Texas Balance of State Continuum of Care (TX BoS CoC) Policies and Procedures

This document is a companion to the TX BoS CoC Governance Charter

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</tbody>
</table>
Texas Balance of State Continuum of Care Policies and Procedures

Table of Contents

Introduction and Purpose ..................................................................................................................................... 6
Background ........................................................................................................................................................... 6
General Policies .................................................................................................................................................... 6
    HEARTH Act Goals .............................................................................................................................................. 6
    Coordinated Entry ............................................................................................................................................. 7
    Criminalization of Homelessness ....................................................................................................................... 7
    Prohibition against Involuntary Family Separation ........................................................................................... 8
    Educational Assurances ..................................................................................................................................... 8
    Ending Veteran Homelessness .......................................................................................................................... 8
    Point-In-Time (PIT) Count ..................................................................................................................................... 8
    Housing Inventory Count (HIC) ............................................................................................................................. 8
    Unmet Need ........................................................................................................................................................ 9
    AHAR Participation .............................................................................................................................................. 9
    HMIS ................................................................................................................................................................. 10
    CoC Meetings ...................................................................................................................................................... 11
    HUD CoC Program and ESG Program Funding .............................................................................................. 11
        Continuum of Care Program Application in response to HUD NOFA .............................................................. 11
        Project Review, Score and Ranking Policies and Re-Allocation Process ......................................................... 12
        Annual Performance Report .......................................................................................................................... 12
        Policy on HUD Monitoring of CoC Program-funded Projects ......................................................................... 12
        ESG Recipient Monitoring ........................................................................................................................... 12
        Policy on Late Submission of Project Applications for CoC Program Funding ............................................... 12
        Ranking the HMIS Project Application as the First Project in the Priority Listing ........................................... 12
    Administering CoC Program- and ESG Program-funded Rapid Re-housing (RRH) Assistance ............................ 13
        RRH Written Standards .................................................................................................................................... 13
        Case Management Guidelines ........................................................................................................................ 13
Administering CoC Program-funded Permanent Supportive Housing (PSH) Assistance ........................................ 13
PSH Written Standards .............................................................................................................................................. 13
Case Management Guidelines .................................................................................................................................. 13
Prioritization of Persons Experiencing Chronic Homelessness in PSH ................................................................. 13
Requiring PSH Projects to Use Housing First or Low-Barrier Approaches ............................................................ 13
TX BoS CoC Board Requirements ............................................................................................................................. 14
Acronyms ................................................................................................................................................................. 15
APPENDICES ............................................................................................................................................................ 16
Appendix A  Coordinated Entry (CE) Written Standards .......................................................................................... 17
Appendix B  Prohibition against Involuntary Family Separation .............................................................................. 13
Appendix C  Educational Assurances ...................................................................................................................... 15
Appendix D  CoC-Wide Definition for Ending Veteran Homelessness ................................................................... 19
Appendix E  Project Review, Score and Ranking Policies and Re-Allocation Process ............................................. 22
Appendix F  Policy on HUD Monitoring of CoC Program-funded Projects ............................................................ 26
Appendix G  Policy on Late Submission of Project Applications ................................................................................ 28
Appendix H  Ranking the HMIS Project Application as the First Project in the Priority Listing ............................... 31
Appendix I  Texas Balance of State Continuum of Care Housing Crisis Response System Written Standards ... 33
Appendix J  Adoption of Notice CPD 14-012 ........................................................................................................... 16
Appendix K  Requiring PH Projects to Use Housing First or Low-Barrier Approaches ........................................ 18
Appendix L  TX BoS CoC Board Requirements Policies and Procedures ................................................................. 20
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Policy and Procedure Maintenance: This document will be considered a living document subject to change. Changes to this document will be made in response to changing conditions and regulations and the will of the membership. Changes after initial approval will be presented at a TX BoS CoC General Meeting and adopted at the following meeting. In cases where time does not permit, the TX BoS CoC Board may approve changes.
Introduction and Purpose
This document serves as the Texas Balance of State Continuum of Care (TX BOS CoC) Policies and Procedures. This document outlines key operational components of the Continuum of Care (COC), including universal policies and procedures or references to other policy and procedure or guideline documents for the CoC. It is a companion document to the TX BoS CoC Governance Charter.

Background
A Continuum of Care is a collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional, and permanent housing and other service resources to address the various needs of persons experiencing homelessness. The U.S. Department of Housing and Urban Development (HUD) also refers to the group of service providers involved in the decision making processes as the “Continuum of Care.”

The CoC is responsible for meeting CoC requirements, as mandated by HUD. Due to our large geography, the CoC relies on Local Homeless Coalitions (LHCs) to conduct planning, delivery of housing and services, and evaluation in order to meet CoC requirements.

Continuum of Care planning and funding is intended to reduce incidents of homelessness in CoC communities, by assisting homeless individuals and families in quickly transitioning to self-sufficiency and permanent housing and to meet other goals as outlined in the HEARTH Act.

For structure and governance details please see the TX BoS CoC’s Governance Charter.

General Policies

HEARTH Act Goals
The TX BoS CoC has adopted goals related to the evaluation of project and system performance in accordance with the HEARTH Act:

- Reducing the length of time Homeless
  - Goal of 30 days or less average length of time spent homeless
- Reducing the Number of Homeless People
- Reducing the Number of Newly Homeless
- Reducing Returns to Homelessness
- Increasing Exits to Permanent Housing
- Increasing Income and Employment
- Increasing access to the utilization of mainstream benefits.

To better understand system performance and measure progress toward meeting these goals, the TX BoS CoC will adopt performance measures at the project and systems levels that support these goals.
The CoC has adopted the goals and deadlines set forth by the Federal government for ending Veteran, Chronic, Youth and Family Homelessness. Specifically, the TX BoS CoC has adopted the following deadlines for each of the following goals:

- End Veteran Homelessness by 2016
- End Chronic Homelessness by 2017
- End Family Homelessness by 2020
- End Youth Homelessness by 2020

Each LHC is encouraged to design its own localized, strategic plan to meet these goals. TX BoS CoC will support LHCs in the development of these plans based on the CoC workplan.

**Coordinated Entry**

**Overview:** Each Continuum is responsible for establishing and operating a centralized or coordinated assessment system that will provide a comprehensive assessment of the needs of individuals and families for housing and services. This system is called Coordinated Entry (CE) in the TX BoS CoC. A Coordinated Entry System is defined to mean a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.

As required by HUD, in the TX BoS CoC all CoC and ESG grantees must participate in a CE system. Prior to establishment of CE in each of the TX BoS CoC communities, CoC grantees are required to conduct a VI or F-VI-SPDAT and use prioritization lists in HMIS or alternate Victim Service Providers’ prioritization lists to prioritize clients for housing. CoC and ESG program-funded projects must work with the LHCs (Local Homeless Coalitions) to establish Coordinated Entry Transition Team (CETT) teams and implement CE in their communities. The TX BoS CoC will provide toolkits, trainings, support, standards, guidance, evaluation, and data analysis. Each local CE plan may be tailored to unique community needs and available resources but must be approved by the TX BoS CoC.

**Progress:** The TX BoS CoC has officially implemented the VI-SPDAT and F-VI-SPDAT as standardized assessment tools. These tools are available in the Homeless Management Information System (HMIS), and results are used within the HMIS system to create a dynamic list that prioritizes individuals and families for housing and other community services based on acuity. The dynamic list identifies, and is able to sort by chronically homeless persons, veterans, families, and youth. The TX BoS CoC has developed CE Written Standards and is in the process of developing a CE toolkit and CE Checklist. (See Appendix A)

**Criminalization of Homelessness**

Agencies and programs within the TX BoS CoC will not participate in or support any activity that may directly or indirectly support the criminalization of homelessness. Agencies within the TX BoS CoC will work to reduce barriers to housing and services.
Prohibition against Involuntary Family Separation
The TX BoS CoC is committed to keeping children under the age of 18 with their families. Specifically, emergency shelters, transitional housing, and permanent supportive housing programs will not deny admission to or separate any family member from other family members based on age, sex, or gender when entering shelter or housing. (See Appendix B)

Educational Assurances
It is the intent of the TX BoS CoC to meet the educational needs of the homeless youth and families that they serve. The TX BoS CoC is committed to ensuring that the educational needs of homeless youth and their families are met. (See Appendix C)

Ending Veteran Homelessness
The TX BoS CoC is committed to ending veteran homelessness. A CoC-wide definition incorporating benchmarks and criteria will allow the CoC to measure progress toward ending veteran homelessness. (See Appendix D)

Point-In-Time (PIT) Count
The TX BoS CoC conducts at least one unsheltered and one sheltered point-in-time (PIT) count of persons in homeless situations per year. This count collects data on where homeless households are sleeping, household size, disability, and chronicity of homelessness. HUD requires that all states with federally-funded homeless services participate in PIT counts during the last ten days in January each year. The PIT count is a physical count or census of all homeless persons living in emergency shelters, transitional housing, and on the streets on a single night. It does not capture those who experience only brief episodes of homelessness or account for changes throughout the year.

The CoC is currently drafting a PIT Coordinator Manual to provide guidance on how to plan and implement the count and detailed information about how to train volunteers and service providers to use the various point-In-time (PIT) forms that have been developed for TX BoS CoC providers. The PIT Coordinator for each LHC/community will be responsible for following the information in this manual.

Housing Inventory Count (HIC)
Every year the TX BoS CoC will collect data to complete a housing inventory chart (HIC). This inventory will occur at a single point-in-time in the last ten days in January each year. The date of the housing inventory will be the same date as the point-in-time sheltered and unsheltered count.

For each program that houses persons experiencing homelessness, the CoC will collect data on:
- The number of beds and units currently serving individuals and families
- The number of beds and units created in the past year (“new inventory”)
- The number of beds and units that are fully funded but not yet serving homeless people (“under development”)

Housing inventory data must be obtained from all emergency shelters, transitional housing, rapid re-housing and permanent supportive housing programs in the CoC, including those programs that do not
receive HUD funding. Data collected from permanent supportive housing programs will be focused only on the beds and units that are dedicated to housing persons who are formerly homeless.

To collect Housing Inventory data, the CoC will annually:

- Use HMIS data to complete the Housing Inventory Count OR
- Conduct a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site communication) of homeless housing providers, which will include the previous year’s Housing Inventory Count and instruct providers to review and update housing inventory information on the specified night of the housing inventory. If the CoC decides to collect housing inventory information via a survey, the CoC will:
- Provide instructions to all homeless housing providers on how to report an accurate bed inventory;
- Include definitions of key terms used in the inventory chart;
- Follow-up with providers (e.g., via telephone, email, or in-person) to ensure the maximum possible response rate and accuracy of the housing inventory information; and
- After receiving the inventory information, confirm the information with each provider to verify the accuracy of the data.

**Unmet Need**

Unmet need reflects the difference between a community’s bed capacity and the number of homeless persons in the community at one point-in-time. Thus the CoC recommends the data collected as a result of the PIT count and housing/services inventories are reviewed by LHCs/communities to determine what housing and services are needed to meet the community need, fill gaps and create an effective Housing Crisis Response System. The CoC strongly encourages LHCs/communities to also utilize the VI-SPDAT and F-VI-SPDAT through a CE system to determine the levels of housing interventions necessary to meet the housing needs of those experiencing homelessness. The CoC can assist with providing data that is contained in the HMIS system, collected for the HIC and from participating PIT comminutes, however communities will have to take into account inventory not in the HMIS system or reported for the HIC.

Due to the CoC’s large geography a CoC-wide unmet needs gaps analysis is no longer conducted.

**AHAR Participation**

The Annual Homeless Assessment Report (AHAR) is a report by HUD to the U.S. Congress on the extent and nature of homelessness in America. It is based on data from Homeless Management Information Systems (HMIS) and on information from Continuum of Care (CoC) Consolidated Applications. The AHAR provides estimates of the number of homeless persons nationally, a descriptive profile of homeless persons, and an analysis of service use patterns.

The HMIS/Data team for the TX BoS CoC is responsible for completing the AHAR. Client-level data for the AHAR will be collected through the HMIS based on HUD’s universal data elements that all communities receiving HUD Homeless Assistance funding are required to collect and maintain and that are the same data elements used to generate HUD’s Annual Performance Reports (APRs).

Unduplicated data will be collected for the six standard AHAR reporting categories: Emergency
Shelter-Individuals, Emergency Shelter-Families, Transitional Housing-Individuals and Transitional Housing-Families Permanent Supportive Housing-Individuals and Permanent Supportive Housing-Families. Data will also be collected for any supplemental reporting categories established by HUD.

In order to participate in the AHAR, the CoC’s HMIS must be capable of:

- Producing a one day point-in-time count, average day count, and longitudinal counts.
- Identifying clients with multiple program use—e.g., how many people in ES-IND were also served in TH-IND.
- Counting persons by household type—e.g., individual adult male, adult in household with children, or unaccompanied youth.
- Generating frequencies by basic demographic characteristics.
- Cross-tabulating total length of stays within each program-household type, by gender and age.
- Totaling the number of households with children by program type.

The TX BoS CoC has established continuum-wide data quality control procedures to ensure the accuracy and completeness of AHAR data collected and reported. On an annual basis (according to HUD’s designated data collection schedule), THN will de-duplicate and aggregate the client information collected to produce and submit the AHAR data report.

- The AHAR data collection period is October 1st to September 30th of each year.
- THN will submit the AHAR report electronically through the AHAR Exchange to the HUD-designated private research firm, responsible for compiling the national AHAR.
- A draft AHAR report will be submitted by the HUD-designated date.
- THN will work with the AHAR Research team to correct any data problems, and submit a final AHAR report by the HUD-designated date.

**HMIS**

The TX BoS CoC HMIS is a collaborative project of THN, as the HMIS Lead Agency, and Participating Agencies. HMIS is a computerized data collection application designed to capture information about people experiencing homelessness and homeless programs over time. HMIS is mandated by the HUD under the HEARTH Act for all communities and agencies receiving HUD Continuum of Care (CoC) Program and Emergency Solutions Grant (ESG) Program homeless assistance funds. HMIS is essential to efforts to streamline client services and inform public policy. Through HMIS, homeless people benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in each Continuum, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation, and advocacy. The parties involved in the HMIS share a common interest in collaborating to end homelessness and successfully implementing and operating HMIS in the TX BoS CoC.
The TX BoS CoC goal is to collaboratively provide a range of homeless housing and services. The continuum of care system components include homelessness prevention, emergency shelter, transitional housing, rapid re-housing permanent housing and permanent supportive housing. Outreach efforts and specialized supportive services actively identify and support homeless individuals and families and work with them to access mainstream resources. HMIS will enable homeless service providers to collect uniform client information over time. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of the homeless population; these data are necessary to service and systems planning and advocacy.

Detailed information on HMIS can be found in the TX BoS CoC HMIS Policies and Procedures.

**CoC Meetings**

1. CoC General Meetings are scheduled to be held monthly. A minimum of four member meetings will be held each year.
2. All the meetings of the members of the CoC shall be open to the public. Meetings other than member meetings, including meetings of the TX BoS CoC Board, are not open to the public.
3. All CoC General Meetings and Board meetings will have written agendas. Agendas for and minutes from the CoC General Meetings will be posted on THN’s website or sent electronically.
4. The TX BoS CoC Board may call special member meetings by providing an agenda to all the members.
5. TX BoS CoC staff shall take reasonable steps to ensure that all members are notified of the time and place of all member meetings.
6. A reasonable period of time shall be set aside for members to address the CoC at the member meetings.
7. All CoC members shall be permitted to propose “new business” for the next member meeting of the CoC.
8. All CoC General Meetings are open, however Board Member elections are held annually at the CoC General Meeting held in conjunction with the Texas Conference on Ending Homelessness.
9. The TX BoS CoC will maintain dated meeting minutes for all meetings that pertain to the CoC’s local competition process for HUD CoC Program funding.

**HUD CoC Program and ESG Program Funding**

**Continuum of Care Program Application in response to HUD NOFA**
The TX BoS CoC is responsible for facilitating the community response to the annual Continuum of Care (CoC) Program Notice of Funding Availability (NOFA) issued by the U.S. Department of Housing and Urban Development (HUD).
Project Review, Score and Ranking Policies and Re-Allocation Process
Eligible project applications will be reviewed, scored and ranked for inclusion in the CoC’s consolidated application. Once applications have passed threshold review, the Independent Review Team (IRT) reviews and scores them, then THN staff and the TX BoS CoC Board rank them. Applications not scoring high enough will not be included in the Consolidated Application. (See Appendix E)

Annual Performance Report
Annual Performance Reports (APRs) are required by HUD on an annual basis to track the progress and accomplishments of HUD’s Continuum of Care Program.
The APR gathers information on how programs assist homeless persons to obtain and remain in permanent housing, increase skills and income, and attain greater self-determination. This information is used by HUD and Congress to assess outcomes from federal funding. The APR is also useful to the CoC, grantees, and sponsors as a planning and management tool to analyze client demographics and service needs; to evaluate project outcomes; to make improvements; and to set future goals for their projects.
The TX BoS CoC will conduct quarterly monitoring reviews of APRS and LOCCS drawdowns. Staff may conduct on-site monitoring when capacity allows or when there are specific concerns about projects’ performance or ability to effectively manage a CoC Program-funded project.
Staff may conduct desk monitoring reviews of agency audits, drawdown requests, APRs and other documentation at any time or as necessary for the prioritization process and response to the HUD CoC Program NOFA.

Policy on HUD Monitoring of CoC Program-funded Projects
CoC Program-funded projects will inform the CoC about the occurrence and status of HUD monitoring visits, reports, results, and resolutions. (See Appendix F)

ESG Recipient Monitoring
The TX BoS CoC will work with the State ESG recipient, the Texas Department of Housing and Community Affairs (TDHCA), and city/county ESG recipients to coordinate the monitoring of outcomes of ESG funding. Grantee activities will be monitored to assure compliance with applicable Federal requirements and to determine whether or not performance goals are being achieved. The CoC is in the process of further developing formalized ESG recipient evaluation.

Policy on Late Submission of Project Applications for CoC Program Funding
Project Applicants in the TX BoS CoC shall adhere to all due dates and deadlines related to the TX BoS CoC’s application process, also known as the local competition, for HUD CoC Program funds. If a Project Application is not submitted by the due date and time, the TX BoS CoC Board will determine potential consequences. (See Appendix G)

Ranking the HMIS Project Application as the First Project in the Priority Listing
The TX BoS CoC’s HMIS Project will be ranked first in Tier 1, per the TX BoS CoC Board, as the board views it as an essential project to effectively operate the CoC. (See Appendix H)
Administering CoC Program- and ESG Program-funded Rapid Re-housing (RRH) Assistance

RRH Written Standards
The TX BoS CoC has developed Rapid Re-Housing (RRH) written standards to be reviewed and jointly finalized with ESG recipients. (See the TX BoS CoC RRH Written Standards.) This document sets standards for RRH projects surrounding how participants are selected, how housing barrier assessments are conducted, and how assistance is provided. This document applies to all CoC and ESG Program-funded RRH projects operating in the TX BoS CoC geography. (See Appendix I)

Case Management Guidelines
The TX BoS CoC has drafted Case Management Services Standards for RRH and PSH in the CoC written standards for service delivery.

Administering CoC Program-funded Permanent Supportive Housing (PSH) Assistance

PSH Written Standards
The Texas Balance of State Continuum of Care (TX BoS CoC) has developed Permanent Supportive Housing Program written standards to ensure:

- Program accountability to individuals and families experiencing homelessness; specifically those who are experiencing chronic homelessness
- Program compliance with HUD rules
- Program uniformity
- Creation of an environment of effective, evidenced-based program guidelines for permanent supportive housing.
- United vision and strategy for ending homelessness

The document applies to all CoC and ESG Program-funded RRH projects operating in the TX BoS CoC geography. (See Appendix J)

Case Management Guidelines
The TX BoS CoC has drafted Case Management Services Standards for PSH in the CoC written standards for service delivery.

Prioritization of Persons Experiencing Chronic Homelessness in PSH
Recognizing the need for strategic allocation of permanent supportive housing (PSH) beds, the TX BoS CoC has adopted the guidance provided by HUD in Notice CPD 14-012 for prioritizing those who enter into CoC Program-funded PSH projects. (See Appendix K)

Requiring PSH Projects to Use Housing First or Low-Barrier Approaches
The TX BoS CoC will require all Permanent Housing (PH) projects within the CoC to shift their program models to Housing First or, at minimum, low barrier with a goal of becoming Housing First, prior to the HUD FY 2016 Continuum of Care (CoC) Program competition. (See Appendix L)
TX BoS CoC Board Requirements
Most TX BoS CoC Board information is included in the CoC’s Governance Charter. The Charter will be reviewed at the CoC General Meeting on September 21, 2016. On August 10, 2016, however, the CoC Board approved revised policies and procedures related to CoC Board Requirements, to be used to guide the election of CoC Board Members to be held September 12-16, 2016. (See Appendix M)
Acronyms

AHAR  Annual Homeless Assessment Report
APR   Annual Performance Report
ARA   Annual Renewal Amount
ARD   Annual Renewal Demand
BoS   Balance of State CoC
CH    Chronically Homeless
CoC   Continuum of Care
CDBG  Community Development Block Grant
DUNS # Data Universal Numbering System
ESG   Emergency Solutions Grant (Federal)
e-snaps Online Application and Grants Management System for HUD’s Homeless Programs
FMR   Fair Market Rent
FPRN  Final Pro Rata Need
GIW   Grant Inventory Worksheet
HDX   Homeless Data Exchange
HEARTH Act Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009
HMIS  Homeless Management Information System
HUD   Department of Housing and Urban Development (Federal)
IRT   Independent Review Team
NOFA  Notice of Funding Availability
PH    Permanent Housing
PIT   Point-In-Time (annual count of homeless persons)
PPRN  Preliminary Pro Rata Need
PRA   Project-based rental assistance
PSH   Permanent Supportive Housing
RFP   Request for Proposals
RRH   Rapid Re-Housing
SHP   Supportive Housing Program
S+C   Shelter plus Care Program
SRA   Sponsor-based Rental Assistance
SRO   Single Room Occupancy
TH    Transitional Housing
TRA   Tenant-based Rental Assistance
VASH  Veteran’s Affairs Supportive Housing
Appendix A

Coordinated Entry (CE) Written Standards
COORDINATED ENTRY
WRITTEN STANDARDS
TEXAS BALANCE OF STATE CONTINUUM OF CARE

Mary Rychlik
TEXAS HOMELESS NETWORK
Updated September 8, 2016
# Contents

- **Introduction** ................................................................. 2
- **Description of an Effective Housing Crisis Response System** .................................................. 3
- **Qualities of an Effective Coordinated Entry System** ................................................................. 6
- **TX BoS CoC Coordinated Entry System Model Overview** .......................................................... 7
- **Requirements of a Local Coordinated Entry System** ............................................................... 8
- **Coordinated Entry and Survivors of Domestic Violence** ............................................................. 10
- **Acknowledgements** ......................................................................... 11
- **Appendix** .................................................................................. 12
Introduction

Across the county, communities are working tirelessly toward an end to homelessness. What you ask is an end to homelessness? Thankfully, the United States Interagency Council on Homelessness has developed the definition of what it means to end homelessness.

An end to homelessness means that every community will have a systematic response in place, i.e., housing crisis response system, that ensures homelessness is prevented whenever possible, or if it can’t be prevented, it is a rare, brief, and non-recurring experience.

Specifically, every housing crisis response system will have the capacity to:

- Quickly identify and engage people at risk of and experiencing homelessness.
- Intervene to prevent the loss of housing and divert people from entering the homelessness services system.
- When homelessness does occur, provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are being secured, and quickly connect people to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing.

People who are homeless or about to become homeless are in crisis and experience multiple negative consequences as a result. Immediate, competent assistance provided by a housing crisis response system assures that homelessness is rare, brief, and non-recurring. A community’s housing crisis response system should be organized to prevent housing crises from resulting and homelessness, and to quickly end such crises when they occur. People who are homeless are providing safe, appropriate, and temporary shelter, as well as help to quickly secure and stabilize in housing.\(^1\)

This document contains the policies and procedures for Coordinated Entry in the Texas Balance of State Continuum of Care (TX BoS CoC). In an effort to recognize the diversity of geographic areas, services, and participating service providers within the CoC, the TX BoS CoC process outlined in this document includes placeholders and recommendations for Local Homeless Coalitions (LHCs) and Coordinated Entry Teams (CETs) to develop specific assignments and communication patterns. Each CET will create a local addendum to specify how these standards are implemented in their community. This document must be approved through a formal vote at an LHC meeting.

**Description of an Effective Housing Crisis Response System**

*What is a Housing Crisis Response System?*

A housing crisis response system typically consists of six basic components:

1. **Coordinated Entry (CE)**
   A Coordinated Entry System ensures that people experiencing a housing crisis can readily find and navigate crisis intervention assistance, including facilitating immediate access to homelessness prevention and emergency shelter assistance. CE serves to allocate assistance as effectively as possible, ensuring access to the most appropriate and available permanent housing option no matter where someone is within the housing crisis response system or what barriers they face. Coordinated Entry processes help communities prioritize assistance based on vulnerability and severity of needs to ensure that people who need assistance the most can receive it in a timely manner. Coordinated Entry is a system through which persons experiencing or at-risk of homelessness are assessed for their housing needs and referred to the appropriate housing intervention, should it exist in a community and/or should they be eligible. The United States Department of Housing and Urban Development’s (HUD) primary goals for a Coordinated Entry System are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present.²

2. **Homeless Diversion and Prevention**
   A comprehensive homeless crisis response system assesses all households individually and understands that many households seeking shelter have a safe and appropriate place to stay, even if temporarily. Some of these households are able to avoid entering shelter and can secure permanent housing if linked to homelessness prevention assistance – in other words, they can be diverted from entering emergency shelter. This may involve continuing to stay or moving in with family and friends. Homelessness prevention assistance should be readily available for persons diverted or otherwise identified to be imminently at-risk of homelessness. One approach to consider is progressive engagement, an approach that offers “light touch” interventions where possible, such as mediation with family/friends, connection to legal assistance, etc., and then more assistance as needed and desired.

3. **Emergency Shelter**
   Emergency shelter provides safe, basic lodging where individuals and families can stay temporarily while they resolve their housing crisis. Shelters should:
   - Ensure housing plans are created quickly;
   - Focus on safety and meeting basic needs - reducing perceived stress;
   - Have no/low barriers to entry; and
   - Connect households to the most appropriate and available permanent housing opportunity, according to their needs and preferences.

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4. Rapid Re-Housing
Rapid Re-Housing places a priority on moving a household experiencing homelessness into permanent housing as quickly as possible. Reduced length of shelter stays makes crisis beds available to others in need and reduces the time spent in homelessness.

5. Transitional Housing
Transitional housing programs have traditionally been used to provide services to people experiencing homelessness to prepare them to move into permanent housing and address other non-housing crisis related needs. However, many communities have found, and new research now indicates, that it is a less effective and more expensive intervention to resolve homelessness than Rapid Re-Housing. Consequently, most communities are now seeking to target transitional housing for people with the most severe or intensive support needs who desire the support a transitional housing program may offer over other shelter options.

6. Permanent Supportive Housing
A housing crisis response system should assist the most vulnerable people, including those with the most severe service needs and longest homeless experience. Permanent Supportive Housing (PSH) assists disabled people who have experienced multiple or prolonged episodes of homelessness. It includes a conventional lease in a permanent rental unit, rental assistance, and supportive services to assure housing stability and address other service needs.
Interim Housing: Emergency Shelter or Transitional Housing

Housing Crisis Resolution System
Vision: No one homeless more than 30 days

- Housing Crisis
- Unsheltered
- At Risk of Homelessness
- Coordinated Entry
- Diversion

- Housing Barrier Assessment

- Housing
  - Rapid Re-Housing – Rental Housing
  - Permanent Supportive Housing
  - Affordable Housing
  - Rental Housing

Successfully Diverted to Housing
Qualities of an Effective Coordinated Entry System

- Crisis Resolution
- Progressive Engagement
- Low Barrier
  The Coordinated Entry System does not screen people out for assistance because of perceived barriers to housing, including, but not limited to, lack of employment or income, drug or alcohol use, or having a criminal record. In addition, housing and homeless programs lower their screen barriers in partnership with the Coordinated Entry System.
- Prioritization
  Quality CES ensures that people with the greatest needs receive priority for any type of housing or homeless assistance available in the community, including Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), Transitional Housing (TH), and other interventions.
- Housing First orientation
  People are housed as quickly as possible without preconditions, e.g., being sober or having income, or service participation requirements.
- Person-Centered
  The CES incorporates participant choice. Choice can include location and type of housing, level of services, and other options about which households can participate in decisions.

Inclusive
While THN encourages communities to start their processes with a sub-population target population, a CES ultimately includes all subpopulations.
TX BoS CoC Coordinated Entry System Model Overview

The following is an overview of a household’s potential pathway through the CES from identification to referral.

Step 1: Initial Presentation and Request for Assistance
A Coordinated Entry System (CES) requires streamlining how people connect with the housing crisis response system. There are two models for how a CES can be set up: centralized or decentralized.

Step 2: Standardized Assessment Tool
Assessors complete a standardized assessment, which consists of HUD Universal Data Elements (UDEs) and Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) or Family – Vulnerability Index – Service Prioritization Decision Assistance Tool (F-VI-SPDAT) version 2.0. The assessment is designed to identify the household’s housing needs.

Step 3: Program Match
Assessors use the household’s VI-SPDAT or F-VI-SPDAT information to determine which housing intervention is recommended to permanently meet the household’s needs.

<table>
<thead>
<tr>
<th>Diversion</th>
<th>VI-SPDAT Score Range</th>
<th>F-VI-SPDAT Score Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rapid Rehousing or Transitional Housing</td>
<td>4-7</td>
<td>4-8</td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH)</td>
<td>8+</td>
<td>9+</td>
</tr>
</tbody>
</table>

Step 4: Program Referrals
The Trained Assessor creates all referrals based on the recommendation generated by the VI-SPDAT or F-VI-SPDAT, client’s needs, preferences, and eligibility. Referrals are made directly in HMIS or through the locally accepted HMIS-workaround.

Clients are given the opportunity to decline specific programs or request a lower level of service than would initially be recommended.

Step 5: Unmet Needs
Unmet needs refers to the care or help a household requires to end their housing crisis but aren’t able to get. Unmet needs and the reason for the unmet need will be captured in HMIS.

Step 6: Housing Priority List
HUD has determined that an effective Coordinated Entry System ensures that people with the greatest needs receive priority for any type of housing and homelessness assistance available in the local Housing Crisis Response System, including Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), and other interventions. Therefore, programs with current or pending openings must fill that opening with the client that is currently on the Housing Priority List, which indicates the household has been assessed by the Coordinated Entry System, and meets the prioritization standards for the specific housing intervention.

Requirements of a Local Coordinated Entry System

**Participating Providers**

**Continuum of Care (CoC) Program Funded Agencies**
Per the Continuum of Care (CoC) Program Interim Rule 24 CFR 578, all service providers receiving CoC Program funding are required to participate in the Coordinated Entry System (CES).

**Emergency Solutions Grant (ESG) Funded Agencies**
Per the Emergency Solutions Grant (ESG) Interim Rule 24 CFR 576.400(d), all ESG funded programs within the Texas Balance of State Continuum of Care (TX BoS CoC) are required to participate in the CES once it has been established.

**Other Community Agencies**
Ideally, all organizations working to end homelessness in the TX BoS CoC will participate in the local Coordinated Entry System. The local system is open to any agency interested in receiving referrals to work with clients who have been assessed by Coordinated Entry Entry Points.

**Target Population**
The target population will be determined by each local Coordinated Entry System. THN recommends that local CES start small then scale to include other subpopulations, e.g., Veterans experiencing literal homelessness.

**Accessing the Coordinated Entry System**
Since every community in the Texas Balance of State Continuum of Care (TX BoS CoC) has unique strengths and challenges, THN is not mandating a certain type of access model rather, each community will select the model most appropriate for their jurisdiction.

All people in the Continuum of Care’s geographic area have fair and equal access to the Coordinated Entry System, regardless of where or how they present for services. Fair and equal access means that people can easily access the Coordinated Entry System, whether in person, by phone, or some other method, and that the process for accessing help is known, i.e., advertised.

If the CES includes one or more physical locations, they are accessible to people with disabilities and easily accessible by public transportation, or there is another method, e.g., toll-free phone number or 2-1-1, by which people can easily access the CES.

The CES is aware of the needs of survivors fleeing domestic violence.

The CES is able to serve people who speak languages commonly spoken in the community. This data can be obtained through the [American Fact Finder](https://factfinder.census.gov) of the [United States Census Bureau](https://www.census.gov).

**Assessment**
All Coordinated Entry Entry Points and methods (phone, in-person, online, etc.) offer the same assessment approach and referrals using uniform decision making processes.

**Re-Assessments**
Households may only re-complete an assessment whenever one of the following circumstances are met:

1. The household’s composition has changed, e.g., the number of household members has increased or decreased,
2) Housing status has changed. e.g., the household is experiencing homelessness again after being housed,
3) More than six months have passed since the initial assessment, or
4) An Assessment Review Request has been submitted and approved.

**Grievance Policy**
Assessors who have concerns about the accuracy of the assessment once completed may request a formal Assessment Review by submitting the Assessment Review form to the local CETT.

Staff members at a community agency participating in Coordinated Entry who have similar concerns may also request a formal Assessment Review by the same process, with the permission of their direct supervisor.

Clients who have concerns with the accuracy of their assessment once the process is complete may request that the Trained Assessor submit an Assessment Review Form on their behalf addressing their specific concerns.

Assessment Review Requests are case conferenced by the ECHO Coordinated Assessment Team every Tuesday morning. This case conferencing may result in... The individual requesting the review will be informed of the planned action, as well as follow-up steps to take if they disagree with the planned actions or its results.

**Referrals**

**Referral Acceptance**
Once the program has formally identified their next referral, the program has ten (10) business days to contact the client and offer services. These attempts must be documented in HMIS or a comparable system, if the agency does not use HMIS. If a client cannot be located after ten business days, the program may move to the next client that meets the prioritization standards for the specific housing intervention.

Once a client has accepted assistance, the program must mark the referral as “Acknowledged” in HMIS or, if the program does not use HMIS, notify the referring Entry Point about the status of the referral.

**Declining an Accepted Referral**
Since referrals will only be made if the client is eligible, the household should only be declined in extremely limited circumstances. Referral denial may occur due to:

- Client is no longer eligible at time of intake;
- Client has permanently left the area;
- Client refuses or declines services;
- For inability to contact; or
- The household presented at intake with a new, ineligible member

**Homeless Management Information System**
The Homeless Management Information System (HMIS), vendor ClientTrack, must be used to collect and manage data generated through the Coordinated Entry System.
Workarounds for Victim Service Providers and agencies that do not want to use HMIS must be developed.

**Advertising**
Marketing strategies may include direct outreach to people on the street and other service sites, informational flyers left at service sites and public locations, announcements during CoCs or other coalition meetings, and educating mainstream service providers.

**Coordinated Entry and Survivors of Domestic Violence**

**Safety Planning**
The CES has protocols in place to ensure the safety of the individuals seeking assistance. These protocols ensure that people fleeing domestic violence have safe and confidential access to the Coordinated Entry process and domestic violence services, and that any data collection adheres to the Violence Against Women Act (VAWA), i.e., Victim Service Providers are not allowed to enter information into HMIS.
Acknowledgements

THN would like to thank everyone who has been involved in developing Coordinated Entry in the Texas Balance of State Continuum of Care (TX BoS CoC). Implementation has been difficult in the TX BoS CoC due to the geography of the jurisdiction. Thank you for being patient and working with us!
Appendix

Interested in learning more about Coordinated Entry? Check out these guidance documents and resources:

Coordinated Entry Policy Brief

Coordinated Entry and Victim Service Providers FAQ

Coordinated Entry and HMIS FAQ

CoC’s Coordinated Assessment System Prezi

Centralized Intake and Assessment Infographic

Coordinated Assessment: Models and Principles Under the CoC Interim Rule
https://www.youtube.com/watch?v=9j9faz1cHQQ

Coordinated Assessment: Philosophy Under the CoC and ESG Programs
https://www.youtube.com/watch?v=LM1GiyDzhZg
Transforming Systems in Pierce County, Washington

Coordinated Entry and Systems Change
https://www.youtube.com/watch?v=4uCkQS_DPME

Creating a Systemic Crisis Response to Homelessness
https://www.youtube.com/watch?v=Y7kZV9EuqFs
Appendix B

Prohibition against Involuntary Family Separation
CoC Policy against Involuntary Separation of Families

Approved by the TX BoS CoC Board 8-10-2016

Policy:

The TX BoS CoC strongly supports the prohibition against involuntary family separation and has adopted and incorporated this prohibition as policy and as a special condition in all family shelter and transitional housing contracts executed as of August 2016. Additionally, all family shelters, regardless of funding, should accommodate any family composition unless there is a justifiable reason why the agency cannot do so.

Family Separation and Emergency Shelter

HUD issued regulations that all shelters are prohibited from denying access to families based on the age of a child. This requirement has been issued through the HEARTH Act and through the ESG Interim Rule. All HUD funded emergency shelters and transitional housing facilities will comply with this requirement. Non-compliance may result in removal of funds. Please see the following for specific information:

HEARTH Act language on family separation:
SEC. 404. PREVENTING INVOLUNTARY FAMILY SEPARATION. “(a) IN GENERAL.—… any project sponsor receiving funds under this title to provide emergency shelter, transitional housing, or permanent housing to families with children under age 18 shall not deny admission to any family based on the age of any child under age 18. “(b) EXCEPTION.—Notwithstanding the requirement under subsection (a), project sponsors of transitional housing receiving funds under this title may target transitional housing resources to families with children of a specific age only if the project sponsor— “(1) operates a transitional housing program that has a primary purpose of implementing an evidence-based practice that requires that housing units be targeted to families with children in a specific age group; and “(2) provides such assurances, as the Secretary shall require, that an equivalent appropriate alternative living arrangement for the whole family or household unit has been secured.”

Appendix C

Educational Assurances
Educational Assurances

**Purpose:** The purpose of this document is to outline the intent of the TX BoS CoC to meet the educational needs of the homeless youth and families that they serve. The Continuum believes that success in education can lead to positive outcomes and the avoidance of negative behaviors such as drug and/or alcohol abuse or other high risk behaviors. Success in school enhances social growth and has positive physical, emotional and mental outcomes.

The TX BoS CoC is committed to ensuring that the educational needs of homeless youth and their families are met.

Pursuant to McKinney-Vento Homeless Assistance Act a homeless child is defined as a child who does not have a fixed, regular, and adequate nighttime residence or whose primary nighttime location is in a public or private shelter designated to provide temporary living accommodations, or a place not designed for, or ordinarily used as regular sleeping accommodations for human beings.

This definition includes a child who is:

- sharing the housing of other persons due to loss of housing, economic hardship or similar reason (sometimes referred to as double-up);
- living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations;
- living in a car, park, public space, abandoned building, substandard housing, bus or train stations or similar settings;
- abandoned in hospitals;
- awaiting foster care placement; or
- a migratory child who qualifies as homeless because he or she is living in circumstances described above
- an unaccompanied youth is a homeless child not in the physical custody of a parent or guardian who is in a living situation described above.

**CoC/LHC Responsibilities**

The LHCs will collaborate with local education agencies (schools, districts, etc). to:

- Assist in the identification of homeless families;
- Inform homeless families and youth of their eligibility for McKinney-Vento education services;

The CoC will:

- Encourage providers within the Continuum to develop procedures to meet the educational needs of children when families are placed in emergency or transitional shelter;
• Encourage providers to place families with children as close to possible to their school of origin, as appropriate, so as not to disrupt the children’s education;
The CoC and LHCs will continue to invite McKinney-Vento school Liaisons to attend CoC, LHC and other community planning meetings. This will facilitate dialogue about the services provided by shelters and housing providers, as well as those provided through the school districts.

Provider Responsibilities
Providers within the CoC that serve children/youth will be encouraged to adopt the following practices for serving homeless students.

• Providers should educate all relevant staff on the rights of homeless students as outlined in McKinney-Vento legislation.
• Providers should annually provide information to school principals, counselors, and McKinney-Vento liaisons about services the agency provides.
• Providers should connect regularly with McKinney-Vento liaisons in surrounding school districts.
• Providers should develop policies and practices that are consistent with, and do not restrict the exercise of rights provided by the education subtitle of the McKinney-Vento Act, and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness.
• Providers should designate a staff person to ensure that children are enrolled in school and connected to the appropriate services within the community, including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and McKinney-Vento education services.
• Providers should communicate with McKinney-Vento liaisons to obtain information on children’s school performance including:
  o Report cards
  o Attendance reports
  o Behavioral progress reports
  o Awards and / accommodations
• Providers should encourage parental involvement and educate parents on the importance of involvement in their children’s education, including:
  o Connecting parents with the local school liaison.
  o Informing parents on homeless children’s rights
  o Attending parent/teacher conferences
  o Report cards
  o School attendance
  o Scheduling appointments to minimize children missing time in school
  o Communication and partnership with schools
  o Notifying school when a child changes schools
  o Providing proper nutrition
• Provider staff should report any children they observe as being late for school to parents and case managers.
• As appropriate for housing type and services provided, provider staff should work directly with the truant officers in instances of truancy.
• Providers should offer after-school programs on site or make referrals to other programs.

**School Liaison Responsibilities**
School liaisons within the CoC will support agency and Continuum efforts by:

• Ensuring students are registered for school whether that is the last school attended, or the school that is nearest their current living situation.
• Assisting with fee waivers making students eligible for free lunch and reduced or no cost enrollments.
• Providing assistance with transportation if outside of school boundaries.
• Paying for immunizations and other documents needed to register for school.
• Assisting with the procurement of school supplies, clothing and hygiene supplies.
• Facilitate enrollment into tutoring or other after-school programs when available.
• Connecting families and youth to community resources.
• Working with case managers and providers to alleviate concerns regarding the educational needs of students.
• Above all else make certain that all educational needs and rights are met.
Appendix D

CoC-Wide Definition for Ending Veteran Homelessness
Adoption of CoC-Wide Definition for Ending Veteran Homelessness

Adopted by the TX BoS CoC Board by electronic vote on 3/9/2016 and ratified at the 6/8/2016 Board Meeting

PREFACE
In an effort to end Veteran homeless in the Texas Balance of State Continuum of Care (TX BoS CoC), Texas Homeless Network— the lead agency for the TX BoS CoC— will establish a CoC-wide definition of an effective end to Veteran homelessness in order to unite programs under a common goal.

Texas Homeless Network will establish such a definition by sending the proposed definition to stakeholders of the TX BoS CoC, revising the definition according to public comment, and presenting the revised definition to the CoC Board for a vote. After the CoC Board vote on March 9th, 2016, the TX BoS CoC will be notified of the vote result within 48 business hours.

An end to Veteran homelessness is not about the absence of sheltered and unsheltered veterans in a community. Rather, it is about ensuring that the housing and service system in place is sufficient to meet the needs of veterans who are experiencing or who will experience homelessness. It is the presence of a sufficient system that constitutes an effective end to homelessness, not the disappearance of Veteran homelessness.

DEFINITION
An end to Veteran homelessness means that the community will have a systematic response in place that ensures homelessness among Veterans is prevented whenever possible or is otherwise a rare, brief, and non-recurring experience.

Specifically, the community will have the capacity to:

☐ Quickly identify and engage Veterans at-risk of and experiencing homelessness.

☐ Intervene to prevent the loss of housing and divert Veterans from entering the homeless service system.

☐ Provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are being secured.

☐ When homelessness does occur, quickly connect Veterans to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing when homelessness does occur.

To measure progress toward this goal, the Texas Balance of State CoC will employ the United States Interagency Council on Homelessness (USICH) Criteria and Benchmarks.
USICH CRITERIA
1) The community has identified all Veterans experiencing homelessness
2) The community provides shelter immediately to any Veteran experiencing unsheltered homelessness who wants it
3) The community provides service-intensive transitional housing only in limited instances
4) The community has capacity to assist Veterans to swiftly move into permanent housing
5) The community has resources, plans, and system capacity in place should any Veteran become homeless or be at risk of homelessness in the future

USICH BENCHMARKS
A) Chronic homelessness among Veterans has been ended
B) Veterans have quick access to permanent housing
C) The community has sufficient permanent housing capacity
D) The community is committed to Housing First and provides service-intensive transitional housing to Veterans experiencing homelessness only in limited instances

CONCLUSION
Ending Veteran homelessness does not mean that no Veteran will ever experience a housing crisis again. Changing economic realities, the unpredictability of life, and unsafe or unwelcoming family environments may create situations where Veterans could experience or be at risk of homelessness. Furthermore, ending Veteran homelessness does not mean:
☐ That there are not any Veterans experiencing homelessness in the area
☐ That no Veteran will fall into homelessness in the future
☐ That programs focused on assisting Veterans experiencing homelessness are unnecessary

Texas Homeless Network will be working with members of the Texas Balance of State CoC to improve systems level operations and measurement to support communities in achieving an end to Veteran homelessness.

RESOURCES
To view the USICH Criteria and Benchmarks in their entirety, visit https://www.usich.gov/resources/uploads/asset_library/Achieving_the_Goal_Ending_Veteran_Homelessness_v3_10_01_15.pdf
Appendix E

Project Review, Score and Ranking Policies and Re-Allocation Process
Performance Review and Scoring Policies

Texas Homeless Network (THN) is the Collaborative Applicant and CoC Lead Agency for the Texas Balance of State Continuum of Care (TX BoS CoC). THN facilitates the competition/application process in the TX BoS CoC for U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program funds.

Applications for Renewal Projects and New Projects will undergo a threshold review to ensure compliance with the HEARTH Act, the CoC Program Notice of Funding Availability (NOFA), and the local CoC Request for Proposals (RFP). Any Renewal or New Project not meeting the threshold requirements as outlined in the RFP will not be further reviewed and will not be considered for funding. Late applications (those submitted after the due date and time listed in the RFP) will not be accepted.

The TX BoS CoC makes available, and accepts comment on, the scoring standards for Renewal and New Projects on THN’s website, and feedback is welcomed at CoC General Meetings. The Renewal Project Scoring Criteria (Appendix 1 and the New Project Scoring Criteria (Appendix 2) are attached.

Review and scoring of Renewal Projects is completed by the Independent Review Team (IRT) then tabulated by TX BoS CoC staff. Scoring is largely based on data obtained from APRs, LOCCS draw-down data, HUD monitoring reports, System-Wide Performance Measures, spending per client/household by project type and other HMIS data.

The TX BoS CoC appoints an Independent Review Team (IRT) to review and score Renewal Project and New Project applications. After meeting the local RFP and HUD CoC Program requirements, all projects are subject to the scoring outlined in the local RFP, New Project Scoring Criteria (Attachment 1) and Renewal Project Scoring Criteria (Attachment 2). TX BoS CoC staff and the TX BoS CoC Board (the CoC’s governing body) utilize scoring to inform the selection of conditional grantees. The TX BoS CoC Board has the discretion to include in the CoC’s Consolidated Application one or more project applications for the funding amount available for New Projects. The TX BoS CoC Board may also give TX BoS CoC staff direction to negotiate with conditional grantees on project applications that includes but is not limited to budget negotiations, to best maximize overall score and increase chances of receiving bonus project funding.

After the IRT scores all Renewal and New Projects within the CoC based on the Renewal Project Scoring Criteria and the New Project Scoring Criteria, the TX BoS CoC Board and the CoC Lead Agency will rank applications for the Priority Listing and for submission to HUD.

Ranking Policy

HUD requires Collaborative Applicants to rank all projects in two tiers. Tier 1 is defined by HUD in the CoC Program NOFA as a percent of the CoC’s Annual Renewal Demand (ARD) approved by HUD on the final HUD-approved Grant Inventory Worksheet (GIW). Tier 1 projects are traditionally protected from cuts. Tier 2 is the difference between Tier 1 and the CoC’s ARD plus any amount available for the
permanent housing bonus, as described in the NOFA. Tier 2 projects have to compete nationally for funding.

The TX BoS CoC’s HMIS Project will be ranked first in Tier 1, per the TX BoS CoC Board, as the board views it as an essential project to effectively operate the CoC. Projects renewing for the first time that were funded as part of the prior CoC Program competition that have not been in operation for at least one year, will be ranked in the bottom of Tier 1 and ahead of first-time Renewal Projects that have been in operation for at least one year. The CoC Planning Project is not ranked, according to the NOFA.

Ranking:

**Tier 1:**
1. HMIS Project
2. Scored Permanent Housing (PH) Renewal Projects (lowest-scoring projects may drop to Tier 2)
3. Re-Allocated Projects (lowest-scoring projects may drop to Tier 2)
4. First time Permanent Housing (PH) Projects and other Renewal Projects that have not been in operation for at least one year
5. Tier 2: Bonus Projects and remaining Renewal Projects and remaining Re-allocated Projects (Bonus Projects may out-rank Renewal Projects and/or Re-Allocated Projects of the same component type by score in Tier 2)

**Tier 2:** Project components will be organized to best maximize the CoC Consolidated Application’s overall score.

**Re-Allocation Process**

Any funds reallocated as part of recapturing unspent funds, voluntary re-allocation, or involuntary reallocation will be made available for reallocation to create New Projects during the local competition/application process. In the FY 2016 competition these funds will first go toward fully funding the TX BoS CoC HMIS Project, and remaining funds will be re-allocated for New Project(s).

**Unspent Funds**

Projects that are not fully expended by the end of the grant term or are underspending during the grant term are subject to the re-allocation process. Projects that have underspent their award by 7% or more for the prior two grant cycles may have their funding reduced, and those funds would be reallocated for New Project(s). The TX BoS CoC will recapture 50% of the 2-year average of the unspent funds.

**Voluntary Re-Allocation**

As part of the local competition/application process for inclusion in the CoC Program Consolidated Application, current CoC Program grantees are asked whether they wish to voluntarily re-allocate some or all of their funding. Such re-allocated funds are pooled for re-allocation to New Project(s).

**Involuntary Re-Allocation**
Projects with poor performance, that are not serving the intended population, and/or that have unresolved HUD monitoring findings are subject to re-allocation.

Conditional Renewal
The TX BoS CoC will establish a performance threshold at 75% of the top scoring Renewal Project. For example, if the top score is 100, the minimum threshold will be set at 75.

Projects scoring below the threshold will be asked to develop a plan to address performance issues by the next year’s competition (a Performance Improvement Plan). If problems continue, projects may have funding re-allocated in the following competition. Applicants may appeal the decision, using the TX BoS CoC’s written appeals process, and the appeal must be considered by the TX BoS CoC Board.
**Appendix 1**

**2016 Texas Balance of State Continuum of Care Renewal Permanent Housing (PH) Project Score Sheet**

<table>
<thead>
<tr>
<th>Applicant Name:</th>
<th>Project Name:</th>
<th>Type:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Percent (%)</th>
<th>Scoring Instructions</th>
<th>Score</th>
<th>Total Possible Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent participants remaining in PH for 6 months or more</td>
<td>≥83%</td>
<td>APR: Q27, Row 4, Total Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 83% = 10 points &lt;83% - 78% = 7.5 points &lt;78% = 0 points</td>
</tr>
<tr>
<td>Percent participants who remained in project as of the end of the operating year or exited to PH during the operating year</td>
<td>≥77%</td>
<td>APR: Q27a1, Permanent Destinations Subtotal, Row 7, Total Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 77% = 10 points &lt;77% - 72% = 7.5 points &lt;72% = 0 points</td>
</tr>
<tr>
<td>Percent exits to Living with Family, Permanent and Living with Friends, Permanent</td>
<td>≤14%</td>
<td>APR: Q29a1, Permanent Destinations, Row 8, Total Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>0 - 14% = 10 points &gt;14% - 19% = 7.5 points &gt;19% = 0 points</td>
</tr>
</tbody>
</table>

**Housing Stability Score**: 0 / 30

**Access to Income and Benefits**

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Criteria Goal</th>
<th>Percent (%)</th>
<th>Scoring Instructions</th>
<th>Score</th>
<th>Total Possible Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent participants age 18 or older with earned income at exit</td>
<td>≥17%</td>
<td>APR: Q26a1, Row 1, Adults Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 17% = 10 points &lt;17% - 12% = 7.5 points &lt;12% = 0 points</td>
</tr>
<tr>
<td>Percent participants age 18 or older who have non-cash benefits at exit</td>
<td>≥27%</td>
<td>APR: Q26a1, Total, Adults Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 27% = 10 points &lt;27% - 21% = 7.5 &lt;21% = 0 points</td>
</tr>
<tr>
<td>Percent participants with 1+ source of non-cash benefits at exit</td>
<td>≥32%</td>
<td>APR: Q26a2, Row Two, Total Column</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 32% = 10 points &lt;32% - 27% = 7.5 &lt;27% = 0 points</td>
</tr>
<tr>
<td>Percent participants age 18 or older who maintained or increased their total income (from all sources) as of the end of the operating year or program exit</td>
<td>≥73%</td>
<td>APR: Q36a or b).2a., Column 2</td>
<td>#DN/0/1</td>
<td>10</td>
<td>100 - 73% = 10 points &lt;73% - 68% = 7.5 &lt;68% = 0 points</td>
</tr>
</tbody>
</table>

**Access to Income and Benefits Score**: 0 / 40

**Meeting Community Need**

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Percent (%)</th>
<th>Scoring Instructions</th>
<th>Score</th>
<th>Total Possible Points</th>
</tr>
</thead>
</table>

**Notes**

- APR: Q27
- APR: Q27a
- APR: Q29a
### Average daily bed utilization

- **>84%**: 10 points
- **84% - 79%**: 7.5 points
- **<79%**: 0 points

### Meeting Community Need Score

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Percentage (%)</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Percent clients with no income at entry</strong></td>
<td>≥76%</td>
<td>#DIV/0!</td>
<td>100-76% = 10 points</td>
<td>10</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td><strong>Percent entries from Homeless Situations</strong></td>
<td>≥76%</td>
<td>APR: Q20a1, Subtotal, Without Children Column</td>
<td>#DIV/0!</td>
<td>100-76% = 10 points</td>
<td>10</td>
<td>10</td>
</tr>
</tbody>
</table>

### Targeting Hard to Serve Score

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Your Answer</th>
<th>Percentage (%)</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HIC/PIT submitted on time</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes = 5 points</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td><strong>Project Capacity</strong></td>
<td></td>
<td></td>
<td>No = 0 points</td>
<td></td>
<td></td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Project Monitoring Results

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Percentage (%)</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Did the applicant submit a letter indicating they were not monitored?</strong></td>
<td>Yes</td>
<td></td>
<td>Yes = 5 points</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Did the Applicant submit a final monitoring letter or most recent communication?</strong></td>
<td>Yes</td>
<td></td>
<td>Yes = 5 points</td>
<td>5</td>
<td>5</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Number of unresolved HUD monitoring findings</strong></td>
<td>0 (zero)</td>
<td></td>
<td>-5 points for each finding, up to -15 points</td>
<td></td>
<td></td>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Cost Effectiveness

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Your Answer</th>
<th>Percentage (%)</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2013-2014 Total CoC Funds Awarded</strong></td>
<td>≤5% unspent funds</td>
<td>#DIV/0!</td>
<td>0-5% = 7.5 points</td>
<td>7.5</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2014-2015 Total CoC Expenditures</strong></td>
<td>≤5% unspent funds</td>
<td>#DIV/0!</td>
<td>0-5% = 7.5 points</td>
<td>7.5</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>On track to spend 2015-16 CoC Award</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes = 5 points</td>
<td>5</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Money Recaptured by HUD</strong></td>
<td>No</td>
<td>No</td>
<td>No = 0 points</td>
<td></td>
<td></td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Project Monitoring Results Notes

**Notes**: Points for each finding, up to -15 points.
<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Your Answer</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
</table>
| Did the Grantee attend Provider Connect?            | Yes                                       |             | Yes = 10 points  
No = 0 points                                                                 |       | 10                    |       |
| Did the Grantee attended five (5) mandatory webinars? | Attended all (5 of 5) mandatory webinars. |             | 5 of 5 = 10 points  
4 of 5 - 3 of 5 = 7.5 points  
2 of 5 - 1 of 5 = 5 points  
0 of 5 = 0 points                                                                 |       | 10                    |       |
| Continuum of Care (CoC) Participation Score         |                                            |             |                                                                                      |       | 10                    |       |

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing First and Low Barrier</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>17.5</td>
<td></td>
</tr>
</tbody>
</table>
| Does the project follow a Housing First Approach?   | Yes                                       | Application: Section 3B, Q3d |             | Yes = 10  
No = 0                                                                 |       | 10                    |       |
| Housing First Narrative: Focus on accessing and sustaining permanent housing quickly, services provided are voluntary and promote housing stability, standard lease agreement, reduces barriers to entry (sobriety, criminal record, income, employment etc.) | Complete and concise | Housing First Narrative |             | Complete and concise = 7.5 points  
Somewhat = 5 points  
Not = 0 points                                                                 |       | 7.5                   |       |
| Housing First and Low Barrier Score                 |                                            |                   |             |                                                                                  |       | 17.5                  |       |

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Point Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Populations Served Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
| Is the program exclusively serving a special population: Youth (under 25), Domestic Violence, Veterans, Families with Children, or Chronically Homeless? | At least one box selected | Application: Section 3B, Q4 |             | 2 One box selected = 10 points  
No boxes selected = 0 points                                                                 |       | 10                    |       |
<p>| Special Populations Served Score                     |                                            |                   |             |                                                                                  |       | 10                    |       |
| Total Score                                          |                                            |                   |             |                                                                                  |       | 192.5                 |       |</p>
<table>
<thead>
<tr>
<th>Proposed Project Impact</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Instructions</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of participants projected during operating year</td>
<td>Application: SA &quot;characteristics&quot; table, total persons (column 4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of adult participants</td>
<td>Application: SA &quot;characteristics&quot; table, total adults over age 24 + Adults ages 18-24 (column 4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Applicant’s Experience

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Instructions</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of experience utilizing Federal funds and performing activities proposed, given funding and time limitations.</td>
<td>≥5 years of experience</td>
<td>Project Application: Section 2B Q1</td>
<td></td>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description of experience leveraging other Federal, State, local, and private sector funds</td>
<td>≥5 years of experience</td>
<td>Project Application: Section 2B Q2</td>
<td></td>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description of basic organization and management structure, including evidence of internal and external management coordination and an adequate financial accounting system</td>
<td>Complete and concise</td>
<td>Project Application: Section 2B Q3</td>
<td></td>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any unresolved monitoring or audit findings for any HUD grants?</td>
<td>No</td>
<td>Project Application: Section 2B Q4a</td>
<td></td>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Project Description

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Description: Should describe community needs, target population, plan for housing identification, proposed outcomes, community partners, and why CoC support is needed.</td>
<td>Complete and concise</td>
<td>Project Application: Section 3B Q2</td>
<td></td>
<td>Complete and concise = 7.5 points Somewhat = 5 points Not = 0 points</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Applicant has an estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work</td>
<td>Complete and concise</td>
<td>Project Application: Section 3B Q2</td>
<td></td>
<td>Complete and concise = 7.5 points Somewhat = 5 points Not = 0 points</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Applicant will participate in a CoC Coordinated Entry Process</td>
<td>Yes</td>
<td>Project Application: Section 3B Q1</td>
<td></td>
<td>Yes = 5 points No = 0 points</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Applicant has a specific population focus.</td>
<td>One or more boxes selected</td>
<td>Project Application: Section 3B Q4</td>
<td></td>
<td>One or more boxes selected = 10 points No = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Applicant will quickly move participants into permanent housing</td>
<td>Yes</td>
<td>Project Application: Section 3B Q4a</td>
<td></td>
<td>Yes = 5 points No = 0 points</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The proposed project will exclusively serve chronically homeless (CH)</td>
<td>Yes</td>
<td>Project Application: Section 4B, Total Dedicated CH Beds matches Total Beds</td>
<td></td>
<td>Yes = 10 points No = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The proposed project will be low barrier</td>
<td>All boxes except &quot;None of the above&quot; selected</td>
<td>Project Application: Section 3B Q5b</td>
<td></td>
<td>All boxes except &quot;None Selected&quot; = 10 points No = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The proposed project will not terminate participants for specific reasons</td>
<td>All boxes except &quot;None of the above&quot; selected</td>
<td>Project Application: Section 3B Q5c</td>
<td></td>
<td>All boxes except &quot;None Selected&quot; = 10 points No = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The proposed project will follow a "Housing First" approach.

**Housing First Narrative: Focus on assessing and sustaining permanent housing quickly, services provided are voluntary and promote housing stability, standard lease agreement, reduces barriers to entry (sobriety, criminal record, income, employment etc.).**

If applicable, describes the proposed development activities and the responsibilities that the Applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.

| Project Description Total Score | 0 | 90 |

### Supportive Services for Participants

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>The proposed policies and practices are consistent with laws related to providing education services to individuals and families, e.g., the McKinney-Vento Act</td>
<td>Yes</td>
<td>Project Application: Section 4A Q1a</td>
<td></td>
<td>Yes = 7.5 points No = 0 points</td>
<td>7.5</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>The Applicant has a designated staff person to ensure children are enrolled in school and receive educational services, as appropriate</td>
<td>Yes or N/A</td>
<td>Project Application: Section 4A Q1b</td>
<td></td>
<td>Yes or N/A = 7.5 points No = 0 points</td>
<td>7.5</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>The Applicant has a plan for how participants will be assisted to obtain and remain in permanent housing</td>
<td>Complete, concise, and describes methods and procedures</td>
<td>Project Application: Section 4A Q2</td>
<td></td>
<td>Complete and concise = 7.5 points Somewhat = 5 points Not = 0 points</td>
<td>7.5</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>The Applicant has a plan for how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently</td>
<td>Complete, concise, and describes methods and procedures</td>
<td>Project Application: Section 4A Q3</td>
<td></td>
<td>Complete and concise = 7.5 points Somewhat = 5 points Not = 0 points</td>
<td>7.5</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

### Supportive Services Type and Frequency

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment of Service Needs is provided.</td>
<td>Annually (or more)</td>
<td>Project Application: Section 4A Q4, Column &quot;Supportive Services&quot; and Section 4A Q4, Column &quot;Frequency&quot;</td>
<td></td>
<td>Annually (or more) = 1 points Less than annually = 0 points</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Case management is provided.</td>
<td>Monthly (or more)</td>
<td>Project Application: Section 4A Q4, Column &quot;Supportive Services&quot; and Project Application: Section 4A Q4, Column &quot;Frequency&quot;</td>
<td></td>
<td>Monthly (or more) = 1 points Less than monthly = 0 points</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Number of supportive services provided, not including Assessment of Service Needs or Case Management</td>
<td>≥7 of 14 supportive services</td>
<td>Project Application: Section 4A Q4, Column &quot;Supportive Services&quot; and Section 4A Q4, Column &quot;Frequency&quot;</td>
<td></td>
<td>≥7 = 3 points &gt;7 = 0 points</td>
<td>3</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>The Applicant will provide transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs</td>
<td>Yes</td>
<td>Project Application: Section 4A Q5a</td>
<td></td>
<td>Yes = 5 points No = 0 points</td>
<td>5</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>The Applicant will use a single application form for four or more mainstream programs</td>
<td>Yes</td>
<td>Project Application: Section 4A Q5b</td>
<td></td>
<td>Yes = 10 points No = 0 points</td>
<td>10</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>The Applicant will provide regular follow-ups with participants to ensure mainstream benefits are received and renewed</td>
<td>Yes</td>
<td>Project Application: Section 4A Q5c</td>
<td></td>
<td>Yes = 5 points No = 0 points</td>
<td>5</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>The Applicant will make SSI/SSDI technical assistance available to participants</td>
<td>Yes</td>
<td>Project Application: Section 4A Q6</td>
<td></td>
<td>Yes = 5 points No = 0 points</td>
<td>5</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

### Outreach for Participants – Serving Literally Homeless

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Your Answer</th>
<th>Scoring Criteria</th>
<th>Score</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Supportive Services for Participants Total Score**

0 | 30

**Supportive Services Type and Frequency Total Score**

0 | 30
### PSH Standard Performance Measures

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Scoring Criteria</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Measure: Persons remaining in permanent housing at the end of the operating year or exiting to permanent housing destinations during the operating year</td>
<td>≥77% Performance Measure spreadsheet</td>
<td>100-77% = 10 points, &lt;77-72% = 7.5 points, &lt;72% or less = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income Measure: Adults who maintained or increased their total income (from all sources) at the end of the operating year or project exit</td>
<td>≥73% Performance Measure spreadsheet</td>
<td>100-73% = 10 points, &lt;73-68% = 7.5 points, &lt;68% or less = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### BH Standard Performance Measures

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Scoring Criteria</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Measure: Persons exiting to permanent housing destinations during the operating year</td>
<td>≥77% Performance Measure spreadsheet</td>
<td>100-77% = 10 points, &lt;77-72% = 7.5 points, &lt;72% or less = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing Measure: Persons who were placed into permanent housing within 30 days of entry into project</td>
<td>≥77% Performance Measure spreadsheet</td>
<td>100-77% = 10 points, &lt;77-72% = 7.5 points, &lt;72% or less = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income Measure: Adults who increased their total income for all sources as of the end of the operating year or project exit</td>
<td>≥73% Performance Measure spreadsheet</td>
<td>100-73% = 10 points, &lt;73-68% = 7.5 points, &lt;68% or less = 0 points</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Budget

<table>
<thead>
<tr>
<th>Scored Category</th>
<th>Goal</th>
<th>Where to Reference</th>
<th>Percentage (%)</th>
<th>Scoring Criteria</th>
<th>Total Possible Points</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget Costs</td>
<td>Reasonable considering the project's activities.</td>
<td>Project Application: Sections 6E, 6F, 6G, 6J</td>
<td>Reasonable = 7.5 points, Somewhat = 5 points, Not = 0 points</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budget Line Item</td>
<td>Each budget line item is described with detail and quantity.</td>
<td>Project Application: Sections 6E, 6F, 6G, 6J</td>
<td>Sufficient detail and quantity = 7.5 points, Somewhat = 5 points, Not = 0 points</td>
<td>7.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent administrative funding requested of the total budget request</td>
<td>Requests ≤ 7%</td>
<td>Project Application: Section 6I, 8 Admin</td>
<td>0-7% = 5 points, &gt;7% = 0 points</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scored Category</td>
<td>Goal</td>
<td>Where to Reference</td>
<td>Your Answer</td>
<td>Percentage (%)</td>
<td>Scoring Criteria</td>
<td>Score</td>
</tr>
<tr>
<td>-----------------</td>
<td>------</td>
<td>-------------------</td>
<td>-------------</td>
<td>----------------</td>
<td>------------------</td>
<td>-------</td>
</tr>
<tr>
<td>(\geq 77%)</td>
<td>APR: Q29a1, Permanent Destinations, Totals for Rows 1-6</td>
<td>#DIV/0!</td>
<td>(&lt;77% = -10) points</td>
<td>-10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>APR: Q29a2, Permanent Destinations, Totals for Rows 1-6</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APR: Q29a3, Permanent Destinations, Subtotal Row, Total Column</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APR: Q29a2, Permanent Destinations, Subtotal Row, Total Column</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(\leq 5%) Unspent Funds</td>
<td>2014-15 Total Grant Award (Pre-populated)</td>
<td>#DIV/0!</td>
<td>(&gt;5% = -10)</td>
<td>-10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOCCS Report - actual spent</td>
<td>-</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Project Score</td>
<td>0</td>
<td></td>
<td></td>
<td>257.5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Percent TH participants moving from TH to PH at exit (excluding exits to permanent tenure with friends/family)

2014-2015 Unspent Funds

Reallocated Projects ONLY Score
Appendix F

Policy on HUD Monitoring of CoC Program-funded Projects
HUD Monitoring of CoC Program-funded Projects

Approved by TX BoS CoC Board 2-10-2016

Policy:

Projects in the TX BoS CoC that are funded by the U.S. Department of Housing and Urban Development’s (HUD’s) Continuum of Care (CoC) Program are required to notify Texas Homeless Network (THN) within 48 hours of receiving a monitoring notice from HUD.

Projects will copy THN on all communication to and from HUD regarding the monitoring.

Projects will ensure that THN receives a final letter from HUD stating that all findings, if any, have been closed.

Results of HUD monitorings could impact projects’ scoring in the CoC’s competition for CoC Program funding.

Failure to comply with this requirement could impact projects’ scoring in the CoC’s competition for CoC Program funding.

Procedure:

Projects shall notify the Director of Continuum of Care Programs at THN via e-mail that the project will be monitored within 48 hours of notification from HUD.

Projects shall copy the Director of Continuum of Care Programs at THN via e-mail on all communication to and from HUD regarding the monitoring.

Projects shall e-mail a copy of the final letter from HUD stating that any and all findings have been closed.

The current Director is Kameron Fowler, kameron@thn.org, 512-861-2119.
Appendix G

Policy on Late Submission of Project Applications
CoC Program Application Process/Local Competition

Late Submission of Project Applications

Approved by the TX BoS CoC Board 2-10-2016

Policy:
Project Applicants shall adhere to all due dates and deadlines related to the TX BoS CoC’s application process, also known as the local competition, for HUD Continuum of Care (CoC) Program funding. Project Applications must be submitted by the due date and time.

If a Project Application is not submitted by the due date and time, the TX BoS CoC Board will determine potential consequences, including but not limited to ranking, whether the project is ineligible for inclusion in the final TX BoS CoC’s Consolidated Application or will receive reduced funding.

Procedure:
THN staff will notify the Project Applicant via email when a Project Application is not submitted by the due date and time. THN staff will send a copy of this policy regarding late submissions.

THN staff will notify all CoC Board members via e-mail when a Project Application is not submitted by the due date and time.

THN staff will schedule a webinar meeting with the CoC Board members to discuss potential consequences. The meeting will be held within 2 business days of the day that the Project Application was submitted late.

When determining potential consequences, the CoC Board will consider the following factors:

- Whether or not the Project Applicant has maintained regular communication with THN, as the CoC Lead Agency, during the application process/competition;
- Whether or not the Project Applicant has maintained regular communication with THN, as the CoC Lead Agency, throughout the prior year;
- How the Project has performed during the prior year;
- The rate of expenditures for the project in the prior year, as evidenced by LOCCS draw-downs;
• The potential impact of a decrease or loss of funding to the community where the project operates; and
• The potential impact of a decrease or loss of funding to the TX BoS CoC.

THN staff will provide information and data, as requested by CoC Board members.

The CoC Board will determine consequences.

THN staff will inform the Project Applicant via email of the Board’s decision.

THN staff will inform HUD staff via email of the Board’s decision.

THN staff will maintain records of the proceedings and decisions related to the matter.
Appendix H

Ranking the HMIS Project Application as the First Project in the Priority Listing
Ranking the HMIS Project First in the Priority Listing for HUD CoC Program Funds

Approved by the TX BoS CoC Board 6/8/2016

The TX BoS CoC’s HMIS Project will be ranked first in Tier 1 in the CoC Priority Listing, as the Board views it as an essential project to effectively operate the CoC.
Appendix I

Texas Balance of State Continuum of Care Housing Crisis Response System Written Standards
Texas Balance of State Continuum of Care Housing Crisis Response System Written Standards

Introduction
This document is an outline of the programs that comprise Texas Balance of State Continuum of Care (TX BoS CoC)’s Housing Crisis Response System. The purpose of this document is to establish policies and procedures for evaluating eligibility for program types, prioritization guidelines for persons entering into a homeless assistance program, duration of assistance, and to determine the minimum or maximum contribution of households receiving rental assistance. This document also includes overarching Essential Elements that apply to all programs within the system either current or in the future.

Definitions

Chronically Homeless: To be considered chronically homeless, an individual or head of household must meet the definition of “homeless individual with a disability” from the McKinney-Vento Act, as amended by the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act and have been living in a place not meant for human habitation, in an emergency shelter, or in a safe haven for the last 12 months continuously or on at least four occasions in the last three years where those occasions cumulatively total at least 12 months.4

Contact: A contact is defined as an interaction between a worker and a participant. Contacts may range from simple a verbal conversation between the street outreach worker and the participant about the participant’s well-being or needs or may be a referral to service.

Continuum of Care (CoC): The group organized to carry out homelessness planning for a community under the HEARTH Act. Responsibilities of the CoC include the operation of the CoC; designating and operating an HMIS; and Continuum of Care planning.

Coordinated Entry System (CES): CES serves as TX BoS CoC’s coordinated entry process that serves persons at risk for or experiencing homelessness in TX BoS CoC. The process includes standardized structures and protocols that streamline screening, assessment and referral processes for those experiencing homelessness.

Engagement: Engagement is defined as the date on which an interactive participant relationship results in a deliberate participant assessment or beginning of a case plan.

Enrollment: The point at which a client has formally consented to participate in services.

Homeless: The HEARTH definition of “homeless” consists of four categories. The categories are: (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for

human habitation and who is exiting an institution where he or she temporarily resided; (2) individuals and families who will imminently lose their primary nighttime residence; (3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and (4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.⁵

**Homeless Management Information System (HMIS):** A database that allows agencies within the housing crisis response system to collect basic demographic information, track services, update case plans, and track outcomes at the project and participant level.

**Housing Case Management:** Housing Case Management is a collaborative process that assesses, plans, implements, coordinates, monitors, and evaluates the options and services required to meet the client’s housing and human service needs. It is characterized by advocacy, communication, and resource management and promotes quality and cost-effective interventions and outcomes. The case management services are comprehensive in nature to ensure a more effective service delivery but are tailored to the varying needs of the individual &/or family.

The process includes identifying the individual & /or family's strengths and goals determined in the Individualized Housing Assistance Plan (IHAP) developed before/ & or during housing navigation. The case manager &/or Housing Navigator works with the individual &/or family to achieve short- and long-term goals, helping them access the necessary services. Although locating and obtaining housing is usually the primary goal, this cooperative relationship addresses the following:

- Provide housing stabilization services that include arranging, coordinating, linking and monitoring the delivery of services that assist participants to obtain and sustain housing stability
- Monitoring program participant progress
- Assuring that the rights of participants are protected
- Development of individualized housing plans for each program participant
- Counseling, education, employment, and life skills goals

**Housing First:** Housing First is an approach to homeless assistance that prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold. Housing First is a requirement of Tx BoS CoC funded projects. Projects using a housing first approach often have supportive services; however, participation in those services is based on the needs and desires of the program participant. The TX BoS CoC will review system and project-level eligibility criteria to identify and remove barriers to accessing services and housing that are experienced by homeless individuals and families.

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**VI-SPDAT and F-VI-SPDAT**: The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) is the result of a combination of two tools – the Vulnerability Index (VI) survey created by Community Solutions for use in street outreach, which helps to determine the chronicity and medical vulnerability of homeless persons, and the Service Prioritization Decision Assistance Tool (SPDAT) created by OrgCode as an intake and case management tool. Providers in the TX BoS CoC must use the score generated from the tool to prioritize households for housing assistance.

**Federal Regulations**

All projects must comply with the Fair Housing Act (including Equal Access and Family Separation), the Equal Access to Housing in HUD Programs regardless of Sexual Orientation or Gender Identity regulations, and the Americans with Disabilities Act regulations.

**Overall Essential Elements**

All programs within the TX BoS CoC Housing Crisis Response System, current or future, must adhere to the following Essential Elements:

- All programs will participate in HMIS (participation is defined in the HMIS Policies and Procedures)
- All programs will participate in CES and adhere to its policies and procedures (participation is defined in the CES Policies and Procedures)
- All agencies operating programs will be, at a minimum, a non-voting member of the Continuum of Care (Continuum of Care Governance Charter)
- All programs will utilize a Housing First approach
- All programs will utilize all CoC-standardized forms when provided and other types of documentation in order to facilitate agencies’ ability to successfully comply with HUD requirements. The number of these forms and other types of documentation will remain as minimal as possible
- All programs will operate within a philosophy of providing Client/Participant Choice
- All programs abide by and adopt HUD/CoC Policies related to: ADA, Fair Housing, Equal Access & Family Separation, Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity
- All programs agree to abide by and consistently apply these Written Standards

**Program Policies**

Please refer to the TX BoS CoC Policies and Procedures for policies and procedures.

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Engagement Programs/Services
Engagement Programs/Services are those services (where available) provided to participants before they reach the front door of the homeless services system (the front door being the shelter system). This may include services to both those already homeless as well as to those at imminent risk of losing their housing.

Outreach

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Low barrier/Low demand street outreach or engagement that provides basic needs assistance and linkage to permanent housing. | • Develop trust to engage hard to reach homeless  
• Have staff to complete VI-SPDATs with all outreach participants, then to complete full SPDATs with anyone scoring on the VI-SPDAT for Permanent Housing  
• Provides contact, engagement and enrollment services as defined by these standards  
• Provide navigation services to link those served with housing  
• Provide access to basic needs including identification; health care services, etc.  
• Coordination with other outreach teams to avoid duplication of services and optimize coverage  
• Engage in efforts to determine participants’ eligibility  
• Hours of Operation include business and nonbusiness hours | None | Individuals and families experiencing homelessness who are not linked to other services. Service preference should be given to the unsheltered. | % of participants enrolled in the program will meet the definition of unsheltered  
% of all enrolled participants develop a housing goal  
% of those who develop a housing goal exit homelessness to permanent housing  
% retaining housing at one month and two year intervals  
The extent to which persons who exit homelessness to Permanent Housing destinations return to homelessness within 6 and 24 months  
Increase in placements to permanent housing destinations, temporary destinations (except for a place not meant for human habitation), and some institutional destinations |
## Homelessness Prevention (HP)

<table>
<thead>
<tr>
<th>Services Only</th>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Stabilization services to prevent shelter entrance and promote housing retention. Expanded coordination of legal services programs to cover more tenants facing eviction. | • Have identified staff to complete an individualized assessment that assesses household needs, financial needs (including job training and placement), and eligibility for mainstream resources
• Creates a housing stabilization plan with project participants
• Provides needed housing stabilization services
• Provides linkages to mainstream resources based on eligibility and need
• Services include: mediation, legal services and utility financial assistance, relocation assistance | Services for up to 18 months for legal and mediation Utility and Relocation assistance once every 12 months | Those at imminent risk of being homeless (exact documentation needed to determine eligibility is based on programs’ funding sources) | • % of household that receive assistance will not become literally homeless within 6 months
• % of household that receive assistance will not become literally homeless within 12 months
• % of household that receive assistance will not become literally homeless within 2 years |
<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Short to medium term financial assistance and stabilization services to prevent shelter entrance and promote housing retention. Expanded coordination of legal services programs to cover more tenants facing eviction. | • Have dedicated staff to complete an individualized assessment that assesses household needs, financial needs (including job training and placement), and eligibility for mainstream resources  
• Provides housing stabilization plan  
• Provides needed housing stabilization services including both financial and supportive services  
• Provides linkages to mainstream resources based on eligibility and need  
• Services include: mediation, legal services, relocation assistance and utility financial assistance  
• Financial Assistance includes: 6 months of rental and/or utility arrears; 1-time security deposit and/or utility deposit; 12 months of rental assistance | Financial assistance up to 18 months based on need and one-time assistance for security and/or utility deposit if needed (need for these services determined by case managers utilizing a risk matrix). | Those at imminent risk of being homeless. | • % of household that receive assistance will not become literally homeless within 6 months.  
• % of household that receive assistance will not become literally homeless within 12 months.  
• % of household that receive assistance will not become literally homeless within 2 years. |
## Diversion

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| A program/service that diverts homeless families and individuals from entering shelter by helping them to identify immediate alternate housing arrangements and connecting them with services and financial assistance, if necessary. | • Completes housing barrier needs assessment  
• Creates a housing stabilization plan with the participant  
• Provides conflict mediation  
• Provides housing location services  
• Provides housing stabilization services  
• Provides linkages to mainstream resources  
• Provides flexible financial assistance to maintain or obtain housing (car repairs, food cards, bus tickets, etc.). | Financial assistance in a 12 month period based on individual programs | Homeless or “at-risk” families and individuals presenting for shelter | • Not yet established |
**Temporary Housing**
Time-limited temporary housing where individuals experiencing homelessness may stay and receive supportive services that are designed to enable individuals to move into permanent housing

**Emergency Shelter (ES)**

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Low barrier, site based, temporary shelter to deal with an individual’s or family’s immediate housing crisis. The project must meet the following guidelines:  
- the primary intent of the project is to serve homeless persons,  
- the project verifies homeless status as part of its eligibility determination, and  
- the actual project participants are predominantly homeless | • Low programmatic barriers to entry and shelter stay  
• Operates 24 hours a day / 7 days a week  
• Sobriety should not be a condition for entry  
• Identification is not a condition for entry  
• Safe physical environment  
• Completes VI-SPDATs (as noted in the CES Policies and Procedures)  
• Creates a housing stabilization plan with the participant  
• Provides housing case management  
• Provides at least one meal per day per participant  
• Provides linkages to mainstream resources and services, including TANF, SNAP, SSI/SSDI, Medicaid/ Medicare, Children’s Protective Services (CPS) etc. (case managers expected to help participants apply for benefits and navigate systems as needed).  
• Cooperatively works with service providers within the system to provide needed services to consumers to quickly move them to permanent housing | Average length of stay under 90 days | All literally homeless who meet Categories 1, 2, or 4 of HUD’s definition of homeless | • % of those served will receive a VI/SPDAT  
• Of those who stay in shelter more than 14 days, % will establish a housing goal  
• % will exit shelter to a permanent housing destination. This percentage should increase each year.  
• The extent to which persons who exit homelessness to permanent housing destinations return to homelessness within 6 to 24 months *Shelters targeting special populations, such as youth or those fleeing domestic violence, may have different outcomes, with exits to transitional housing as an acceptable and appropriate outcome |
<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inclement Weather (Hot or Cold) Weather Shelters</td>
<td>Low programmatic barriers to entry and shelter stay • As funding allows. Ideally, open during the day when there is inclement weather • Sobriety is not a condition for entry • Identification is not a condition for entry • Safe physical environment • Access to sleeping space, bathing opportunities, and food items • Case management is provided to the extent that funding and staffing capacity allows.</td>
<td>Average length of stay under 90 days</td>
<td>All literally homeless who meet Categories 1, 2, or 4 of HUD’s definition of homeless</td>
<td>% of participants served will be entered into HMIS in accordance with the HMIS Policies &amp; Procedures.</td>
</tr>
</tbody>
</table>
## Transitional Housing (TH)

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
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</thead>
<tbody>
<tr>
<td>Bridge Housing</td>
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</tbody>
</table>
| Short-term temporary housing to facilitate the movement to permanent housing for an individual or family who has accepted an offer of permanent housing (that has been documented) but has not moved in yet. | • Temporary Housing is provided  
• Participants are required to pay 30% of their adjusted gross income towards their rent.  
• Services are not required  
• Access to Permanent Housing Service Provider is allowed for each participant/family in bridge housing  
• May be CoC funded RRH if a CoC funded PSH unit has already been identified and individual/family met CH definition prior to entering bridge housing | Average length of stay under 90 days | Literally Homeless that meet Category 1 or 4 of HUD’s definition of homeless AND Has accepted an offer of Permanent Housing but is awaiting housing location or approval | % of participants who move into permanent housing within 90 days |
<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time-limited (up to 24 months) housing program intended to facilitate the movement of homeless individuals and families to permanent housing. Homeless persons may live in transitional housing programs for up to 24 months and receive supportive services that enable them to live more independently. Settings for TH: Transition in Place, scattered site, or project based.</td>
<td>• Household holds lease and/or occupancy agreement. Occupancy agreement must comply with HUD requirements. • Participants are required to pay 30% of their adjusted gross income towards their rent. • Barriers to entry should be low, but a project may require specific eligibility criteria to effectively serve priority populations (e.g., willingness/desire to participate in services). • If Project-based: 24-hour residential environment (safe/structured setting, provision of meals or cooking space, access to laundry, storage, etc.) • Participants supported to establish and implement housing stabilization plan to secure permanent housing upon program exit. Services that are tailored to the target population may include: o Employment assessment and connection to employment services and/or education/GED services (as directed by the assessment) o Financial counseling to help resolve rental arrears and/or debt, to establish budgeting skills, to establish savings plan, and /or other money management skills needed. o Connections to mainstream benefits and services, including TANF, SNAP, SSI/SSDI, Medicaid/ Medicare, CPS, etc. (case managers expected to help participants apply for benefits and navigate systems as needed). o Housing search assistance (either directly or through coordination with a partner). o Assistance building (re-building) family and community support networks.</td>
<td>Up to 2 years of housing subsidy and case management Up to 6 months of follow-up services provided after exit</td>
<td>Literally Homeless that meet Category 1 or 4 of HUD’s definition of homeless AND • Household is not able to be diverted, AND • Household is not initially slated for PSH, AND • Household does not meet the definition for being chronically homeless.</td>
<td>• % households that exit to permanent housing • % of all participants that gain employment income • % of all participants that gain non-employment cash income • % of participants that obtain mainstream benefits • The extent to which persons who exit homelessness to permanent housing destinations return to homelessness within 6 to 24 months</td>
</tr>
</tbody>
</table>
**Permanent Housing (PH)**

Housing that is safe and stable where the household has a lease or sub-lease in their name, a subsidy is provided and voluntary services (as determined by assessment) to help in retaining the housing.

**Rapid Rehousing (RRH)**

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Short to medium term housing assistance program that rapidly moves homeless individuals and families, regardless of disability or background, into appropriate permanent housing with needed services to maintain stability. | - Individuals and families placed in leased based permanent housing with an initial lease of 12 months. Household holds lease and may remain in unit permanently (i.e., following exit from the program).  
- The units in which rental assistance is provided must comply with HUD’s rental reasonableness standards.  
- Security Deposits: A security deposit may not exceed 1.5 times the rent  
- Utility Deposits, Payments, and/or Arrearages: Maximum 6 months or $2,500, whichever comes first  
- An individual or family may receive any combination of the following: short to medium-term rental assistance, and/or security deposit, and/or utility deposit, or arrears.  
- Participants that have zero income at any point while receiving RRH assistance will not be denied assistance if they are otherwise eligible for assistance.  
- Participants with zero income will not be required to pay a portion of their income towards rent. If it appears that the participant will need a longer subsidy | **Short-term rental assistance**: up to 3 months rental assistance  
**Medium-term rental assistance**: 4-18 months of rental assistance. Participants receiving medium term rental assistance will be able to receive rental assistance in 3-month increments, up to a total of 18 months. | Category 1 or 4 homeless with an income of less than 30% of AMI (for ESG funded projects)  
People coming from street or shelter (for CoC funded projects)  
Referred and prioritized through appropriate VI/SPDAT Score | - Referral acceptance within X business days  
- % of households served will achieve permanent housing within 60 days of referral so long as funds are available. "Available" means allocated, under contract and being reimbursed on a timely basis.  
- % of those served are able to maintain housing without RRH assistance by 180 days  
- % of those served are not literally homeless after one year  
- % of those served are Increase in the percent of adults who gain or increase employment or non-employment cash income over time |
than can be provided by RRH, all attempts should be made to assist the participant in securing such a subsidy. Provision of case management to conduct individualized assessment and develop stabilization plan (which includes support mapping). Case management is required to meet with participants at least once monthly.

- Provision of financial assistance (security deposits, utility assistance, short- to medium-term rental assistance) and services (legal assistance, mediation, credit/financial counseling, and connection to mainstream benefits/services).
- Provision of housing search assistance (either directly or through a partner).
- Provision of employment assistance (either directly or through a partner).
- Connection to benefits and other mainstream resources.
- Serves as liaison to landlords for the program
**Permanent Supportive Housing (PSH)**

<table>
<thead>
<tr>
<th>Program Description</th>
<th>Essential Program Elements</th>
<th>Time Frame</th>
<th>Population</th>
<th>Measurement</th>
</tr>
</thead>
</table>
| Permanent Housing that is coupled with supportive services that are appropriate to the needs and preferences of residents. Individuals have leases, must abide by rights and responsibilities, and may remain with no program imposed time limits. Majority of projects serve households with a disabled head of household, but disability requirement will be based on subsidy source requirement. Settings for PSH: Project-Based, Tenant-Based Type of PSH: Rental Assistance (Participant holds the lease directly with the landlord) or Leasing (Master Lease for those with high barrier, hard to lease populations) | - Household holds a lease. An initial lease of 1 year is required and may change to a month to month lease after the initial year.  
- If projects elect to charge rent, participants will pay no more than 30% of their monthly income toward rent.  
- Subsidy can be deep or shallow subsidy and change over time based on the needs of the participant.  
- Assessment is conducted to determine service needs (this assessment is not used for eligibility but to develop the service plan).  
- Services are intensive, flexible, tenant-driven, voluntary, and offered in the participant’s housing if they so choose.  
- Primary focus of services is tenancy supports that help people access and remain in housing.  
- Additional focus of services is to connect tenants to or directly provide tenant-driven supportive services, including mental health services, substance abuse services, physical health services, benefits assistance, employment assistance, etc.  
- Providers should only use funder eligibility to screen participants, reducing barriers to entry (i.e., housing should be provided without clinical prerequisites for sobriety or completion of treatment, and reduced barriers for credit history and minor criminal convictions).  
- Annual reassessment using common assessment tool to determine ongoing services needed by the households and/or to determine the household’s readiness to “move-on” from PSH.  
- Coordinate with landlords/property managers to | No time limits | Chronically homeless individuals and families and other highly vulnerable individuals and families (as determined by full SPDAT assessment and Score) only if a chronically homeless individual or family is not in need of assistance in project per CPD Prioritization notice 014-012 | - 100% of slots will be filled via coordinated entry  
- % who exit PSH project avoid subsequent homelessness at 6, 12, and 24 months  
- % of all participants gain non-employment cash income  
- % of all participants gain employment income  
- % who retain permanent housing (either retaining PSH or moving to other permanent housing) |
| are literally homeless at entry, CoC funded projects are CH dedicated | support tenancy and prevent evictions. |   |   |   |
Appendix J

Adoption of Notice CPD 14-012
Adoption of “CPD Notice 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status”

Approved by the TX BoS CoC Board 6/8/2016

The TX BoS CoC will require all HUD Continuum of Care Program-funded Permanent Supportive Housing (PSH) projects within the CoC to follow “Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status,” beginning July 1, 2016.
Appendix K

Requiring PH Projects to Use Housing First or Low-Barrier Approaches
Requiring Permanent Supportive Housing (PSH) projects to use Housing First or, at minimum, low barrier.

Adopted by the TX BoS CoC Board by electronic vote on 5/24/2016 and ratified at the 6/8/2016 CoC Board meeting.

The TX BoS CoC will require all Permanent Supportive Housing (PSH) projects within the CoC to shift their program models to Housing First or, at minimum, low barrier with a goal of becoming Housing First, prior to the HUD FY 2016 Continuum of Care (CoC) Program competition. For PSH projects that are unable to make this shift, or if THN staff and the CoC board determines the project does not have the capacity to support this model, funding will be reallocated by the CoC.
Appendix L

TX BoS CoC Board Requirements Policies and Procedures
POLICY:
The Texas Balance of State Continuum of Care (TX BoS CoC) must establish a CoC Board, per the CoC Program Interim Rule, to act on behalf of the CoC. The CoC Board is the primary decision-making body for the TX BoS CoC. Board members determine the policy direction of the CoC and ensure that the CoC fulfills its responsibilities as assigned by HUD. Additionally, the Board oversees and approves the work of CoC committees and workgroups and the CoC Lead Agency and HMIS Lead Agency. The Board also approves the Consolidated Application for HUD Continuum of Care (CoC) Program funding.

The TX BoS CoC (TX-607) will follow written processes to select the CoC Board. The CoC will review, update, and approve the selection process at least once every five years.

The Board will consist of up to fifteen seats. Each seat has a stakeholder designation. The person filling a Board seat will represent the stakeholder group designated for that seat in one of the following ways:

- Being a member of that group (for example, Seat 2 could be filled by a currently or formerly homeless veteran);
- Working for an agency/organization that serves the designated group; and/or
- Clearly representing the interests of that group, as evidenced in the potential Board member’s nomination form.

Note: Seat 1 must always be filled by a person with lived experience, not a representative of persons with lived experience.

In other words, for all Board seats except Seat 1, a Board member serves as a representative for the population designated, e.g., Seat 2 need not be filled only by a homeless Veteran, but could also be filled by a person who specializes in serving homeless Veterans.

Seat Designations:

Seat 1: Person with lived experience
Seat 2: Homeless veterans
Seat 3: Chronically homeless persons
Seat 4: Homeless families
Seat 5: Homeless youth
Seat 6: Victim services
Seat 7: Mental/behavioral health
Seat 8: Health/medical
Seat 9: Local government
Seat 10: Emergency Solutions Grant (ESG) Recipient
Seat 11: Public Housing Agency
Seat 12: Law enforcement/corrections
Seat 13: Business
Seat 14: Faith community or faith-based agency/organization
Seat 15: Texas Interagency Council for the Homeless (TICH) or State government agency
The CoC will strive to ensure broad representation among the 15 positions, including community stakeholders from around the CoC’s geographic area and people representing the major homeless subpopulations.

Individual Board members may represent multiple stakeholders but may hold only one seat at a time.

Among the 15 seats, at least 5 at any time will be filled by local homeless coalition (LHC) Chairs.

No more than 50% of CoC Board members at any time may be affiliated with agencies that are recipients of HUD CoC Program funds.

No more than one staff person and/or Board Member of a single agency/organization at any time may be an elected member of the TX BoS CoC Board.

CoC Board members recognize that Board decisions must align with and support HUD’s CoC Program and the TX BoS CoC’s goals.

The CoC will ensure that the CoC Board, its chair, and any persons acting on behalf of the Board comply with a code of conduct and with conflict-of-interest requirements and recusal processes.

Board members are elected by the CoC membership at the CoC General Meeting held in the fall of each year. Board members will serve staggered terms of two years so that every year, half of the positions will stand for election. Terms begin October 1st and end September 30th of the following year.

**PROCEDURES:**

**Duties:**

The CoC Board will execute the following duties:

1. Review, provide guidance as needed, and approve the following areas of recommendations for action that are developed by the CoC Committees and/or THN staff:
   a. The prioritization of funding needs and strategies to finance housing and services for people experiencing homelessness.
   b. The emphasis or direction of service delivery approaches for the CoC.
   c. The identification and prioritization of service needs or gaps in services.
   d. Responsibilities and duties of convening the HUD Continuum of Care.
   e. Monitoring CoC recipient and sub-recipient performance, evaluation of program outcomes, and recommendation of corrective action, as needed.
   f. Appointing subcommittees or workgroups as may be necessary to perform its duties and responsibilities.

2. Develop policies and procedures conforming to the U.S. Department of Housing and Urban Development (HUD) requirements detailed in 24 CFR part 578.1 to:
a. Review and approve for execution the Memorandum of Understanding (MOU) for the CoC Lead Agency to operate the TX BoS CoC, the Collaborative Applicant, and the HMIS Administrator.
b. Conduct year-round CoC planning of homelessness prevention and homeless assistance housing and services.

3. Develop and approve annual action plans for the CoC Work Plan.

4. Review the CoC Work Plan annually, and recommend adjustments, as needed.

5. Oversee planning:
   a. Program development
   b. Implementation design
   c. Financing strategies

6. Review the responsibilities of the CoC committees, workgroups, and task forces annually.

7. Receive monthly reports from all standing committees, workgroups, task forces, and THN staff, including HMIS.

8. Continuously review CoC program performance through HMIS reporting.

9. Oversee the Independent Review Team-IRT that assists with the CoC’s application process for HUD Continuum of Care Program funding.

10. Maintain and update the CoC Policies and Procedures needed to comply with requirements associated with establishing and operating a CoC and HMIS requirements prescribed by HUD.

**Minimum Requirements:**
CoC Board members must meet minimum requirements that include the following:

**Attendance**
Board Members must attend at least 75% of the regularly scheduled CoC Board meetings in a term year.

**Code of Conduct**
All Board Members will annually sign the TX BoS CoC Board Member Code of Conduct and comply with it throughout their term of service.

**Conflict of Interest Statement**
All Board Members will annually complete and sign a Conflict of Interest Statement that identifies any personal interest that the Member may have in any matter pending before the CoC Board. Board Members shall refrain from participation in any decision or vote on such matter.
Terms of office:
Board members will serve staggered terms of two years so that every year, half the positions will stand for election.

In the 2016 elections, Seats 1 and 2 will be filled by Board Members elected to two-year terms in 2015.

For Seats 3 through 15: odd-number seats (Seats 3, 5, 7, 9, 11, 13, and 15) will be for one-year terms, and even-numbered seats (Seats 4, 6, 8, 10, 12, and 14) will be for two-year terms.

In future years, seats will be on staggered terms, so each subsequent term will be a two-year term.

Members may serve a maximum of two (2) consecutive terms of office.

Resignation and Removal of Board Members:
Board members may resign at any time by giving oral or written notice. Board members can be removed from the Board by a majority vote of the remaining Board members for repeated absences or for violation of the Board Member Code of Conduct or Conflict of Interest Policy.

Vacancies:
When a Board members resigns or is removed from his/her seat, the Board may appoint another representative to fill the unexpired term.

Selection Process:
Board Members will be selected by TX BoS CoC members. Anyone who lives or works in one of the 215 counties included in the TX BoS CoC is considered to be a member of the CoC.

THN staff will develop and execute a nomination and election process for approval by the CoC Board. It will include a timeline, activities, forms, and other materials necessary to develop a slate of CoC Board member candidates annually and elect Board members. THN staff will facilitate the voting process.

Nominees receiving the most votes will be elected to the Seats for which they were nominated.

Meetings:
The CoC Board will meet at least quarterly, and special called meetings will be held, as needed.

THN staff will, in consultation with the CoC Board, create agendas for CoC Board meetings, record meeting attendance and minutes, and provide additional staff support, as needed.

Per the Board’s “Action without a Meeting” policy, adopted 2/10/2016, any action that may be taken at a meeting may also be taken without a meeting, such as via electronic voting (email, fax, or text). When possible, any action to be taken outside of a meeting will have been discussed at a Board meeting and deferral of action approved by the Board.