FY2019 Review and Scoring Policies and Procedures for Continuum of Care Program Funds in the Texas Balance State Continuum of Care

Purpose of this Policy

Texas Homeless Network (THN) is the Collaborative Applicant and Continuum of Care (CoC) Lead Agency for the Texas Balance of State Continuum of Care (TX BoS CoC). THN facilitates the local application process/competition in the TX BoS CoC for U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program funds consistent with the requirements in 24 CFR 578.9. In an effort to host a clear and transparent process, the TX BoS CoC has adopted the following policies related to the Review and Scoring of all project applications received in the FY2019 CoC Program Competition

Project Application Reviews

The review of Project Applications is an important function of the TX BoS CoC Competition. Project Applications are reviewed twice prior to being sent to the Independent Review Team (IRT) for scoring. The first review is a threshold review conducted by THN, and the second is a Quality Review conducted by THN.

Threshold Review

Applications for Renewal Projects and New Projects will undergo a cursory threshold review by THN staff assigned to the TX BoS CoC to ensure compliance with the HEARTH Act, the FY 2019 CoC Program Notice of Funding Availability (NOFA), and the CoC's Request for Proposals (RFP). In the threshold review, TX BoS CoC Lead Agency Staff are looking for deficiencies. A deficiency is information missing or omitted within a submitted application. Deficiencies typically involve missing documents, information on a form, or some other type of unsatisfied information requirement (e.g., an unsigned form, unchecked box, etc.). Depending on specific criteria, deficiencies may be either curable or non-curable.

- Curable Deficiency Applicants may correct a curable deficiency with timely action. To be
 curable the deficiency must: not be a threshold requirement, except for documentation of
 applicant eligibility; not influence how an applicant is ranked or scored versus other applicants;
 and be remedied within the time frame specified in the notice of deficiency.
- Non-Curable Deficiency An applicant cannot correct a non-curable deficiency after the submission deadline. Non-curable deficiencies are deficiencies if corrected would change an applicant's score or rank versus other applicants or are an apparent misrepresentation. Noncurable deficiencies may result in an application being marked ineligible, or otherwise adversely affect an application's score and final determination.

If staff identify curable deficiencies in the Project Application or the supporting documents during Threshold Review the application will be amended back to the applicant in e-snaps, and the Authorized Representative (the contact listed in question 1 in Section 1G of the Application) and the Person to Contact Regarding the Application (the contact listed in question 8f in Section 1B of the Application) will be contacted in writing and given 48 hours to make the necessary corrections to the Project Application or supporting documents for resubmission to the TX BoS CoC, using the process identified in the TX BoS



CoC RFP. TX BoS CoC Staff will not be able to provide assistance beyond the identification of the deficiency.

Any Renewal Project or New Project with incurable deficiencies will be rejected in e-snaps, and the person identified the Authorized Representative and the Person to Contact Regarding the Application will be notified in writing.

Quality Review

All projects will then undergo a Quality Review conducted by TX BoS CoC Lead Agency Staff to ensure that the TX BoS CoC is submitting high quality applications to HUD. Through the quality review process, TX BoS CoC Lead Agency staff are ensuring that the Project Applicant followed the detailed instructions, and that there is consistency through the application. This thorough process ensures that quality project applications are submitted for consideration as part of the Priority Listing. This maximizes the quality of projects submitted to HUD and, ideally, awarded in the TX BoS CoC. This also results in fewer projects awarded with terms and conditions, a lengthy and time-consuming during the technical submission process, placed on them by HUD post-award.

During the FY 2018 CoC Program Competition Debriefing, HUD stated that it is very important to do a quality review to ensure that Project Applications adhere to the appropriate Detailed Instructions, and responses address all parts of the question.

If staff identify deficiencies in the Project Application or the supporting documents during Quality Review the application will be amended back to the applicant in e-snaps, and the Authorized Representative and the Person to Contact Regarding the Application will be contacted in writing and receive 72 hours to correct the identified deficiencies and resubmit per the RFP. TX BoS CoC Staff will not be able to provide assistance beyond the identification of the deficiency.

Scoring

Scoring is the process of using objective, performance-based criteria to evaluate the effectiveness of Renewal Projects and New Projects in reducing homelessness. Scoring is conducted by the Independent Review Team (IRT) after the Project Applications have been reviewed twice. This step, scoring, is crucial to the process because it allows the CoC Lead Agency to rank projects¹.

Independent review and scoring of Project Applications needs to be performed with members independent of the program/project or the TX BoS CoC Lead Agency. The IRT is a very important part of the process because it ensures the highest level of objectivity when it comes to the scoring of project applications for CoC Program funding.

Individuals are eligible to serve on the IRT if they live or work in the Texas Balance of State Continuum of Care. IRT Members cannot be representatives or beneficiaries of Continuum of Care Program Funded Agencies; IRT Members must to disclose any conflicts of interest through signing a Conflict of Interest

¹ For more information on reallocation, refer to "FY2019 Ranking Policies and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care".



Form. IRT Members must come from across the TX BoS CoC to ensure geographic diversity and represent a variety of subpopulations.

This process of recruiting and selecting volunteers for the IRT is managed by the Assistant Director of Planning and the Assistant Director of Data. Recruitment efforts include:

- Soliciting volunteers at General Membership Meetings
- Soliciting volunteers through the TX BoS CoC News newsletter
- Consulting with the CoC Board for suggestions
- Asking the Local Homeless Coalition Chairs to share this opportunity with their members

THN staff provides a 2 hour training, held via webinar, which teaches members how to evaluate applications and provide an opportunity to learn more about homeless services and housing programs in the TX Balance of State CoC. Ongoing support to the IRT is available, and is encouraged

Scoring Criteria

HUD requires CoCs to consider objective, performance based scoring criteria when scoring project applications, including at least one metric related to successful housing placement and retention and income growth, to determine the extent to which each project addresses HUD's policy priorities. These metrics are indicators of projects within systems that are ending homelessness.

The objective, performance based scoring criteria projects are reviewed on include:

- 1. Successful housing placement and retention
- 2. Income growth
- 3. Severity of needs and vulnerability of participants at project start
 - If this will be the only project of its kind in a geographic area serving a special homeless population/subpopulation
 - Persons/Families with a history of victimization/abuse, domestic violence, sexual assault, childhood abuse
 - People with a history of criminal justice system involvement
 - People experiencing chronic homelessness
 - Youth experiencing homelessness
 - Unsheltered homelessness
 - Low or no income at project entry
 - Current or past substance abuse
- 4. Returns to homelessness
- 5. Bed utilization
- 6. Cost effectiveness, i.e., how much each project spends to serve and house an individual or family as compared to other projects serving similar populations
- 7. Fiscal management
- 8. HMIS data quality
- 9. Adherence to Housing First
- 10. Prioritization fidelity



All projects are also evaluated to the extent that they consider the specific needs and severity of need of the targeted subpopulations identified in the project application. Consideration for specific needs and severity of vulnerabilities by applicants is evidenced by actual, historical or proposed performance data, and a Supplemental Project Narrative.

Scoring Project Applications Submitted by Victim Service Providers

For the past several years, HUD has asked whether the CoC has a specific method for evaluating projects submitted by victim services providers. This was asked in question 1E-1 of the FY 2018 CoC Program Competition Notice of Funding Available (NOFA). The TX BoS CoC makes several considerations when evaluating project applications submitted by victim service providers. Metric adjustments related to income growth and housing stability and vulnerability are modified for Renewal Projects targeting survivors of domestic violence.

Scoring Policy

Special considerations are the primary method by which the TX BoS CoC is able to encourage and incentivize New Project Applications that propose to serve particularly vulnerable subpopulations or Project Applications that propose to meet a specific need in a community. Renewal Projects are not eligible for special considerations.

Special consideration in the form of bonus points will be given to those New Projects that propose to serve only particularly vulnerable sub-populations. For example, 100% of the project is dedicated to survivors of domestic violence, dating violence, sexual assault, and stalking. These considerations will be given in the form of a base point adjustment to the Project's application score. Vulnerable population adjustments will be given as follows:

- 1. Survivors of domestic violence, dating violence, sexual assault, and stalking: 10 pts
- 2. Transition-Age Youth (youth aged 18-24): 10 pts
- 3. Chronically homeless individuals and families: 5 pts

Special considerations in the form of bonus points will also be given to New Project from communities where funding in the current CoC Program Competition cycle was subject to a full involuntary reallocation²:

1. Reallocation bonus: 10 pts

The agency whose project had been fully reallocated in the past will not be considered for these bonus points.

Only a maximum of 10 points per Project Application in the form of special consideration or bonus points is possible.

² For more information on reallocation, refer to "FY2019 Reallocation Policies and Procedures for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care".



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Scoring Procedure

After the Threshold Review and Quality Review, project applications are assigned to an Independent Review Team (IRT) comprised of two IRT Members. The Assistant Director of Planning and Assistant Director of Data will ensure there is geographic diversity on each team. Each team will receive a few applications, approximately 5, to score using Supplemental Project Narratives submitted by Project Applicants. Each application takes about one hour to thoroughly review and will receive 2 scores, one from each IRT Member. After submission of completed Project Score Sheets, the scores are averaged by TX BoS CoC staff. The CoC Lead Agency is then able to rank applications for the CoC Project Listing according to the Ranking Policies adopted by the TX BoS CoC Board.³

This policy was approved by the Texas Balance of State Continuum of Care Board of Directors 5/22/2019 and made publically available at thn.org on 5/23/2019

³ For more information on ranking, refer to "FY2019 TX BoS CoC Ranking Policies and Procedures for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care".

