Local Government Staff/Officials	Yes	Yes	No
17.	Local Jail(s)	Yes	No	No
18.	Mental Health Service Organizations	Yes	Yes	Yes

19.	Mental Illness Advocates	Yes	Yes	Yes
20.	Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	No	No	No
23.	Organizations led by and serving LGBT persons	Yes	Yes	Yes
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	No	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	No	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Service Providers	Yes	Yes	Yes
Other:(limit 50 characters)				
33.	VT211/United Ways of Vermont	Yes	Yes	Yes
34.	Veteran Providers	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

Describe in the field below how your CoC:	
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

(limit 2,000 characters)

1. VT-500 BoS communicated an invitation to solicit new members to join the CoC through an open invitation included in all CoC listserv emails (once a week): "All interested parties are welcome and invited to join the Vermont Coalition to End Homelessness in our work through general members, committees and workgroups. For more about joining the [VCEH], visit our website: www.helpingtohousevt.org." Also, CoC Membership Committee conducted outreach to recruit under-represented populations, including for CoC Board positions.

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. VT-500 BoS conducted outreach to encourage CoC participation of persons experiencing homelessness through peer relationships and connections from three current members who have lived expertise and also through VT Youth

Homelessness Demo Program implementation , Membership Committee outreach to projects and participants , local surveys/interviews with shelter residents (Upper Valley Haven), and CoC email listserv (weekly invitation notice).

4. 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 (CoC Board).

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 2,000 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; regional CoCs present local priorities/updates at 12 monthly BoS CoC public meetings; CoC conducted outreach to persons experiencing homelessness and CoC Board has included (over past year) 3 paid reps with lived homeless experience, surveys & focus groups, multiple organizations & 11 local CoCs (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, every CoC listserv email includes invitation: “All interested parties are welcome and invited to join the VT Coalition to End Homelessness in our work through general members, committees and workgroups” and provides contact information; CoC-affiliated partner (VT Agency of Human Services) conducted bi-weekly calls as part of VT Homeless Covid-19 Response; committee and regional CoC minutes are disseminated.

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-weekly meetings to ensure safety, food, services and transportation of homeless population); ongoing special meetings/discussions on changes to GA 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).

1B-4.	Public Notification for Proposals from Organizations Not Previously Funded.	
	NOFO Section VII.B.1.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC’s local competition was open and accepting project applications;
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
3.	about how project applicants must submit their project applications;
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.

(limit 2,000 characters)

1. VT-500 BoS sent a Request for Proposals-RFP (9/1/21) public notice via CoC email listserv (400+ interested parties) & posted on public CoC website; RFP reminder sent (9/15/21); 9/30/21: reissued RFP public notice sent for unclaimed DV Bonus funds (9/30/21); CoC-affiliated board member (VT Housing Finance Agency) sent RFP public notices via Facebook/Twitter & posted on their public website (9/7/21); CoC-affiliated board member (VT Affordable Housing Coalition) posted CoC RFP notice on their public website (9/2/21) & sent via their email listserv to 558 interested parties (9/3/21); VT-500 BoS conducted outreach to the VT Network Against DV/SV to seek input on potential uses of & applying for DV Bonus funds.
2. All VT-500 BoS public notices included link to CoC project RFP & related documents; 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 FFY2021 CoC Program funds listed below.”
3. VT-500 BoS notice directed all project applicants to complete RFP form (only one Project request per form) and submit it electronically before 4:00 PM EST 9/29/21 to Collaborative Applicant: VT State Housing Authority, Daniel Blankenship, daniel@vsha.org.
4. VT-500 BoS 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.”
5. VT-500 BoS effectively communicated with individuals with disabilities by making CoC Project RFP available in PDF and posted on multiple electronic formats (2 publicly accessible email listservs, 3 publicly accessible websites, Facebook, Twitter); Collaborative Applicant (VSHA) & CoC-affiliated board member (VT 211) maintains TTY and language translation services; CoC staff were available by phone & email to assist with accessibility issues.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

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

18.	VT Legal Aid/VT 211/Veteran Orgs/Peer Orgs	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 2,000 characters)

1. The VT-500 BoS CoC sole recipient, State of VT/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; and Strategic Planning Committee, to ensure feedback was received on impact of ESG funding priorities & allocations. OEO received CoC input thru: postings for feedback to State/CoC websites; bi-weekly office hours; public presentations at VT BoS Board & general member meetings. VT BoS consulted with OEO on the strategic allocation of ESG funds to support HMIS which serves all federal homeless programs in Vermont. At least seven VT BoS CoC Board members participated in Con Plan public hearing on April 5 to develop 2021 Action Plan to ensure CoC-identified needs are met.
2. ESG recipient (OEO) solicited input on performance measures & priorities through meetings with CoC members and other interested parties. ESG performance outcomes and evaluation standards were discussed at CoC Board and general member meetings. There were quarterly evaluations of subrecipient performance by OEO, all HOP (ESG+) subrecipients were required to present outcomes of their project at least two times annually to their local CoC. OEO presented an annual ESG outcomes report to VT BoS CoC.
3. CoC staff provided PIT, HIC, subpopulation data and any annual homeless data reports to the ESG recipient to inform the Consolidated Plan updates about population needs.
4. Information was provided for Con Plan updates through VT DHCD (CDBG) & VHCB (HOME) - as well as the VT Housing Finance Agency (CoC Board) who completed the Con Plan's most recent housing needs assessment - attended VCEH meetings and consulted on investments/strategies to address homelessness. Vermont's action plan sets priority areas & targets based on CoC feedback. General Assistance emergency housing program data is provided by State to inform the Con Plan.

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 gender:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	
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.	
5.	Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	No
6.	Other. (limit 150 characters)	

You must select a response for elements 1 through 5 in question 1C-3.

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, Local Liaisons & State Coordinators.	
	NOFO Section VII.B.1.d.	

Describe in the field below:

1.	how your CoC collaborates with youth education providers;
2.	your CoC's formal partnerships with youth education providers;
3.	how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4.	your CoC's formal partnerships with SEAs and LEAs;
5.	how your CoC collaborates with school districts; and
6.	your CoC's formal partnerships with school districts.

(limit 2,000 characters)

1/5. VT-500 BoS CoC collaborates with youth education providers through a SEA representative (VT Agency of Education-AOE staff) who attends BoS CoC Board & committees (Youth Homelessness Prevention Planning Committee-YHPPC, PIT) meetings, as well as through LEA homeless liaisons who represent school districts at, and participate in, the 11 local/regional CoCs.

3. VT-500 BoS CoC collaborates with SEA through VT AOE staff who participate in CoC Board meetings, CoC committees (YHHPC, PIT count Committee), and the Vermont [Interagency] Council on Homelessness. AOE participates in VT Covid-19 Homeless Response Team meetings facilitated by the ESG Recipient/Coordinated Entry Lead (VT Agency of Human Services). AOE shares aggregate data on homeless households with children & youth, reported by LEAs to inform CoC assessment of community need. AOE assists LEAs to refer students & families to CoC Coordinated Entry with technical assistance & trainings. AOE fosters collaboration between service providers & local liaisons (cross-trainings, information sharing, and referrals to school & mainstream resources).

Local/Regional CoCs collaborate with LEAs (who represent school districts and are active members) who connect students and their families who are experiencing homelessness to appropriate service providers, mainstream resources and make referrals to Coordinated Entry to access housing assistance. LEAs attended an annual training on McKinney-Vento obligations,

best practices, and CoC services.

Agencies that operate Head Start programs are members of CoC Board & local CoCs and actively share information with members about accessing services for children under 5 who are in a homeless situation.

2/4/6. VT-500 BoS CoC maintains a formal partnership with the SEA (VT AOE) through a continually active memorandum of understanding (executed April 2018) which details each other's role in the implementation of the VT YHDP Community Plan to prevent & end youth homelessness.

1C-4a.	CoC Collaboration Related to Children and Youth—Educational Services—Informing Individuals and Families Experiencing Homelessness about Eligibility.	
	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 2,000 characters)

Daniel - waiting on 11/5 response from AOE

1C-4b.	CoC Collaboration Related to Children and Youth—Educational Services—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	No	Yes
4.	Early Head Start	No	Yes
5.	Federal Home Visiting Program—(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	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—Annual Training—Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:	
1.	Project staff that addresses safety and 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 safety and 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 2,000 characters)

1. In 2021, the VT-500 BoS CoC developed a series of free, on-demand, online module trainings on best practices including on trauma-informed & culturally appropriate services. Also, the VT BoS and VT Network Against DV/SV conducted a training on sexual harassment in housing provided by the U.S. Attorney General's Office (3/5/21) and VT BoS CoC providers participated in the 2019 Poverty & Opportunity Forum annual conference (4/3/19) featuring trainings on trauma-informed care ("Safe and Sound: Creating a Net of Calm Connection to Buffer the Impact of Trauma" and "Trauma-Informed Places and Spaces"). Victim Service Providers within all of the 11 regional CoCs 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.

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. The VT BoS and VT Network Against DV/SV conducted a training on sexual harassment in housing provided by the U.S. Attorney General's Office (3/5/21). 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 (non-identifiable unique IDs for the master list, client choice regarding at which agency they complete the assessment, and referrals to VSP agencies).

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

VT-500 BoS CoC and the VT Agency of Human Services-AHS (which funds DV/SV Providers and is the Coordinated Entry Lead) collaborated with the VT Network Against Domestic & Sexual Violence (DV/SV) to receive de-identified aggregate data reports from HMIS-comparable databases (Osnium software) operated individually by each of the Domestic & Sexual Violence Service Providers. The de-identified aggregate data reports were used to assess the special needs of DV/SV survivors in the: 1. allocation and reporting of AHS-

HOP (state/federal ESG) funding, which supported the operations of DV/SV congregate emergency shelters throughout the VT BoS CoC; 2. funding determinations and geographic distribution of AHS General Assistance to support emergency temporary motel voucher placements serving survivors in special projects operated by DV/SV Providers; and 3. determination made by VT BoS CoC to dedicate all HUD Emergency Housing Vouchers-EHV allocated to Vermont (99) to serve DV/SV survivors.

The VT Network collected de-identified aggregate DV/SV data from each Victim Service Provider, with the number of survivors experiencing homelessness, and provided it to VT BoS as a part of the annual 2021 Point-in-Time Count of the Homeless. The de-identified aggregate data was also 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-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors—Coordinated Assessment—Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

(limit 2,000 characters)

1 & 3. PRIORITIZE SAFETY/CONFIDENTIALITY - VT-500 BoS CoC, VT Network Against DV/SV and VT Agency of Human Services ensured prioritization of safety & confidentiality for DV/SV survivors thru Coordinated Entry-CE protocols, trainings and partnerships focused on trauma-informed & victim-centered care, with: 1. oversight of VT Network staff on CoC Board (Co-Chair) & committees (CE, PIT, Project Ranking, Strategic Planning); 2. VT Network staff conducting technical assistance/trainings to recipients of DOJ (DV/SV), HHS (PATH/Mental Health/Substance Use/Youth), and ESG (CE/Shelters); 3. required online CoC trainings for all CE Providers, includes DV/SV safety practices designed by VT Network; 4. referrals to statewide DV/SV hotlines & VT 211 (free & confidential services to access community resources); 5. VT BoS ensures client choice, safety & confidentiality for housing/services by including de-identified DV households, with permission, on CE By-Name lists to be prioritized for access; 6. DV/SV Providers within all 11 regional CoCs make referrals to CE Providers to ensure safety planning & coordinate services; VT BoS Providers participated in trainings conducted by VT Network (trauma-informed care, 2019 Poverty & Opportunity Forum, 4/3/19; sexual harassment in housing, U.S. Attorney General's Office, 3/5/21).

2. EMERGENCY PLAN - All VT BoS CoC-RRH/PSH recipients are PHAs which optimize VT CoC & PHA VAWA Emergency Plans to provide seamless coordination & access (funding permitted) to mainstream VT housing resources (HCV/subsidized managed properties) or with a portability process for Survivors to transfer outside of the state. VT BoS members (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.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–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 LGBT 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 to Housing in HUD Programs in Accordance with an Individual’s Gender Identity (Gender Identity Final Rule)?	No

1C-7.	Public Housing Agencies within Your CoC’s Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> 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 2020 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?
Rutland Housing Authority	94%	Yes-HCV	Yes
Vermont State Housing Authority	21%	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 2,000 characters)

1. VT-500 BoS CoC, via the local CoC, engaged with the Rutland PHA to expand homeless preferences & enact a new “Moving-up” preference (8/18/21) for TH, RRH and PSH projects serving persons experiencing homelessness; VT BoS also engaged with the largest Vermont PHA (VT State Housing Authority-

VSHA) thru public CoC discussion (6/15/21) to expand VSHA Homeless Admission Preferences, preceded by requests from key stakeholders: VT Veterans Committee, VT Coalition of Runaway & Homeless Youth Programs, Pathways Vermont (mental health provider/peer organization), and VT Agency of Human Services (ESG-CV CARE vouchers). VSHA subsequently adopted (7/1/21) an expanded “Move-Up Strategy” 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 (veterans), and ESG-CV RRH (VT Agency of Human Services-CARES vouchers serving households impacted by the COVID-19 pandemic).
 VT-500 BoS CoC engaged with the VT State Housing Authority to determine specific population to serve (persons fleeing domestic violence, sexual violence and human trafficking) by new Emergency Housing Vouchers-EHV and how the EHV Service Fees would be distributed (VT Network Against DV/SV) – approved by VT BoS CoC Board (6/15/21) with a MOU executed between VSHA, VT BoS and VT Network (7/8/21).
 VT-500 BoS CoC and VSHA engaged in strategic planning and implementation for the dedication of multiple project-based vouchers to serve persons experiencing homelessness in partnership with CoC-funded PSH projects (Rutland, Washington, Windham, Windsor counties) and non CoC-funded PSH projects (Addison & Windham counties).

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

1C-7c.	Including PHA-Funded Units in Your CoC’s Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC’s coordinated entry process?	Yes
--	-----

1C-7c.1.	Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
	NOFO Section VII.B.1.g.	
	If you selected yes in question 1C-7c., describe in the field below:	
1.	how your CoC includes the units in its Coordinated Entry process; and	
2.	whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.	

(limit 2,000 characters)

1. VT-500 BoS CoC includes both tenant-based (HCV/Mainstream 811/etc.) and project-based (HCV/Mainstream 811/etc.) as part of its Coordinated Entry process for prioritized referrals of persons currently/recently experiencing homelessness to programs operated by the VT State Housing Authority or part of VSHA's Move-Up Strategy/Homeless Preference which also serves non-VSHA programs in coordination with multiple local Service Providers and partner coalitions (VT Network Against DV/SV, VT Coalition of Runaway & Homeless Youth Programs, VT Veterans Committee).

2. VT-500 BoS CoC Coordinated Entry practices are formalized in written agreements with the VT State Housing Authority-VSHA in the form of: a. HUD-approved MOU between the VT-500 BoS CoC, VSHA and VT Network Against DV/SV that dedicates all VT Emergency Housing Vouchers to serve persons fleeing DV/SV/HT and referred from Coordinated Entry Leads in each of the 12 regional areas of the State; b. PBV Housing Assistance Payment contracts with local housing providers for CoC-PSH non-funded programs (Windham Windsor Housing Trust, John Graham Housing & Services) and HAP contracts/CoC match commitment letters for CoC-PSH funded programs (Windham Windsor Housing Trust and Downstreet); and c. VSHA Admin Plan Ch. 4/Move-Up Strategy/Homeless Preference which accesses multiple tenant-based voucher types 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 Programs providers), VSHA CoC-RRH and CoC-PSH, Family Unification Program (serving families/youth), VA-SSVF RRH (serving veterans), and ESG-CV RRH (VT Agency of Human Services-CARES vouchers serving households impacted by the COVID-19 pandemic).

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

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?	Yes
---	-----

1C-7d.1.	CoC and PHA Joint Application—Experience—Benefits.	
	NOFO Section VII.B.1.g.	
	If you selected yes to question 1C-7d, describe in the field below:	
1.	the type of joint project applied for;	
2.	whether the application was approved; and	

3.	how your CoC and families experiencing homelessness benefited from the coordination.
----	--

(limit 2,000 characters)

1. VT-500 BoS CoC coordinated with VT State Housing Authority-VSHA to submit a FFY2019 NOFA/CoC-PSH project application (“A Way Home”– two high needs counties) to serve persons meeting the HUD definition of Chronic Homelessness-DedicatedPLUS, which included CoC-funded services (Housing Case Manager) & CoC-funded rental assistance (security deposits/property damage costs) with PHA-funded project-based vouchers (HCV/Mainstream 811/etc.). A second CoC-PSH (“A Way Home” Program” – two additional high needs counties) expansion project application is being submitted as part of the FFY2021 NOFO.

2. FFY2019 CoC-PSH project application was approved for both the CoC-funded activities and PHA-funded activities (project-based vouchers) to be used as a match for the CoC Program.

3. VT-500 BoS has benefited from the coordination of this CoC/PHA-funded program (“A Way Home”) as it addresses the three CoC-identified goals to ending homelessness (services/subsidies/units) and provides targeted assistance to local areas & subpopulations (chronically homeless, persons with disabling conditions) with the highest needs within VT BoS. VT BoS Providers have benefited by being relieved of providing/documenting the CoC services match. Persons experiencing homelessness have benefited from the “A Way Home” Program because: a. applicants with any eligible disabling condition may be served, not just those meeting limited eligibility/service requirements of other CoC-PSH providers who can provide the required CoC service match (i.e. Mental Health); b. during an ongoing housing crisis, units are pre-identified as part of VSHA contracts established with local housing providers; c. the “A Way Home” Program automatically adheres to Housing First practice of separating disability-related services from housing services; and d. after 12 months, eligible “A Way Home” participants may apply for continued rental assistance and live in a unit/county/state of their choice with a mobile voucher.

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.	
	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
--	-----

1C-7e.1.	Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program–List of PHAs with MOUs.	
	Not Scored–For Information Only	

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
---	-----

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA

Vermont State Hou...

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

Name of PHA: Vermont State Housing Authority

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	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

1C-9.	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 2021 CoC Program Competition.	8
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 2021 CoC Program Competition that have adopted the Housing First approach.	8
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-coordinated entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

As the sole 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; conducts an annual evaluation and community survey of

Coordinated Entry; and holds monthly Coordinated Entry Provider and Implementation meetings to review policies, procedures, as well as current/best practices. 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 income, history of victimization, history of substance use/abuse, or criminal record - except restrictions imposed by federal, state, or local law or ordinance (lifetime sex offender registry, etc.). CoC Recipients of CoC-RRH and CoC-PSH also ensures adherence to Housing First referrals through internal policies, procedures, practices, and inquiries with the local Coordinated Entry Provider and CoC if questions or issues present themselves.

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes
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1C-10.	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 2,000 characters)

1. VT-500 BoS CoC uses multiple street outreach (SO) methods to locate persons experiencing unsheltered homelessness. SSVF conducts SO in all 251 Vermont towns to identify homeless veterans with referrals to Coordinated Entry & housing (veterans & mainstream). 5 PATH providers & Pathways VT (Housing First Program) conduct SO to persons experiencing chronic homelessness (CH). PIT Count includes localized SO in all 11 local CoC regions with innovative methods: shelter guests help, churches, food shelves, community meals, and partnerships with mental health providers & plain-clothed police officers to SO at encampments and other unsheltered areas.

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

3. VT BoS conducts regular SO on an ongoing basis, with each method carried out by different providers & regions of the CoCs. PIT Count SO occurs annually in January during non-pandemic years. During Covid-19 pandemic, most people living on the street resided in ESG-CV funded motels with connected outreach & services.

4. SO is tailored to the following subpopulations least likely to request

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

1C-11.	Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to prevent the criminalization of homelessness in your CoC's geographic area:

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	No
5.	Other:(limit 500 characters)	

1C-12.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.i.	

	2020	2021
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.”	479	793

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes

2. Private Insurers		
3. Nonprofit, Philanthropic	Yes	Yes
4. Other (limit 150 characters)		

You must select a response for elements 1 through 3 in question 1C-13.

1C-13a.	Mainstream Benefits and Other Assistance—Information and Training.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:	
1.	systemically providing 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.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

1. VT-500 BoS CoC (VT BoS) supports program staff to remain current with information on mainstream benefits & other resources by providing email notifications & links to trainings about available resources; regular updates on mainstream resources changes via CoC email listserv, CoC-wide & local CoC community meetings with State staff who present on updates & changes to mainstream benefit application processes.

2. VT BoS disseminates information on mainstream resources and other services through monthly statewide & local meetings and partnerships with Statewide programs to connect directly to projects and their participants. The CoC's website includes information and a new training initiative was launched that specifically includes a module on connecting clients with benefits. VT Dept. of Mental Health (CoC Board member), oversees VT SOAR & VT PATH services including provision of online provider trainings & works in partnership with VT BoS to increase access to SSI/SSDI & other benefits.

3. CoC projects and the coordinated entry (CE) assess for health care enrollment and make referrals to Vt Health Connect, the state health insurance marketplace and Medicaid. Shelter staff and housing navigation staff support this process which ensures a high level of insurance coverage. Case managers from CoC Project or partner service agency help connect with health centers & follow-up on any appeals to insurance denials.

4. VT BoS requires CoC Program-funded projects to work with local, State and non-HUD federally funded resources to connect people to mainstream benefits which includes helping them understand what resources they can access with their Medicaid or other health coverage. Vermont's Chronic Care Initiative, State Field Directors and Community Health Teams support care coordination for more complex cases. Field Directors participate in local CE Partnership and CoC meetings which supports strong coordination.

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC’s coordinated entry system:	
1.	covers 100 percent of your CoC’s geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

(limit 2,000 characters)

1. VT-500 BoS Coordinated Entry (CE) covers 100% of the CoC geographic area through 11 local CoC Partnerships, which include a CE lead agency & assessment/referral partners (access points). CE written agreements & policies specify roles and responsibilities, including intake/assessment, uniform referrals for connecting those experiencing homelessness to services/housing, & participant information protocol.

2. VT BoS CE referral partners ensure persons who are not directly connected to a homeless provider have access to services/housing. CE partners include: police/libraries/churches; service agencies; street outreach teams; VT 211 (statewide); PRIDE Center (LGBTQ+); and VT ADRC & VT Center for Independent Living/Councils on Aging assists elderly or disabled persons with referrals to CE. Interpretive, deaf & translation services are known to all CE partners to remove access barriers. Youth outreach/diversion services reach youth who are least likely to apply for assistance. Advertised expansion of GA Emergency Housing during COVID increase CE flow by over 50% reaching households not formerly receiving assistance.

3. 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.

4. 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 outreaches all households to schedule an assessment within 3 days of referral receipt, to provide people the opportunity to complete the housing assessment within one week of referral to the CE.

1C-15.	Promoting Racial Equity in Homelessness–Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	Yes
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	Yes
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	No
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	Yes
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

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.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	No
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.	Yes
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

FY21 has been a time of transition for the VT-500 BoS. Hired our first executive director and upgraded an administrative position from “support specialist” to “program coordinator.” This additional capacity will allow us to more fully engage in strategic activities for the CoC including designing and implementing a response to racial and ethnic disparities of those experiencing homelessness including:

- Deepen our understanding of the data, both upstream from homelessness (discrimination in the rental housing market and eviction proceedings) and in the homelessness shelter and service networks. Utilize HUD’s “CoC Analysis Tool: Race & Ethnicity.” Engage CoC members and the public at-large on this data.
- Ensure that CoC members, board member, staff and local service and housing providers have access to diversity and equity training (first two session are in November 2021).
- Convene staff members, program residents, and community stakeholders to review policies and procedures for practices that may result in disparities.
- Continuously examine the coordinated entry processes, including complex service needs and housing matching tools to determine any potential disparate impact by race/ethnicity.
- Increase efforts to have Racial minorities participate in the CoC’s planning and policy work.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

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.	22	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	3	0
3.	Participate on CoC committees, subcommittees, or workgroups.	3	0
4.	Included in the decisionmaking processes related to addressing homelessness.	3	0

5.	Included in the development or revision of your CoC's local competition rating factors.	3	0
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1C-17.	Promoting Volunteerism and Community Service. NOFO Section VII.B.1.r.	
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Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	
6.	Other:(limit 500 characters)	

You must select a response for elements 1 through 5 in question 1C-17.

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
	NOFO Section VII.B.1.q.	
	Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:	
1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

(limit 2,000 characters)

1. People living unsheltered were brought inside through increase availability of non-congregate shelter beds, outreach workers to help access and remove barriers to entry. The GA temporary housing program was modified to move away from categorical eligibility, allowing for more Vermonters to qualify for motel vouchers. Additional waivers and rule variances were implemented to reduce barriers to entering shelter.

2. Congregate emergency shelters were assessed on ability screen, quarantine and isolate guests, point in time counts of hyper-vulnerable guests, ability to expand bed counts, access to supplies, sanitation efforts, planning for staffing shortages, connections with health care providers, and street outreach efforts. As needed, funds to purchase HEPA filter air cleaners were given and all were supplied with soap, hand sanitizer, cleaning supplies, PPE, and thermometers. Shelter bed capacity was reduced, non-congregate shelters were opened and hours of operation were extended in many programs. Shelters received COVID-19 supplemental funding to support implementing requirements and guidelines for hygiene promotion, sanitation, and social distancing. Funding helped expanding or relocating community-based shelter operations, add staffing with hazard pay and training to plan and respond to the crisis, and new or expanded essential services for non-congregate guests. Public Health guidance and protocols included training; Isolation/Quarantine housing including transportation in partnership with local ambulance services.

3. Transitional Housing projects for Veterans, DV and Youth received training and technical assistance in partnership with the VT Department of Health to

implement safety protocols. Additional resources, changes in guidance and protocols were disseminated on weekly calls and alternative housing for isolation and quarantine due to COVID was established including transportation for guests was provided in partnership with local ambulance services.

1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

Local COVID homeless response teams were developed in the earliest weeks of the pandemic to facilitate rapid action, new partnerships and coordinated planning. These teams included various members of local CoCs, but also Federally Qualified Health Centers, free clinics, local Vermont Department of Health offices. Shelter and housing providers now have local working relationships to respond in partnership. The connections built during the response are in place and can be leveraged for future public health emergencies to allow for quick distribute and sharing of resources, guidance, etc. particularly in the early response days when information would be evolving. The teams created local and State-level connections to activate response and even included the ability to conduct meal delivery to homeless Vermonters while State and local responses are in place for future emergencies.

Public health guidance and protocols for providers included infection prevention training from the VT Department of Health on how to implement universal infection prevention methods, including through shelter administration, vaccination and testing, masking, physical distancing, and facility operations. Our local response included development of a system for positive case to cross-reference addresses for shelters and lodging establishments used by GA so that risk assessment can start immediately with appropriately steps when it is known that there is a positive case or close contact who is experiencing homelessness and is in a shelter or motel. This supports contact tracing and appropriate facility response. These new systems and capacity are now in place for the next emergency

The VT Department of Health in consultant with State OEO office has established Homeless Health Care Capacity Building Grants under it's CDC's Rural Health Equity program. These grants will build on the new partnerships established and support future and ongoing planning and collaboration at the local and state level.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

- | | |
|-----------|----------------------------|
| 1. | safety measures; |
| 2. | housing assistance; |

3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

1. Safety: ESG-CV funding went to emergency shelters and transitional housing providers to support expanded activities and costs, such as implementing requirements and guidelines for hygiene promotion, sanitation, and social distancing.
2. ESG-CV recipient, OEO, consulted with CoC ESG-CV funding plan. OEO co-chairs the Housing Recovery Workgroup, coordinating the state-level housing response, with Statewide partners from Housing and Finance Agency, housing development and public housing authorities. ESG-CV funds supported a statewide Rapid Re-housing (RRH) program where more than 300 households received a RRH voucher and support services to exit homelessness into permanent housing. CARES vouchers were prioritized through the CE process.
3. CoC coordinated with ESG-CV recipient to create a referral path for people needing eviction prevention to the State Housing Authority’s statewide CARES-funded eviction prevention program prior to ERAP establishment. ESG-CV staff offered training on the eviction moratorium & eviction prevention. More than \$6m, to over 20 agencies, supported ERAP Housing Stability Service grants to help people access eviction prevention resources. Funding opportunity was distributed through CoC listserv and members.
- 4/5. Healthcare and Sanitary supplies - All projects received healthcare and sanitary supplies. Supplies included soap, hand sanitizer, cleaning supplies, PPE, and thermometers. ESG-CV funds implemented requirements and guidelines for hygiene promotion, sanitation, and social distancing. Capital improvements/public health mitigation grants funds were available for air quality improvements and to purchase HEPA filter air cleaners. VT Dept of Health contracts with homeless shelter and health centers provide surveillance testing and vaccination outreach and clinics at shelter and lodging establishments.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

1. CoC coordination with mainstream health entities occurred through the State of VT/Office of Economic Opportunity (OEO) Director who served as the Housing Team Lead on the State Emergency Operations Center, until it was demobilized. The Center coordinated housing needs related to isolation and quarantine, as well as comprehensive COVID 19 coordination with the VT Dept of Health Health(VDH) Co Operations Center (HOC) and Vermont Emergency Management (VEM) – from contact tracing, care coordination, testing, vaccination, and outbreak prevention and response. Systems were put in place

to quickly identify any household experiencing homelessness who tests as COVID positive, special rapid response protocol and teams which include OEO, homeless shelter/service providers and VDH are convened as needed based on a public health risk assessment. The State Emergency Operations Center supported logistical needs for any facility wide quarantine, when necessary – including laundry service, meal delivery, MAT delivery, additional staffing or security, etc. Special vaccination clinics were offered onsite at shelters and motels through partnerships with trusted entities. Homeless shelter/service providers and their health care partners received a vaccine allocation to fully meet the need with this special population and support Vermont’s equity goals.

2. The CoC partnered with the Vermont Department of Health (VDH) to provide guidance, group and 1to1 training and technical assistance to emergency shelters, including sites-specific support on infection prevention and control. Safety supplies were provided to all projects. VDH and shelters were a CDC pilot site and continued to use the Infection Control Inventory and Response Tool. Additional resources, guidance and protocols were disseminated as they became available. More than 20 hours of training have been provided in concert with VDH, including through the bi-weekly COVID Homeless Response calls or “office hours” with OEO.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:	
1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

1. VCEH communication tools were pivotal and the use of the VCEH listserv was a primary means of communication to homeless service providers during the COVID-1 pandemic. It was relied on by OEO to distribute information and notice important meetings and training. Weekly (now bi-weekly) calls were held to pass on information and answer questions about implementing safety precautions. Representatives from Vermont’s Department of Health provided information and guidance about safety measures on those calls, as well as offering trainings on topics such as cleaning, PPE, and other prevention strategies.

2. VCEH distributed information via its listserv, ensuring that homeless service providers were aware of important information about changes to restrictions and program on an ongoing basis. Weekly statewide calls with State agencies and VT Dept of Health (now bi-weekly) were held to discuss the impacts of changing local restrictions and efforts to increase access to testing and vaccines for those experiencing homelessness.

3. Communication for vaccine implementation happened through over 50+ calls with individual agencies and network providers, weekly calls with VT Department of Health vaccination branch, the CoC’s listserv and flyers/notifications at shelters and housing projects to alert staff and participants

of vaccine opportunities. One VCEH co-chair was on the vaccination implementation advisory board specifically to support VCEH/CoC participation in the prioritization and roll out of vaccinations. Special vaccination clinics were offered onsite at shelters and motels through partnerships with trusted entities. Homeless shelter/service providers and their health care partners received a vaccine allocation to fully meet the need of this special population and support Vermont’s equity goals.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.
	NOFO Section VII.B.1.q.

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

Congregate and non-congregate shelter providers, as well as local homeless response teams were instrumental in identifying individuals and families experiencing homelessness for the COVID-19 vaccination. Weekly statewide COVID calls were held to disseminate information to providers, including best practices to identify those eligible for the vaccine and support access to clinics. State of VT/Office of Economic Opportunity (OEO)’s Director met with the vaccine branch twice a week for three months to support planning and coordinate communication between local providers, vaccination branch, and local VT Dept of Health (VDH) offices to maximize the vaccine allocation. Prioritization for the use of the J&J vaccine was given, to support a one & done approach to vaccination.

Hotel/motel-based service providers coordinated and supported logistics, including outreach and planning – knocking door to door, engaging clients on concerns, providing education and information. In some cases, providing incentives for vaccines.

VT-500 BoS CoC identification steps & implementation starting April 2021 was:

- Convene and support: a. Trusted Homeless Service Partner; b. Outreach, registration, logistics, coordination with lodging establishment; c. Trusted Health Care Provider (such as Free Clinic, local FQHC, Hospital); d. deliver the vaccine; e. Local VDH District Staff; f. public health education, materials
- Reach every shelter and lodging establishment
- Provide training, outreach materials, vaccination allocation
- Promote “wellness” day approach to clinics – include various other onsite supports and services available to all regardless of vaccine participation
- Schedule carefully, during times when guests are onsite
- One week prior promote onsite with 1:1 outreach, flyers posted and under doors, communication with lodging staff
- Identify vaccine champions – vaccinate staff or peers who can share their experience
- Allow vaccination for all guests onsite, regardless of age or known underlying condition

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

VT-500 BoS CoC prepared for and responded to the influx of needs from people fleeing domestic and sexual violence by working with partners who were receiving federal COVID-19 relief funds to allocate portions of funding to this subpopulation and outreach victim service providers (VSP) about available funds to provide services, housing and supports for longer term housing stability. The VT Network Against Domestic and Sexual Violence (VNADSV) was awarded COVID-19 Rapid Resolution Housing Initiative funding to provide one-time/short-term flexible financial assistance to help households exit quickly to safe housing.

Domestic and Sexual violence shelters adapted as needed to provide a safe environment for shelter guests. Shelters were able to reduce the number of guests in shelter as the state offered motel rooms for all households experiencing homelessness. Households fleeing domestic or sexual violence that were in need of space to quarantine/isolate were offered a placement by the state designated for households for quarantine and isolation. CARES CRF funds were awarded to Vermont Housing Conservation Board to provide capital funding for shelters, to make COVID safety improvements – such as ventilation, walls/separation, etc. Many DV shelters received these funds to make shelter space feel as safe as possible for fleeing households with young children or family members with medical conditions. All hotlines remained open during the pandemic and advocacy continued. Advocates reported that the complexity of cases and level of violence experienced during this time has been much greater.

VT-500 BoS CoC voted to dedicate 99 Emergency Housing Vouchers administered by the VT State Housing Authority to domestic/sexual violence victims and survivors to be used to secure independent community based apartments with long-term rental subsidy to help survivors quickly exit unsafe situations they may have remained in during ‘stay home, stay safe’ lockdown orders.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

VT-500 BoS CoC increased the Coordinated Entry (CE) housing navigation

services at 16 organizations by doubling the investment of State funds and allocating \$1 million of federal Covid Relief Funds to serve presenting households, which more than doubled during Covid. This was followed by contracts for wrap-around services at non-congregate housing sites (motels/hotels) to expedite assessment and referral. Emergency Rental Assistance Program (ERAP) Housing Stability Services have further supported the surge in service demands and housing requests to help people find and keep housing placements.

Barriers to quick intake and referral were modified by the CoC approval of a temporary verbal consent policy for the duration of the COVID-19 pandemic. While the policy is in place CE providers can accept verbal consent to share data in HMIS, allowing for households to be prioritized as quickly as possible. Providers are required to follow up with households to gather written consent when it is safe to do so.

VT -500 BoS CoC adopted new prioritization for ESG CARES RRH project, which prioritized families with children and then hyper-vulnerable households (65+ and/or chronic health condition) for this resource. A case-by-case waiver process related to housing sustainability plans was established for households screening into long-term assistance, reducing barriers for referrals to RRH.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions–essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	09/01/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	09/15/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:
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- | | |
|----|--|
| 1. | the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and |
| 2. | 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 2,000 characters)

1. When reviewing projects during the rank & rate process, the VT-500 BoS CoC considered 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 a disabling condition(s). 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.

2. The VT-500 BoS CoC priority to serve people with severe needs & vulnerabilities was incorporated into the review, rate and rank process by assigning scoring tool points for projects that demonstrate a commitment to these populations. A threshold for all new and renewal projects is a 'Commitment to Housing First Practices' to ensure that vulnerable and high needs persons were prioritized and not screened out. Only CoC project applications that met this threshold were considered for funding. New and Renewal projects which will serve the hardest-to-house populations (those with severe needs or vulnerability) received points to help increase their overall project score and offset points that may be lost in performance measures (e.g. employment income at exit, poor utilization). Renewal CoC projects that admit people with zero income and disabilities were awarded points. Projects dedicated to serving survivors of domestic violence have lower performance targets for exits to permanent housing and rapid exit because of the additional challenges faced by this population. All CoC projects must receive referrals from the Coordinated Entry implementation, which includes policies and a needs assessment to prioritize serving homeless households with the most severe needs first.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

Describe in the field below how your CoC:

- | | |
|----|--|
| 1. | obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications; |
| 2. | included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process; |
| 3. | rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented). |

(limit 2,000 characters)

1. VT-500 BoS CoC project rating and rank policies and forms were posted and reviewed to identify improvements to the process. This process occurred through distribution of materials through the CoC listserv, posting on the public CoC website and during discussions as part of open CoC Board meetings. Draft tools with revisions were publically posted prior to CoC Board vote so input could be given.
2. VT-500 BoS CoC Project Ranking committee is comprised of members without a conflict of interest for the projects being considered for annual CoC Program funding. An open invitation is made requesting volunteers to participate in the committee. The CoC did not receive any interest from a person of an under-represented race for the FY21 CoC Project Ranking committee; as part of larger efforts to identify and address racial disparities, committee membership and recruitment will continue to be reviewed.
3. VT-500 BoS CoC reviewed system-wide data to identify and start planning to address racial equity issues in access to resources and attaining positive outcomes. This year the CoC 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-500 BoS CoC Coordinated Entry process controls all referrals for CoC project openings; Coordinated Entry Providers complete an annual evaluation of flow and outcomes; the VT-500 BoS CoC and the CoC Coordinated Entry committee identify changes to improve the process and ensure equitable access.

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criterion below.	
	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;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

1. VT-500 BoS CoC (VT BoS) projects were reviewed for performance, current best practices, and utilization of beds/funding to determine if funding levels should be maintained, reduced, or fully reallocated. Performance data was discussed with project applicants and reviewed by Project Ranking Committee with consideration of CoC priorities, best practices, selection criteria and reallocation opportunities. Each year, including FY21, 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 chronically underperforms 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 VT BoS reallocation activities have been voluntary as part of a strategic planning process to improve project quality, performance and participant outcomes.

2. Yes, VT BoS identified two projects through its performance review process that were lower performing based on review of outcomes and utilization rates, as well as talking with local CoCs about current needs.

3. Yes, a CoC recipient voluntarily reallocated partial funds from two projects due to underspent funds caused by a lack of housing units within the CoC geographic area.

4. Not applicable. Underperforming or lower priority projects WERE partially reallocated in the FY21 competition to address unspent funds.

5. VT BoS communicates the reallocation process to projects through public posting and annual review of the CoC-approved reallocation policy. If a project were to face involuntarily reallocation, they would receive written notice from CoC staff with an option to appeal. To date, all project reallocations have been voluntary and based upon spending rates & local community need discussions.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	Yes
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1E-5.	Projects Rejected/Reduced–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

1.	Did your CoC reject or reduce any project application(s)?	Yes
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	10/20/2021

1E-5a.	Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

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.	10/20/2021
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1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B.	
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	Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	
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You must enter a date in question 1E-6.

2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

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

Enter the name of the HMIS Vendor your CoC is currently using.	WellSky Community Services
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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 2021 HIC data into HDX.	05/07/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

1. have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and
2. submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.

(limit 2,000 characters)

1. 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 2020 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.

2. The VT-500 BoS CoC (dba VT Coalition to End Homelessness) and the HMIS Lead (ICA) ensure 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 through a contract between the VT BoS CoC HMIS Lead (ICA) and the VT Network Against Domestic & Sexual Violence (State DV Coalition) to analyze the comparable database with monthly meetings held to review data requirements in compliance with federal standards, including, but not limited to, four main topics: 1. workflow, 2. data elements, 3. data standards and 4. reporting.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	416	107	274	88.67%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	172	39	100	75.19%
4. Rapid Re-Housing (RRH) beds	793	14	564	72.40%
5. Permanent Supportive Housing	348	0	214	61.49%
6. Other Permanent Housing (OPH)	24	0	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 2,000 characters)

1 & 2. 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 meet to discuss PSH not in HMIS (VA-VASH) and develop a plan for VASH data entry, including training of identified VASH providers; ALL – the VT-500 BoS CoC HMIS Lead (ICA) offers all non-participating TH, RRH, and PSH projects technical support & training to ease the burden and improve accuracy of HMIS data entry.

2A-5b.	Bed Coverage Rate in Comparable Databases.	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC’s geographic area.	57.50%
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2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

- | | |
|----|--|
| 1. | steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and |
| 2. | how your CoC will implement the steps described to increase bed coverage to at least 85 percent. |

(limit 2,000 characters)

1 & 2. 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 projects operated by Victim Services Providers - CoC Board (VT Coalition to End Homelessness), HMIS Lead (Institute for Community Alliances), Collaborative Applicant and the Vermont Network Against Domestic & Sexual Violence (CoC Co-Chair) will meet to identify & remove barriers for data entry into the comparable database (Osnum) for DV/SV providers; ALL – the VT-500 BoS CoC HMIS Lead (ICA) offers all non-participating TH, RRH, and PSH projects technical support & training to ease the burden and improve accuracy of HMIS data entry.

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 January 15, 2021, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2B-1.	Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
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2B-2.	Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes
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2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2C-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	NOFO Section VII.B.5.b.	

Describe in the field below:	
1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses 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 or to end homelessness for individuals and families.

(limit 2,000 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 (AHS) 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 (GA Program Motel Voucher Program, Mental Health bed stays, LGBTQ+ youth factors with Foster Care Program, VT Governor’s Opioid Coordination Council, Peer Orgs, Early Childhood Council with pediatricians who screen for housing instability).

2. VT BoS best practices & strategies to address 1st time homelessness incorporates a holistic approach with identification of household strengths & risk factors and connections to financial support & voluntary case management services. RESOURCES - childcare referrals; food shelves; transportation vouchers; 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). INCOME/EMPLOYMENT – CoC providers connect at-risk persons with VT Dept. of Labor (Career Resource Centers/state WIOA plan to remove barriers to employment), VT Dept. of DAIL (Vocational Rehab & senior employment services); 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-WRJ (CoC Board member) coordinates statewide strategies to assist Veterans remain

stably housed with self-directed services.

3. VT BoS Strategic Planning Committee and CoC Co-Chairs are responsible entities overseeing strategies to reduce 1st time homelessness.

2C-2.	Length of Time Homeless–Strategy to Reduce.	
	NOFO Section VII.B.5.c.	

Describe in the field below:

1.	your CoC’s strategy to reduce the length of time individuals and persons in families remain homeless;
2.	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 2,000 characters)

1. VT-500 BoS CoC strategy to reduce Length of Time (LOT) 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 (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 LOT homeless with HMIS data review and by interviewing people with the housing assessment prioritization tool to gather location & LOT 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 LOT 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 LOT homeless.

3. VT-500 BoS (dba VT Coalition to End Homelessness) Strategic Planning Committee and CoC Co-Chairs are responsible entities overseeing strategies to reduce the LOT people are experiencing homelessness.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:

1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1 & 2. VT Safe Havens are non-existent. VT-500 BoS CoCs strategy to increase permanent housing (PH) rate of people residing in or leaving shelter (ES), transitional housing (TH), rapid rehousing (RRH), and permanent supportive housing (PSH) includes: engaged largest VT PHA (VT State Housing Authority-VSHA) with public CoC discussion (6/15/21) to expand Homeless Admission 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; VSHA subsequent adoption (7/1/21) of expanded “Move-Up Strategy” to serve currently/recently homeless persons residing in state-funded RRH (VT Rental Subsidy Program), Domestic Violence Transitional Housing (DOJ and ESG-funded), YHDP-RRH (HHS & CoC-funded youth projects administered by VT Coalition of Runaway & Homeless Youth Program), VSHA CoC-RRH (all homeless subpopulations), VSHA CoC-PSH (chronic homelessness), Family Unification Program (at-risk & homeless families/youth), VA-SSVF RRH (veterans), and ESG-CV RRH (VT Agency of Human Services-CARES vouchers serving households impacted by the COVID-19 pandemic and previously resided in the emergency shelter/VT GA Motel Program). PHA-CoC-VT Network MOU to serve persons fleeing DV/SV (including from ES/TH/RRH/PSH) with new Emergency Housing Vouchers (99). New PSH projects developed by VSHA (30 households connected to CoC-funded services) and Rutland Housing Authority (10 households) with dedicated project-based vouchers to serve persons experiencing homelessness. Landlord Liaison Project expansion with ESG-CV funds. \$53.8m CARES Act funding for 389 new/rehabilitated homes thru VHCB (CoC Board Member), 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.

2C-4.	Returns to Homelessness–CoC’s Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

Describe in the field below:

1.	how your CoC identifies individuals and families who return to homelessness;
2.	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 2,000 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 the Housing Vermont (statewide Eviction Prevention

Initiative review of over 3,000 units which reviewed reasons for evictions & 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. VT-500 BoS CoC Strategic Planning Committee and CoC Co-Chairs are the responsible entity to oversee strategies to reduce returns to homelessness.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

Describe in the field below:

1.	your CoC's strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families 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 2,000 characters)

1. VT-500 BoS CoC strategy to increase employment income: helping people apply for and secure job, on-going staff education on vocational programs/services & mainstream employment resources with projects linking people to resources for job connections/readiness skills & resources to reduce job barriers with service connections. PSH & RRH project service partners provide direct employment services or through partnerships such as vocational assessment, 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 & sharing best practices between local CoCs.

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 challenges faced by participants. Project staff link people to community resources to assist with child care & transportation to remove common barriers to sustaining employment. OUTREACH to strengthen partnerships with/involvement of employment-focused initiatives such as VT Dept. of Labor

(Career Resource Centers/state WIOA 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. People are also being connected to free classes and trainings funded by American Rescue Plan funds in partnership with VT State College System and VT Dept of Labor to increase ability to secure employment income by increasing skills.

3. Responsible Organization: VT-500 BoS Strategic Planning Committee with CoC Co-Chairs.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:	
1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

(limit 2,000 characters)

1. VT-500 BoS encourages partnerships between local CoCs and private employers/employment organizations by sharing local job fairs info with participants & providers and maximizing employment services offered directly by VT CoC Program-funded project (PSH & RRH) or through referral partnerships. Partner agencies cultivate relationships with local employers & staffing agencies and where resources are available provide job training, trials and on the job support to help people return to work. The VT Dept. of Labor is an active VT BoS member and provides information about system-wide efforts to connect private agencies with homeless service providers. Local CoC strategies to increase access to employment opportunities include partnerships with VT Dept. of DAIL/VocRehab, Municipal Chambers of Commerce, VT Adult Learning; in-house employment programs; employer outreach; offering; Employment 101 training programs; Workforce Development support staff dedicated to serving homeless households; and participation in a job club organized by local Mental Health Agencies.

2. VT-500 BoS local CoC partners provide connections to free classes and trainings funded by American Rescue Plan funds in partnership with VT State College System and VT Dept of Labor to increase ability to secure future employment income by increasing skills. The United Way and Designated Mental Health Agencies, as well as a local college to link PSH participants to education options & supports to return to work. Organizations work with local non-profits seeking volunteers, as well as provides opportunities for folks to engage in volunteer work. CoC-PSH provider organizations maintain employment specialists available to CoC-PSH participants to help act on employment priorities and conduct outreach to potential employers. HUD VASH (PSH) participants are connected to the VA & veteran service organizations, and the State Employment Office works closely with VASH case workers to provide referrals & vocational assistance.

2C-5b.	Increasing Non-employment Cash Income.	
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NOFO Section VII.B.5.f.

Describe in the field below:

1.	your CoC’s strategy to increase non-employment cash income;
2.	your CoC’s strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase non-employment cash income.

(limit 2,000 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. Responsible Organization: VT-500 BoS CoC (VT Coalition to End Homelessness in the role of primary decision-making body), Strategic Planning Committee and the CoC Co-Chairs.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
 - Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
 - FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
 - 24 CFR part 578

3A-1.	New PH-PSH/PH-RRH Project—Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) 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
---	-----

3A-1a.	New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	No
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	Yes

3A-2.	New PSH/RRH Project—Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	-----

3A-2a.	Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

1.	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	Yes
2.	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	Yes

3A-3.	Leveraging Housing Resources–Leveraging Healthcare Resources–List of Projects.	
	NOFO Sections VII.B.6.a. and VII.B.6.b.	

If you selected yes to question 3A-1. or 3A-2., use the list feature icon to enter information on each project you intend for HUD to evaluate to determine if they meet the bonus points criteria.

Project Name	Project Type	Rank Number	Leverage Type
VSHA CoC-PSH ("AW...	PSH	8	Housing
VSHA CoC-PSH (PTH...	PSH	11	Healthcare
VSHA CoC-PSH (PTH...	PSH	9	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? VSHA CoC-PSH ("AWH") FY21 Expansion (Reallocation)

2. Select the new project type: PSH

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

4. Select the type of leverage: Housing

3A-3. List of Projects.

1. What is the name of the new project? VSHA CoC-PSH (PTH) FY21 Expansion (CoC Bonus)

2. Select the new project type: PSH

3. Enter the rank number of the project on your CoC's Priority Listing: 11

4. Select the type of leverage: Healthcare

3A-3. List of Projects.

1. What is the name of the new project? VSHA CoC-PSH (PTH) FY21 Expansion (Reallocation)

2. Select the new project type: PSH

3. Enter the rank number of the project on your CoC's Priority Listing: 9

4. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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 2,000 characters)

n/a

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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
--	----

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

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 2,000 characters)

n/a

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:
- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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.	

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 2021 Priority Listing.

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

You must click “Save” after selecting Yes for element 2 PH-RRH or Joint TH/RRH Component to view questions 4A-4 through 4A-4f.

4A-2.	Number of Domestic Violence Survivors in Your CoC's Geographic Area.	
	NOFO Section II.B.11.	

1.	Enter the number of survivors that need housing or services:	1,918
2.	Enter the number of survivors your CoC is currently serving:	1,373
3.	Unmet Need:	545

4A-2a.	Calculating Local Need for New DV Projects.	
	NOFO Section II.B.11.	

Describe in the field below:

1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-2 element 1 and element 2; and
2.	the data source (e.g. comparable database, 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 2,000 characters)

1. The number of DV survivors in need was calculated 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 and Sexual Violence (VNADSV) in motels, DV/SV shelters, and TH in FY20; 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 through the DV transitional housing preference in FY20; and total persons receiving a RRH-DV voucher in FY20. The number currently being served was calculated by taking the sum of those in needs and subtracting those persons listed as survivors of DV/SV on the CoC's HMIS CE master list still waiting for assistance.

2. DCF (GA utilization data) VNADSV (FY20 utilization data), ICA (HMIS CE data), VSHA (HCV data, RRH-DV voucher 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 RRH. Low vacancy rates exacerbate other barriers for survivors in gaining housing. An estimated 99% of survivors of domestic violence have experienced economic abuse; this often leads to housing barriers due to poor credit/lack of credit, poor landlord references, lack of access to financial resources. Additionally, service providers lack capacity to both quickly and consistently integrate survivor households into the CE system and to provide supportive services that need to be paired with rental assistance.

4A-3.	New Support Services Only Coordinated Entry (SSO-CE) DV Bonus Project–Applicant Information.	
	NOFO Section II.B.11.(c)	

Enter in the chart below information about the project applicant applying for the new SSO-CE DV Bonus project:

1. Applicant Name	State of Vermont
2. Project Name	Coordinated Entry Partnership DV Expansion

4A-3a.	New SSO-CE Project–Addressing Coordinated Entry Inadequacy.	
	NOFO Section II.B.11.(c)	

Describe in the field below:

1.	how the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, sexual assault, or stalking; and
2.	how the proposed project addresses inadequacies identified in element 1. above.

(limit 2,000 characters)

1. The current VT-500 BoS CoC Coordinated Entry (CE) process is inadequate to meet the full needs of survivors of domestic violence, dating violence or stalking due to the lack of funds to fully staff both victim service providers (VSP) as CE assessment partners and lead agencies in areas of the state where VSPs are not assessment partners. VT-500 BoS's CE process has some VSPs as assessment or referral partners offering victims fleeing DV/SV to complete the housing assessment with a specialized service provider. People completing the housing assessment with their current service provider are 1) more likely to participate; and 2) more quickly connected to housing help. VSPs that plan to become or are currently assessment partners face a lack of funding to meet staffing needs. When a VSP is a referral partner, they provide a referral or a "warm hand-off" for victims to complete the assessment with the local CE lead agency and where there is a lack of adequate staffing capacity they are unable to quickly respond to referrals. Supporting Victim Service Providers to participate as full assessment partners or increasing the lead agencies capacity to do so will ensure that victims have seamless and quick access assistance. The goal is to ensure survivors have equitable access to Coordinated Entry throughout the CoC.

2. The proposed project addresses the staffing gap by funding additional staff at either VSPs or lead agencies to increase assessment capacity for victims CoC-wide. Where resources are a barrier for agencies to more fully participate in Coordinated Entry, the CE Committee has identified that the DV Bonus project could be used to fund Coordinated Entry Intake and Assessment Services. If awarded, the DV Bonus project will provide partners intake and assessment and navigation staff to provide coordinated entry services for all victims. Funded lead agencies will work closely with local VSP to make assessment and intake services trauma-informed and victim-centered.

Applicant Name
This list contains no items

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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).

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	CE Assessment Too...	11/04/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No		
1E-1. Local Competition Announcement	Yes	Local Competition...	11/04/2021
1E-2. Project Review and Selection Process	Yes	Project Review an...	11/04/2021
1E-5. Public Posting–Projects Rejected-Reduced	Yes	Public Posting -...	11/04/2021
1E-5a. Public Posting–Projects Accepted	Yes	Public Posting - ...	11/04/2021
1E-6. Web Posting–CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: CE Assessment Tool 1C-14 VT-500

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Local Competition Announcement VT-500

Attachment Details

Document Description: Project Review and Selection Process VT-500

Attachment Details

Document Description: Public Posting - Projects Rejected-Reduced VT-

500

Attachment Details

Document Description: Public Posting - Projects Accepted VT-500

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/16/2021
1B. Inclusive Structure	11/04/2021
1C. Coordination	Please Complete
1C. Coordination continued	Please Complete
1D. Addressing COVID-19	11/04/2021
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	11/04/2021
2B. Point-in-Time (PIT) Count	11/04/2021
2C. System Performance	11/04/2021
3A. Housing/Healthcare Bonus Points	11/05/2021
3B. Rehabilitation/New Construction Costs	09/16/2021

FY2021 CoC Application	Page 61	11/05/2021
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3C. Serving Homeless Under Other Federal Statutes	09/16/2021
4A. DV Bonus Application	11/05/2021
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

CE Assessment Tool (1C-14)

Attachment Coversheet

VT-500 Coordinated Entry Assessment Tool

SECTION 1: HOUSEHOLD INFORMATION

First, I'm going to collect some basic information about you and the people in your household.

- Who is living with you or will be part of your household? ⓘ
- Is anyone known by another name? ⓘ
- Can you please tell me the relationship to you, the social security number, and date of birth for each person? ⓘ
- Does anyone in your household identify as transgender or gender non-conforming?
 - a. What is the gender of each person in your household? ⓘ
 - Male Female Transgender Male to Female Transgender Female to Male
 - Gender Non-Conforming
- Which category or categories describe <use name of each person>? ⓘ
 - Black or African American American Indian or Alaska Native Asian
 - Native Hawaiian or Other Pacific Islander White
- Is anyone of Hispanic, Latino or Spanish origin? ⓘ
- Does <use name of each person> have health insurance? ⓘ
 - a. *If yes*, what type of health insurance? ⓘ
- Have you or any adult in your household ever served in the U. S. Armed Forces or Military? ⓘ
 - Are you currently receiving services from a veteran-serving organization?
 - Yes No Don't Know Declined
 - Do you have military ID? *If Yes*, What type?
 - Military Card ID DD-214 VA ID DD-2
 - May we make a referral to the VA for services on your behalf? Yes No

Thanks for all those answers. The next question may help us get you support that best fits your needs.

- Do you or anyone in your household have a disabling condition, such as alcohol and/or drug abuse, a chronic health condition, a mental health problem, HIV/AIDS, a developmental disability or another physical disability? You don't need to be receiving services or treatment to have a disability. ⓘ

Read questions and record answers in the chart below – drop down options in electronic form.

First and Last Name ⓘ	Aliases ⓘ	Relation to Head of Household ⓘ	SSN ⓘ	Date of Birth ⓘ	Gender ⓘ	Race ⓘ	Hispanic Y/N ⓘ
		SELF					

First and Last Name ⓘ	Health Insurance Y/N ⓘ	Health Insurance Type ⓘ	Veteran Y/N ⓘ	Disabling condition Y/N ⓘ

SECTION 2: DISABILITY INFORMATION

ONLY COMPLETE if someone in the household has a disabling condition. IF NOT, skip to Section 3.

Now I'm going to ask you some additional information about the people in your household with a disabling condition. Remember, you don't have to answer any questions you don't want to. Your answers may help us figure out how to best to help you. I also want to make sure that you know any specific information about a disability is only used to determine if you might be eligible for a program, not to deny you services or housing for which you are eligible.

Note: documentation is not required: client's self-report is sufficient for this assessment.

From previous question on disabling conditions, fill in chart with name of person/people with disabling conditions. Then read questions below and record answers in the chart.

First and Last Name ①	Type of disability (1 type per line) ①	Is this expected to be long-term and continue indefinitely, and affect your/their ability to live independently? ①	<u>Currently receive services or treatment?</u>	<u>If not, Would you/they like help getting connected with services or treatment?</u>

- What type of disabling condition do you/does <use name of each person with disabling condition> have?
- Is the disabling condition expected to be long-term and continue indefinitely, and affect your/their ability to live independently?
 - a. Do you/they currently receive services or treatment for the disabling condition?
 - b. If not, would you/they like help getting connected with services or treatment?
- Do you have any urgent medical conditions right now that you need help with? _____
If yes, make appropriate referrals

SECTION 3: DOMESTIC & SEXUAL VIOLENCE HISTORY

Read the following questions and record the "YES" answers in the chart below, including the name of the person.

Please note that these questions have changed to include all family violence.

- Has a partner or someone you were living with ever made you afraid for your safety, hurt you or controlled your decisions? ⓘ YES NO

If YES, a. When did it occur? ⓘ

Within the past 3 months 3-6 months ago 6-12 months ago More than 1 year ago

b. Are you currently fleeing, attempting to flee, or afraid to return to where you are staying? ⓘ

- Has anyone in your household, besides you, had a partner that made them afraid for their safety, hurt them or controlled their decisions? ⓘ YES NO

If YES, a. When did it occur? ⓘ

Within the past 3 months 3-6 months ago 6-12 months ago More than 1 year ago

b. Are they currently fleeing, attempting to flee, or afraid to return to where they are staying? ⓘ

Name (First and Last) ⓘ	When did it occur? ⓘ	Currently fleeing? Y/N ⓘ

- Would you or anyone else in your household like to speak with a domestic or sexual violence advocate for support? _____

If yes, make appropriate referrals.

SECTION 4: CURRENT HOUSING SITUATION & CHRONIC HOMELESSNESS INFORMATION

This Section must be completed for each Adult.

Thanks for your answers so far. Now, I want to review your current housing situation with you. I'm also going to ask some questions about your housing history. I want to remind you that we do not discriminate. Our goal is to help identify the housing and support that best fits your needs. Answering these questions accurately may help us.

If Housing Referral Form is on hand, Review & Update: I see that you've been staying <place from referral form>; is that still where you are staying?

- Where did you stay last night? Please be specific. ⓘ

Homeless Situation

- Emergency shelter, including motel/hotel paid for with a voucher or host home for youth
 - Place not meant for habitation (cars, parks, abandoned or condemned buildings, camps, streets)
 - Safe Haven
- Do you recall the approximate date you started staying here? ⓘ _____

Institutional Situation

- Hospital or non-psychiatric medical facility
- Jail/prison/Juvenile detention facility
- Psychiatric hospital bed/facility
- Foster Care home/residential program
- Long-term care facility or nursing home
- Substance abuse treatment facility or detox

Temporary or Permanent Housing Situation

- Other Residential project, re-entry housing or recovery housing (not homeless specific)
- Motel/hotel paid by self, friend or family member (no voucher)
- Transitional Housing for homeless persons (including youth)
- Staying or living in a friend's room, apartment or house
- Staying or living in a family member's room, apartment or house
- Renting a house /apartment
 - If renting, Do you live in subsidized housing or have your own voucher right now?*
(RRH: VRS, CoC RRH, HOP RRH; VASH; Grant & Per Diem (GPD) Transition in Place (TIP);
Section 8 HCV (includes FUP, 811); Public Housing Unit; Other Permanent Housing for Homeless
Persons (Shelter + Care), Other Subsidy)
 - Yes: _____
- In a home owned by the individual/family STOP – Make referral to homeownership center

Diversion Questions for those who did not stay in Emergency Shelter last night (Optional)

- Are you able to stay <insert name of location> again tonight? Yes No Maybe
If no or maybe, Is there anything that could be done so that you can stay there again?

- Do you have friends or family in the area that you can stay with safely tonight? Yes No

Screen for Imminent or At-Risk of Homelessness

- Have you been threatened with being kicked out of your current place? Yes No
- Have you been served a legal eviction notice (from the court) that says you must leave?
 Yes No **DATE (if known):** _____
- Have you received a notice (from your landlord) that your right to stay or occupy your current housing will be terminated?
 Yes No **DATE (if known):** _____
- Are you staying with family or friends because you are unable to afford your own place? Yes No
- Is your current living situation overcrowded? Meaning, there too many people in your current location (>1.5 pp/room)? Yes No
- Have you moved 2 or more times in the past 60 days? Yes No
- Has the housing that you are currently living in been condemned by a health officer? Yes No

➤ How long have you been staying where you are staying now? (Update, if needed) ⓘ

<input type="checkbox"/> One night or less	<input type="checkbox"/> One month or more, but less than 90 days
<input type="checkbox"/> Two to 6 nights	<input type="checkbox"/> More than three months, but less than one year
<input type="checkbox"/> One week or more, but less than one month	<input type="checkbox"/> One year or longer

➤ If less than 90 days, on the night before this was where you stayed, where did you stay **AND** approximately when did you start staying there? ⓘ

Emergency Shelter/Motel with Voucher
Start Date: _____

Place not meant for habitation (car, tent, street, etc.)
Start Date: _____

Other: _____

Start Date: _____

➤ Have you ever experienced homelessness before (this time?) Yes No

➤ How many times have you been living outside, on the streets, in a motel paid for with a voucher or in an emergency shelter or safe haven in your life? _____

a. When were you homeless and how long were you homeless each time (include shelter stays)? (list year & length of episode in months)

Staff answer the following from responses above:

➤ Total # of months/years spent in literal homelessness

Less than 1 year 12 – 23 mos. 24 – 60 mos. (2-5 years) More than 60 mos. (5 years)

➤ Regardless of where they stayed last night, # of times the client has spent in literal homelessness (including current episode) in the past 3 years: ⓘ _____

➤ Total # of months spent in literal homelessness (including current episode) in the past 3 years: ⓘ _____

SECTION 5: INCOME AND EMPLOYMENT INFORMATION

Now, I want to understand your current income and employment situation.

If you can provide a copy of your pay stubs or benefit statements, we may be able to serve you more quickly.

Do you or any adults in your household have income from any source, including cash and non-cash income? ⓘ

Yes No

If yes,

Cash Income ⓘ	Monthly Amount ⓘ	Which Adult? ⓘ
Alimony/other spousal support	\$	
Child support	\$	
Earned Income (employment/ self-employment)	\$	
General Assistance (GA)	\$	
Other	\$	
Pension/Retirement Income from job	\$	
Private disability insurance	\$	
Social Security Retirement	\$	
SSDI	\$	
SSI	\$	
Reach Up (TANF)	\$	
Unemployment	\$	
VA disability: non-service connected pension	\$	
VA disability: service connected compensation	\$	
Worker's comp	\$	
Total Cash Income	\$	

Non-Cash Income ⓘ	Yes/No ⓘ	Monthly Amount ⓘ (optional)	Which Adult? ⓘ
3SquaresVT - SNAP (Food Stamps)		\$	
WIC		\$	
Reach Up (TANF) child care services		\$	
Reach Up (TANF) transportation services		\$	
Other Reach Up (TANF) services		\$	
Section 8/public housing rental assistance		\$	
Other:		\$	
Other:		\$	
Other:		\$	
Other:		\$	
Total Non-Cash Income		\$	

Do you expect any changes in your household income in the next month? Yes No

If Yes, what changes? _____

If you are receiving Reach Up (TANF), do you expect any changes to this benefit in the near future? Yes No

If Yes, what changes? _____

Would you like to explore a way to increase your income? Yes No

If yes, Do you think employment training or support could help you to increase your income? Yes No

If yes, Would you like help with finding employment, training or education opportunities? _____

If no, Are you interested in other benefits? _____

SECTION 6: LEVEL OF ASSISTANCE

Now that I have your income and employment information, I'm going to ask you some questions to help better understand your housing needs.

A.	Screen for Short-Term Assistance (up to 3 months)			
Score:				
INCOME	Do you have enough income right now to afford ongoing rent for your own apartment?	Yes = 1, No = 0		Total Income Score = _____ <input type="checkbox"/> Score >=1 Criteria Met
	Do you expect that your income will increase in the next three months, such as a raise from a job or pending military, retirement, alimony, child support or social security benefits? (<i>reasonable expectation</i>)	Yes = 1, No = 0		
	In the next three months, will you receive subsidized housing? (<i>documentation</i>)	Yes = 1, No = 0		
	In the next three months, will your household's expenses decrease enough so that you can afford your own apartment?	Yes = 1, No = 0		
OPPORTUNITY	Have you ever been asked to leave an apartment you leased or given legal papers asking you to leave? If yes, How many times? _____	Score 1 if No (exclude pending)		Total Opportunity Score = _____ <input type="checkbox"/> Score >=1 Criteria Met
	Do you have any good or fair landlord references?	Yes = 1, No = 0		
	Do you have your next housing secured? (<i>documented offer from landlord for a unit</i>)	Yes = 1, No = 0		
SITUATION	From previous questions: First episode of homelessness in the past three years?	Yes = 1, No = 0		<input type="checkbox"/> Score = 1 Criteria Met
<input type="checkbox"/> CHECK HERE IF ALL OF THE LAST COLUMN IS CHECKED – ALL CRITERIA ARE MET; HOUSEHOLD SCREENS IN FOR SHORT-TERM ASSISTANCE				
B.	Screen for Long-Term Assistance (more than 24 months)			
Score:				
	Has the client been experiencing literal homelessness (this episode) continuously for one year or more OR has had at least 4 episodes of literal homelessness in past 3 years (previously determined)?	Yes = 1, No = 0		<input type="checkbox"/> Score >=1 Household Screens In for Long-term Assistance
	Does the client have a disability that is expected to be long-term, and substantially impairs their ability to live independently over time (previously determined)?	Yes = 1, No = 0		
	Has the client been asked to leave an apartment or given legal papers asking to leave 3 or more times , including anything that is pending (previously determined)? (only for leased housing)	Yes = 1, No = 0		
C.	Screen for Medium-Term Assistance (3-24 months)			
<input type="checkbox"/> CHECK HERE IF THE HOUSEHOLD DID NOT SCREEN IN FOR SHORT-TERM OR LONG-TERM ASSISTANCE; SCREENS FOR MEDIUM-TERM ASSISTANCE				

SECTION 7: COMPLEX SERVICE NEEDS

ONLY COMPLETE if Household screened into Medium-Term or Long-Term Assistance (A or B) in preceding section. If Not, Skip to Section 8.

Your responses to these next questions will help us understand the kind of services you might need in housing. Like before you don't have to answer, but it will help identify housing support for you.

A. Have you or a member of your household:

- Had one or more trips to an emergency room in the past year?
- Stayed in a psychiatric facility (lifetime)?
- Stayed in a substance abuse treatment facility (lifetime)?
- Stayed in another type of residential facility, including a nursing home or group home (lifetime)?
- Been in foster care at age 16 years or older?
- Been homeless before the age of 25 (adults and heads of household only)?
- Stayed in a prison, jail, or correctional facility (lifetime)?
- Ever had an IEP or 504 plan in school? (*Note: may need to revisit Section 2: Disability Information*)

For Adults and Heads of Household only:

- Ever been kicked out or asked to leave housing (any housing, not just housing where you were on a lease) because of a real or perceived mental health or substance use issue?
- Never had a job where you were employed for at least three consecutive months?
- Never been named on a rental lease before?
- If head of household is under the age of 25, are you or your partner currently pregnant?*
- Is there anyone who do not have a high school diploma or GED and is not currently working on getting one? If yes, are you interested in support with high school completion?*
- Do you currently have an open case with Family Services (DCF Child Welfare)?
- Have you been without any cash income (including from a job or not from a job) for the entire past year?
- Do you or anyone in your household have an urgent medical need (e.g., severe infection, acute diabetic condition, mental health crisis)

B. *Staff member answer from information collected earlier (pages 3 and 4):*

- Currently unsheltered or living in a place unfit for human habitation (e.g., car, tent)*
- Survivor of domestic/sexual violence*
- Adult household member living with a chronic condition that is disabling*
- Parenting youth or young adult (head of household is under the age of 25)*
- Unaccompanied 16 or 17 year old (youth is presenting as their own head of household)*

C. *Staff member answer from information collected earlier (page 5)*

_____ *Mark "0" for less than 12 months of homelessness; "1" for 12 – 23 months of homelessness; "2" for 24–60 months (2-5 years) of homelessness; "3" for more than 60 months (5 years) of homelessness*

Total boxes checked above in sections A and B: _____

Score for length of time homeless in section C: _____

Total Complex Service Needs Score (add the two above): _____

SECTION 8: HOUSING PREFERENCES AND BARRIERS (OPTIONAL)

The next set of questions will help us gather information about your housing preferences and barriers.

- Where would you like or prefer to live (county/towns)?

- Do you currently owe any back rent? Yes No
- Do you currently owe money on any utility bills? Yes No
- Do you have friends or family members with whom you can stay for a short period of time, or who can lend you money? Yes No
- Would you say you have trouble getting or keeping an apartment? Yes No

If yes, was it for any of the following reasons? (Check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Need an accessible unit | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Credit history | <input type="checkbox"/> Uneven or no employment |
| <input type="checkbox"/> Criminal record | <input type="checkbox"/> Eviction history |
| <input type="checkbox"/> Not enough income | <input type="checkbox"/> Issues with house guests: _____ |
| <input type="checkbox"/> Bad or no landlord references | <input type="checkbox"/> Discrimination- Please explain: _____ |
| <input type="checkbox"/> My pets or animals: _____ | <input type="checkbox"/> Number of children/people in the household |
| <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Other: _____ |
- What would you say is your biggest barrier to getting or keeping housing right now?

PLEASE COMPLETE THE FINAL TWO PAGES WITH CLIENT; THEN FILL OUT THE RELEASE OF INFORMATION.

SECTION 9: REFERRALS AND SERVICE CONNECTIONS

We are almost done! Thanks again for being patient as we fill this out together. I have just a few final questions.

- Have you worked with any service agencies or programs in the last 12 months?

Agency: _____ Agency: _____
Program Name: _____ Program Name: _____
With whom did you work? _____ With whom did you work? _____

- Are you currently on Probation or Parole? Yes No

Parole Officer's Name: _____ Telephone #: _____
Type of offense: _____

- Are all school aged children enrolled in school? Yes No

If yes, are there any enrollment or attendance difficulties? _____

If yes, what school do they attend? _____

Can I contact the local homeless liaison at your school? Yes No

<http://education.vermont.gov/homeless-children-and-youth>

- Are you interested in any of these other resources we can provide to help you?

- | | |
|--|--|
| <input type="checkbox"/> Adult education classes | <input type="checkbox"/> Health insurance |
| <input type="checkbox"/> Budget and financial counseling | <input type="checkbox"/> Employment Search/Training |
| <input type="checkbox"/> Finding a primary care provider | <input type="checkbox"/> Food/Food Shelf/3SquaresVt Benefits |
| <input type="checkbox"/> Information about substance use | <input type="checkbox"/> Information about counseling |
| <input type="checkbox"/> Support groups | <input type="checkbox"/> Other: _____ |

REFERRALS FOR CLIENT *Go back to pages 1, 2 3, 6 and 10 and check for any soft referrals (Reminder: Questions that lead to referrals are dash underlined.)*

- | | | |
|---|---|--|
| <input type="checkbox"/> Emergency Housing: Shelter or Overflow Motel | <input type="checkbox"/> Support Services: _____ | |
| <input type="checkbox"/> Financial assistance | <input type="checkbox"/> Help to find housing | <input type="checkbox"/> Mediation/Help for Housing Conflict |
| <input type="checkbox"/> VA | <input type="checkbox"/> Services or Treatment for Disability | <input type="checkbox"/> DV/SV Advocate |
| <input type="checkbox"/> Urgent Medical Care | <input type="checkbox"/> Homeownership Center | <input type="checkbox"/> Employment, Training or Education Opportunities |
| <input type="checkbox"/> Benefits | <input type="checkbox"/> Utilities | |

Service Referrals (Note: These are soft referrals, meaning the assessor can provide client with agency information or call agency with the client present):

Housing Next Steps: _____

Housing Navigator Assigned? Yes, Name: _____ No

Next Appointment with: _____

**SECTION 10: CLIENT CONTACT INFORMATION & SELF-CERTIFICATION
(OPTIONAL)**

Primary Contact Person: _____

The best way to reach me is: _____

The best time to reach me is: _____

Any of the following can be used to safely reach me:

Mobile Text

Cell Phone

Email

 Facebook Messenger

 Home Phone

 Work Phone

If you cannot reach me, you can contact this person instead: _____

Contact information for this my Alternative Contact: _____

I give certify that the information I have provided is true, accurate and complete.

Signature: _____ Date: _____

Signature: _____ Date: _____

Local Competition Announcement (1E-1)

Attachment Coversheet

- Accepting project applications posting – 9/1/2021 and 9/30/21 (DV Bonus re-issued unclaimed funds)
- Project tool posting final – 9/15/2021
- New Project Scoring tool with points
- Renewal Project Scoring tool with points

Vermont Coalition to End Homelessness

VCEH NEWS ABOUT ▾ HUD COC FUNDING WHAT WE DO ▾ LOCAL CONTINUA OF CARE ▾ POINT-IN-TIME ▾ TRAINING ▾ RESOURCES

September 1, 2021

FY2021 HUD Continuum of Care Notice of Funding Opportunity. 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 Request for Proposals for projects to be submitted for funding to HUD for the FY21 Competition. Application deadlines are in the RFP, link posted below.

Applications will be submitted to the Vermont State Housing Authority (VSHA), 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 service priorities with a priority to serve vulnerable populations including individuals & families experiencing chronic homelessness, persons fleeing domestic violence and families with children under 18.

Links related to NOFO on CoC funding:

- [The HUD CoC NOFO](#)
- [A summary of the NOFO highlighting priority content and key changes](#)
- [Request for Proposals \(RFP\) for projects to address housing and service priorities for households experiencing homelessness including deadlines for project submission](#)
- [VCEH policies related to HUD CoC funding](#)

August 24, 2021

Vermont Coalition to End Homelessness

- VCEH NEWS
- ABOUT ▾
- HUD COC FUNDING
- WHAT WE DO ▾
- LOCAL CONTINUA OF CARE ▾
- POINT-IN-TIME ▾
- TRAINING ▾
- RESOURCES

September 30, 2021

Request for Proposals – New Projects Reissued for Domestic Violence Bonus Funding

Any eligible entity that wishes to submit a RFP application for a NEW Domestic Violence project during this year's U.S. Housing & Urban Development (HUD) Continuum of Care (CoC) Notice of Funding Opportunity must complete the form linked below (only one Project request per RFP form) and submit it electronically before **NOON EST Wednesday, October 6, 2021** to the Vermont State Housing Authority (Daniel Blankenship: daniel@vsha.org).

The Vermont Balance of State Continuum of Care (VT BoS CoC) is accepting proposals for projects to be submitted for funding consideration to the U.S. Department of Housing & Urban Development (HUD) with Federal Fiscal Year (FFY)2021 Continuum of Care (CoC) Program funding.

Applications must be submitted to the Vermont State Housing Authority, who serves as the Collaborative Applicant for the Vermont Balance of State Continuum of Care (VT BoS CoC) geographic area. The VT BoS CoC geographic area encompasses all counties in Vermont, except Chittenden.

We are seeking proposals to address housing and service priorities for households fleeing domestic (individual or families with children under 18).

- [REQUEST FOR PROPOSALS – NEW PROJECTS; REISSUE FOR DOMESTIC VIOLENCE BONUS FUNDING](#)

September 15, 2021

REMINDER – REQUEST FOR PROPOSALS (RFP) – New and Renewal Projects

FY21 HUD Continuum of Care Funding Available for Vermont Balance of State Projects

On September 1, 2021 the Vermont Coalition to End Homelessness, as the Vermont Balance of State Continuum of Care (VT BoS CoC – VT-500), issued a Request for

FY2021 HUD Continuum of Care x +

helpingtohousevt.org/hudfunding/fy2021-hud-continuum-of-care-notice-of-funding-opportunity/

Vermont Coalition to End Homelessness

VCEH NEWS ABOUT ▾ HUD COC FUNDING WHAT WE DO ▾ LOCAL CONTINUA OF CARE ▾ POINT-IN-TIME ▾ TRAINING ▾ RESOURCES

September 15, 2021

REMINDER – REQUEST FOR PROPOSALS (RFP) – New and Renewal Projects

FY21 HUD Continuum of Care Funding Available for Vermont Balance of State Projects

On September 1, 2021 the Vermont Coalition to End Homelessness, as the Vermont Balance of State Continuum of Care (VT BoS CoC – VT-500), issued a Request for Proposals (RFP) for projects to be submitted for consideration to receive funding by HUD under the FY21 Competition.

Below are links to the RFP and the final Project Scoring Tools, new and renewal, which include scoring and rating criteria for each project type.

- [FY21 VT BoSCoC NEW Project Scoring Tool, Final](#)
- [FY21 VT BoSCoC RENEWAL Project Scoring Tool, Final](#)

The RFP, which includes all application deadlines and VCEH policies related to HUD CoC Program funding, can be found in the September 1 posting below.

September 1, 2021

FY2021 HUD Continuum of Care Notice of Funding Opportunity. 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 Request for Proposals for projects to be submitted for funding to HUD for the FY21 Competition. Application deadlines are in the RFP, link posted below.

Applications will be submitted to the Vermont State Housing Authority (VSHA), 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 service priorities with a priority to serve vulnerable populations including individuals & families experiencing

3:38 PM
9/15/2021



FFY2021 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)	15	
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	
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 8	

Continue to page 2

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

	Points	Awarded
6. Is outreach plan adequate and clear to engage target population?	Up to 6	
7. 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 6	
8. Does project description clearly describe how linkages to employment and other mainstream income resources and services will occur?	Up to 8	
9. Is the proposed budget clear and realistic to carryout proposed activities?	Up to 6	
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?	1	
3. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units)	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	
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

FFY2021 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	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 – 20)	Points	Awarded
1. Permanent Supportive Housing (Shelter Plus Care)	15	
2. Rapid Re-Housing (RRH)	20	
3. Joint Transitional Housing(TH and RRH (TH-RRH)	15	
4. SSO (Youth)	15	
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: 35% or more	6	
% of households that have increased non-employment income: 25 % to 34%	4	
% of households that have increased non-employment income: 20 % to 24%	2	
% of households that have increased non-employment income: 19% or less	0	
2. Employment: % participants with increased employment income: 25% or more	5	
Employment: % participants with increased employment income: 19% to 24%	3	
Employment: % participants with increased employment income: 11% to 18%	1	
Employment: % participants with increased employment income: 10% 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	
% of households who returned to homelessness at exit: 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	
% of households who had zero income at entry: 10-29%	1	
% of households who had zero income at entry: 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	
% of households who have a disabling condition of long-duration at entry: 10-19%	1	
% of households who have a disabling condition of long-duration at entry: Less than 10%	0	
EXITS TO PERMANENT HOUSING		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
7. Housing Stability: % HHs maintaining or exiting to permanent housing: 80% or more	9	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 79%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% or less	0	
8. Safety of survivors improved: 90% or more		
Safety of survivors improved: 80% to 89%	3	
Safety of survivors improved: 79% or less	0	
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
9. Housing Stability: % HHs maintaining or exiting to permanent housing: 90% or more	15	
Housing Stability: % HHs maintaining or exiting to permanent housing: 76% to 89%	10	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 75%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% 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	
Rapid Exit: Average days from project entry to residential move-in: 46-90 days	4	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	3	
Rapid Exit: Average days from project entry to residential move-in: 121-150 days	2	
Rapid Exit: Average days from project entry to residential move-in: 151+ 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: 30 days or less	6	
Rapid Exit: Average days from project entry to residential move-in: 31-60 days	4	
Rapid Exit: Average days from project entry to residential move-in: 61-90 days	3	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	2	
Rapid Exit: Average days from project entry to residential move-in: 120+ 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 monthly	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

Project Review and Selection Process (1E-2)

Attachment Coversheet

- New project scoring tool (blank)
- Renewal project scoring tool (blank)
 - All questions were objective
 - System performance measures (purple rows) – 44 pts of 100 total = 44%
- One renewal project scoresheet with actual points awarded
- Final project list with scores

FFY2021 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)	15	
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	
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 8	

Continue to page 2

Project Name: _____

Project Agency: _____

Evaluator Name: _____

Date: _____

	Points	Awarded
6. Is outreach plan adequate and clear to engage target population?	Up to 6	
7. 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 6	
8. Does project description clearly describe how linkages to employment and other mainstream income resources and services will occur?	Up to 8	
9. Is the proposed budget clear and realistic to carryout proposed activities?	Up to 6	
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?	1	
3. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units)	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	
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

FFY2021 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	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 – 20)	Points	Awarded
1. Permanent Supportive Housing (Shelter Plus Care)	15	
2. Rapid Re-Housing (RRH)	20	
3. Joint Transitional Housing(TH and RRH (TH-RRH)	15	
4. SSO (Youth)	15	
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: 35% or more	6	
% of households that have increased non-employment income: 25 % to 34%	4	
% of households that have increased non-employment income: 20 % to 24%	2	
% of households that have increased non-employment income: 19% or less	0	
2. Employment: % participants with increased employment income: 25% or more	5	
Employment: % participants with increased employment income: 19% to 24%	3	
Employment: % participants with increased employment income: 11% to 18%	1	
Employment: % participants with increased employment income: 10% 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	
% of households who returned to homelessness at exit: 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	
% of households who had zero income at entry: 10-29%	1	
% of households who had zero income at entry: 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	
% of households who have a disabling condition of long-duration at entry: 10-19%	1	
% of households who have a disabling condition of long-duration at entry: Less than 10%	0	
EXITS TO PERMANENT HOUSING		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
7. Housing Stability: % HHs maintaining or exiting to permanent housing: 80% or more	9	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 79%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% or less	0	
8. Safety of survivors improved: 90% or more		
Safety of survivors improved: 80% to 89%	3	
Safety of survivors improved: 79% or less	0	
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
9. Housing Stability: % HHs maintaining or exiting to permanent housing: 90% or more	15	
Housing Stability: % HHs maintaining or exiting to permanent housing: 76% to 89%	10	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 75%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% 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	
Rapid Exit: Average days from project entry to residential move-in: 46-90 days	4	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	3	
Rapid Exit: Average days from project entry to residential move-in: 121-150 days	2	
Rapid Exit: Average days from project entry to residential move-in: 151+ 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: 30 days or less	6	
Rapid Exit: Average days from project entry to residential move-in: 31-60 days	4	
Rapid Exit: Average days from project entry to residential move-in: 61-90 days	3	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	2	
Rapid Exit: Average days from project entry to residential move-in: 120+ 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 monthly	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

FFY2021 VT BoS CoC RENEWAL Project Scoring Tool

Project Name: VSHA S+C SW Project Agency: VSHA
 Evaluator Name: Full Scoring Committee - Consensus Date: 10/8/2021

FINAL

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	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 – 20)	Points	Awarded
1. Permanent Supportive Housing (Shelter Plus Care)	15	15
2. Rapid Re-Housing (RRH)	20	
3. Joint Transitional Housing(TH and RRH (TH-RRH)	15	
4. SSO (Youth)	15	
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	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: 35% or more	6	6
% of households that have increased non-employment income: 25 % to 34%	4	
% of households that have increased non-employment income: 20 % to 24%	2	
% of households that have increased non-employment income: 19% or less	0	
2. Employment: % participants with increased employment income: 25% or more	5	
Employment: % participants with increased employment income: 19% to 24%	3	
Employment: % participants with increased employment income: 11% to 18%	1	
Employment: % participants with increased employment income: 10% or less	0	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	10
% of households who returned to homelessness at exit: 11% or higher	5	

Continue to page 2

Project Name: VSHA S+C SW Project Agency: VSHA
 Evaluator Name: Full Scoring Committee - Consensus Date: 10/8/2021

	Points	Awarded
SEVERITY OF NEEDS and VULNERABILITY		
5. Admission Income:		
% of households who had zero income at entry: 30% or higher	2	
% of households who had zero income at entry: 10-29%	1	1
% of households who had zero income at entry: 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	2
% of households who have a disabling condition of long-duration at entry: 10-19%	1	
% of households who have a disabling condition of long-duration at entry: Less than 10%	0	
EXITS TO PERMANENT HOUSING		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		N/A
7. Housing Stability: % HHs maintaining or exiting to permanent housing: 80% or more	9	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 79%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% or less	0	
8. Safety of survivors improved: 90% or more	6	
Safety of survivors improved: 80% to 89%	3	
Safety of survivors improved: 79% or less	0	
PROJECTS NOT DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		
9. Housing Stability: % HHs maintaining or exiting to permanent housing: 90% or more	15	15
Housing Stability: % HHs maintaining or exiting to permanent housing: 76% to 89%	10	
Housing Stability: % HHs maintaining or exiting to permanent housing: 65% to 75%	5	
Housing Stability: % HHs maintaining or exiting to permanent housing: 64% or less	0	
RAPID EXIT - LENGTH OF TIME HOMELESS		
PROJECTS DEDICATED TO SURVIVORS OR RUN BY VICTIM SERVICE PROVIDERS		N/A
10. Rapid Exit: Average days from project entry to residential move-in: 45 days or less	6	
Rapid Exit: Average days from project entry to residential move-in: 46-90 days	4	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	3	
Rapid Exit: Average days from project entry to residential move-in: 121-150 days	2	
Rapid Exit: Average days from project entry to residential move-in: 151+ 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: 30 days or less	6	
Rapid Exit: Average days from project entry to residential move-in: 31-60 days	4	
Rapid Exit: Average days from project entry to residential move-in: 61-90 days	3	
Rapid Exit: Average days from project entry to residential move-in: 91-120 days	2	
Rapid Exit: Average days from project entry to residential move-in: 120+ days	0	0

Continue to page 3

Project Name: VSHA S+C SW Project Agency: VSHA
 Evaluator Name: Full Scoring Committee - Consensus Date: 10/8/2021

	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	4
Part E: Monitoring (Maximum Points - 6)		
1. Drawdown at least monthly	2	2
2. Utilization rate of housing units at least 95% *	1	1
3. Recaptured funds is less than 10% of total award *	2	2
4. Cost effectiveness is at or below \$10,500 per unit/year (Total HUD CoC funds/number of units)	1	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	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	0
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	0
FINAL SCORE (Maximum Points = 100) TOTAL		80
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

VT-500 - VT BoSCoC FY2021 CoC Program Project Ranking
October 27, 2021

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("S+C") FY21 (RNW)	\$1,088,193	1	80
Brattleboro Housing Authority	PSH	BRAHA FY21	\$238,234	2	78
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 RENEWAL (RNW)	\$314,603	3	73
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY21 (RNW)	\$896,024	4	60
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("AWH") FY21 (RNW)	\$239,406	5	n/a
Institute for Community Alliance (ICA)	HMIS	HMIS Renewal	\$59,382	6	n/a
State of Vermont	SSO-CE	Coordinated Entry Partnership Combined (RNW)	\$513,630	7	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("AWH") EXPANSION (REALLOCATION) FY21 (NEW)	\$250,000	8	79
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (REALLOCATION) (NEW)	\$50,000	9	83
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW)	\$62,445	10	n/a
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW)	\$128,215	10	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (COC BONUS) (NEW)	\$105,747	11	83
State of Vermont	SSO-CE	Coordinated Entry Partnership DV Expansion (NEW - DV BONUS)	\$257,235	12	n/a
Planning Grant	Planning	VT BoSCoC Planning FY21	\$140,377	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP RRH FY21 (RNW)	\$416,247	n/a	n/a

FUNDING TYPE - FY21	AMOUNT
Tier 1 (100% ARD) - YHDP)	\$3,711,917
Tier 2 (Remaining ARD + CoC Bonus - YHDP)	\$233,962
DV Bonus	\$257,235
Planning	\$140,377
YHDP	\$967,316
TOTAL	\$5,310,807

Unclaimed DV Bonus	\$36,130
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**VT-500 - VT BoSCoC FY2021 CoC Program Project Ranking
October 27, 2021**

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Washington County Youth Service Bureau/ Boys & Girls Club	TH-RRH - YHDP	VCRHYP TH-RRH FY21 (RNW)	\$238,067	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	SSO - YHDP	VCRHYP LLP FY21 (RNW)	\$116,760	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP HN FY21 (RNW)	\$131,220	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP DIV FY21 (RNW)	\$65,022	n/a	n/a
TOTAL			\$5,310,807		

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

REJECTED or REDUCED PROJECT AMOUNTS - LACK OF AVAILABLE FUNDS

Applicant Name	Project Type	Project Name	Rejected or Reduced Amount	Rank	Score
Institute for Community Alliance (ICA)	HMIS	HMIS Expansion (NEW)	\$62,445	--	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (COC BONUS) (NEW) (partially funded)	\$128,215	--	83
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW) (partially funded)	\$86,351	--	n/a

- The Ranking Committee made decisions using project scores, policy set for renewal project ranking order, authorization from CoC Board to fund non-housing projects and strategic considerations to meet community needs and maximizing application score.

REDUCED PROJECT AMOUNTS - VOLUNTARY REALLOCATION

Applicant Name	Project Type	Project Name	Reduced Amount	Rank	Score
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("S+C") FY21 (RNW)	\$259,361	--	n/a
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY21 (RNW)	\$103,084	--	n/a

- 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.

Public Posting – Projects Rejected-Reduced (1E-5)

Attachment Coversheet

Projects Reduced or Rejected – Individual Notifications

- Email message and Electronic letter for each applicant with reduced or rejected project

Melany Mondello

From: Martin Hahn <mhahn@helpingtohousevt.org>
Sent: Wednesday, October 20, 2021 4:14 PM
To: Sarah Phillips; Kisler, Ari
Subject: FY21 CoC Program Project Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Attachments: FY21 Final CoC Project Notice, AHS.pdf

Sarah and Ari,

Please see attached and thanks for everything.

Martin

Martin Hahn, Executive Director
Vermont Coalition to End Homelessness
PO Box 944
Montpelier 05601
www.helpingtohousevt.org
Cell: 802-595-1232



Vermont Coalition to End Homelessness
P.O. Box 944
Montpelier, VT 05601
www.helpingtohousevt.org

Sent Electronically

October 20, 2021

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

Re. FY21 CoC Final Funding Notice, Vermont Balance of State

Dear Sarah,

Thank you for submitting FY21 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 10/08/21 and 10/20/21 and made the following final determinations of your proposals based upon CoC-approved policies, scoring tools and HUD priorities with objective data derived from APRs, eLOCCS, and other sources. An appeal to the initial project awards was received and reviewed and it has resulted in a change to your project funding.

RENEWAL PROJECT PROPOSALS

SSO-CE: Coordinated Entry Partnership Combined (RNW)

- **Final Award \$513,630**
- **Rank #7** out of 12 (not scored per CoC policy)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

NEW PROJECT PROPOSALS

SSO-CE: Coordinated Entry Partnership Expansion (NEW) (updated amount)

- **Final Award \$190,660**
- **Rank #10** out of 12 (not scored per CoC policy)
- **Reduced Award** - New project expansion requested \$277,011 and was reduced by \$86,351 due to lack of available funds to support all new project applications – final approved amount is as listed above

SSO-CE: Coordinated Entry Partnership DV Expansion (NEW)

- **Final Minimum Award \$227,875 (authorized to submit for up to \$293,365)**

- **Rank #12** out of 12 (not scored per CoC policy)
- **Full Award** – Project was fully awarded funding for new expansion project activities.
- **NOTE:** Recipient asked to increase project application to utilize all DV Bonus, funds total project would be \$293,365, due to no other applicants for this funding source and need for DV services in VT-500 BoSCoC.

All the best,

A handwritten signature in cursive script, appearing to read "Martin Hahn".

Martin Hahn
Executive Director

Melany Mondello

From: Martin Hahn <mhahn@helpingtohousevt.org>
Sent: Wednesday, October 20, 2021 4:16 PM
To: adam.smith@icalliances.org
Subject: FY21 CoC Program Project Funding Notice - VCEH/Vermont Balance of State Continuum of Care
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Adam,

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Sent Electronically

October 20, 2021

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

Re. FY21 Final CoC Funding Notice, Vermont Balance of State

Dear Adam,

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RENEWAL PROJECT PROPOSALS

HMIS: HMIS Renewal (RNW)

- **Final Award \$59,382**
- **Rank #6** out of 12 (not scored per CoC policy)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

NEW PROJECT PROPOSALS

HMIS: HMIS Expansion (NEW)

- **Final Award \$0.00**
- **Rank** – no rank – rejected (not scored per CoC policy)
- **No Award** - New project expansion requested \$62,445 and was rejected due to lack of available funds to support all new project applications – final approved amount is as listed above
- **NOTE:** Funding identified to fill this request from AHS Federal ESG funds, request applicant work with AHS to secure allocation for expanding HMIS

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October 20, 2021

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

Re. FY21 Final CoC Funding Notice, Vermont Balance of State

Dear Daniel,

Thank you for submitting FY21 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 10/08/21 and 10/20/21 and made final determinations of your proposals based upon CoC-approved policies, scoring tools and HUD priorities with objective data derived from APRs, eLOCCS, and other sources. An appeal to the initial project awards was received and reviewed and it has resulted in a change to your project funding.

All final awards are listed below.

RENEWAL PROJECT PROPOSALS

PSH: VSHA COC-PSH (“S+C”) FY21 (RNW)

- **Final Award \$1,088,193**
- **Rank #1** out of 12 (80 out of 100 total points)
- **Reduced Award** - Renewal project was eligible for \$1,347,554 and voluntarily reduced by \$259,361 – final approved amount is as listed above

PSH: VSHA COC-PSH (PTH) FY21 RENEWAL (RNW)

- **Final Award \$314,603**
- **Rank #3** out of 12 (73 out of 100 total points)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

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- **Final Award \$896,024**
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- **Rank #5** out of 12 (not scored per CoC Policy for grants in operation for less than 1 year)
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NEW PROJECT PROPOSALS

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- **Final Award \$250,000**
- **Rank #8** out of 12 (79 out of 100 total points)
- **Full Award** – Project was fully awarded funding for new expansion project activities. Strategic placement to leverage mainstream housing resources and increase community score.

PSH: VSHA COC-PSH (PTH) FY21 EXPANSION (REALLOCATION) (updated)

- **Final Award \$50,000**
- **Rank** – 9 out of 12 – (83 out of 100 total points)
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All the best,



Martin Hahn
Executive Director

Public Posting – Projects Accepted (1E-5)

Attachment Coversheet

Projects Accepted – Individual Notifications

- Email message and Electronic letter for each applicant with accepted project(s)

Public Posting of all project applications list

- Public Posting of full project list - 10/27/21
- Full project list - 10/27/2021

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October 20, 2021

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Vermont Office of Economic Opportunity
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Waterbury, VT 05671

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From: Martin Hahn <mhahn@helpingtohousevt.org>
Sent: Wednesday, October 20, 2021 4:17 PM
To: ddeangelis@brattleborohousing.org
Subject: FY21 CoC Program Project Funding Notice - VCEH/Vermont Balance of State Continuum of Care
Attachments: FY21 Final CoC Project notice, BHA.pdf

David,

Please see attached. I hope all is well.

Martin

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Sent Electronically

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David DeAngelis
Brattleboro Housing Partnership
224 Melrose Street
Brattleboro, VT 05301

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RENEWAL PROJECT PROPOSAL

PSH: "BRAHAFY18 – S+C Renewal"

- **Final Award \$238,234**
- **Rank #2** out of 12 (78 out of 100 total points)
- **Full Award** – Project was fully awarded eligible amount for renewal activities

All the best,

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- **Final Award \$896,024**
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PSH: VSHA COC-PSH (PTH) FY21 EXPANSION (REALLOCATION) (*updated*)

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All the best,



Martin Hahn
Executive Director

FY2021 HUD Continuum of Care Notice of Funding Opportunity



October 27, 2021

CoC Program FY21 Project List Published

The VT-500 – Vermont Balance of State Continuum of Care (VT BoS CoC) Ranking Committee has reviewed all project applications that were submitted for consideration for HUD's FY21 Continuum of Care (CoC) Program Funding.

Follow this link to the CoC Program Project Ranking Final:

[VT-500 BoS FY21 CoC Program Project Ranking – FINAL determination](#)

This list represents the projects that will be submitted to HUD as part of our VT BoS CoC's consolidated application.

Open Meeting on FY21 CoC Application

The Vermont Coalition to End Homelessness as the Vermont Balance of State Continuum of Care will hold a virtual meeting to solicit input and answer questions on our FY21 application to HUD for CoC funding, Tuesday November 9 from 12:00pm-1:00pm:

Join Zoom Meeting

<https://us02web.zoom.us/j/89803803000?pwd=MzQ4Nk5leDhwYnBMWEhLcXl1RHpZdz09>

Meeting ID: 898 0380 3000

Passcode: 243474

One tap mobile

+13017158592,,89803803000#...*243474# US (Washington DC)

Dial by your location, 1 929 205 6099 US (New York)





**VT-500 - VT BoSCoC FY2021 CoC Program Project Ranking
October 27, 2021**

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("S+C") FY21 (RNW)	\$1,088,193	1	80
Brattleboro Housing Authority	PSH	BRAHA FY21	\$238,234	2	78
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 RENEWAL (RNW)	\$314,603	3	73
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY21 (RNW)	\$896,024	4	60
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("AWH") FY21 (RNW)	\$239,406	5	n/a
Institute for Community Alliance (ICA)	HMIS	HMIS Renewal	\$59,382	6	n/a
State of Vermont	SSO-CE	Coordinated Entry Partnership Combined (RNW)	\$513,630	7	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("AWH") EXPANSION (REALLOCATION) FY21 (NEW)	\$250,000	8	79
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (REALLOCATION) (NEW)	\$50,000	9	83
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW)	\$62,445	10	n/a
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW)	\$128,215	10	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (COC BONUS) (NEW)	\$105,747	11	83
State of Vermont	SSO-CE	Coordinated Entry Partnership DV Expansion (NEW - DV BONUS)	\$257,235	12	n/a
Planning Grant	Planning	VT BoSCoC Planning FY21	\$140,377	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP RRH FY21 (RNW)	\$416,247	n/a	n/a

FUNDING TYPE - FY21	AMOUNT
Tier 1 (100% ARD) - YHDP)	\$3,711,917
Tier 2 (Remaining ARD + CoC Bonus - YHDP)	\$233,962
DV Bonus	\$257,235
Planning	\$140,377
YHDP	\$967,316
TOTAL	\$5,310,807

Unclaimed DV Bonus	\$36,130
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**VT-500 - VT BoSCoC FY2021 CoC Program Project Ranking
October 27, 2021**



Bureau/ Boys & Girls Club	YHDP	VCRHYP RRH FY21 (RNW)	\$410,247	n/a	n/a
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1 of 2

**VT-500 - VT BoSCoC FY2021 CoC Program Project Ranking
October 27, 2021**

Applicant Name	Project Type	Project Name	Amount	Rank	Score
Washington County Youth Service Bureau/ Boys & Girls Club	TH-RRH - YHDP	VCRHYP TH-RRH FY21 (RNW)	\$238,067	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	SSO - YHDP	VCRHYP LLP FY21 (RNW)	\$116,760	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP HN FY21 (RNW)	\$131,220	n/a	n/a
Washington County Youth Service Bureau/ Boys & Girls Club	RRH - YHDP	VCRHYP DIV FY21 (RNW)	\$65,022	n/a	n/a
TOTAL			\$5,310,807		

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

REJECTED or REDUCED PROJECT AMOUNTS - LACK OF AVAILABLE FUNDS

Applicant Name	Project Type	Project Name	Rejected or Reduced Amount	Rank	Score
Institute for Community Alliance (ICA)	HMIS	HMIS Expansion (NEW)	\$62,445	--	n/a
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH (PTH) FY21 EXPANSION (COC BONUS) (NEW) (partially funded)	\$128,215	--	83
State of Vermont	SSO-CE	Coordinated Entry Partnership Expansion (NEW) (partially funded)	\$86,351	--	n/a

- The Ranking Committee made decisions using project scores, policy set for renewal project ranking order, authorization from CoC Board to fund non-housing projects and strategic considerations to meet community needs and maximizing application score.

REDUCED PROJECT AMOUNTS - VOLUNTARY REALLOCATION

Applicant Name	Project Type	Project Name	Reduced Amount	Rank	Score
Vermont State Housing Authority (VSHA)	PSH	VSHA COC-PSH ("S+C") FY21 (RNW)	\$259,361	--	n/a
Vermont State Housing Authority (VSHA)	RRH	VSHA COC-RRH FY21 (RNW)	\$103,084	--	n/a

- 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.

2 of 2