

## Purpose

The purpose of the grievance procedure is to settle any disagreement between an Applicant Organization for the HUD Continuum of Care (CoC) Program funding and the Texas Balance of State Continuum of Care (TX BoS CoC) as quickly and impartially as possible, to ensure an efficient, transparent, and fair competition.

## Eligibility

A grievance may be filed by any Applicant Organization that claims it has been adversely affected by:

- Improper application of rules, regulations, and/or procedures concerning participation in the TX BoS CoC's FY 2019 CoC Program application process, as outlined in the FY 2019 Request for Proposals (RFP) or;
  1. 2019 Ranking Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  2. 2019 Review and Scoring Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  3. 2019 Reallocation Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  4. 2019 Conditional Inclusion Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  
- Improper interpretation of rules, regulations, and/or procedures concerning participation in the TX BoS CoC's FY 2019 CoC Program application process, as outlined in the FY 2019 Request for Proposals (RFP) or;
  1. 2019 Ranking Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  2. 2019 Review and Scoring Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  3. 2019 Reallocation Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  4. 2019 Conditional Inclusion Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care

- Disparity in the application of rules, regulations, and/or procedures regarding participation in the TX BoS CoC's FY 2019 CoC Program application process, as outlined in the FY 2019 Request for Proposals (RFP) or;
  1. 2019 Ranking Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  2. 2019 Review and Scoring Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  3. 2019 Reallocation Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  4. 2019 Conditional Inclusion Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
- Violation of rules, regulations, and/or procedures concerning participation in the TX BoS CoC's FY 2019 CoC Program application process, as outlined in the FY 2019 Request for Proposals (RFP) or;
  1. 2019 Ranking Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  2. 2019 Review and Scoring Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  3. 2019 Reallocation Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care
  4. 2019 Conditional Inclusion Policy and Procedure for Continuum of Care Program Funds in the Texas Balance of State Continuum of Care

### Procedure for Filing Grievances and Grievance Appeals

The following steps must be taken, in the order given. Time limits shall begin on the end of the first day after the applicable occurrence, filing, appeal, response, or recommendation. Due to the nature and time constraints of the CoC Program competition, working days shall include weekends and City, County, and/or Federal holidays.

#### **Step 1**

In order to be considered, a grievance must be filed in writing with the CoC Lead Agency, Texas Homeless Network (THN), within twenty-four (24) hours of notification of preliminary

ranking results and whether or not the organization's application will be included in the CoC's Consolidated Application. An email clearly stating the issue and the policy which the Applicant Organization believes was violated is sufficient to serve as a written grievance. The Applicant Organization's grievance email should be sent to the attention of TX BoS CoC Board Chair, Danielle Shaw, at [txboscoc@thn.org](mailto:txboscoc@thn.org)

## **Step 2**

The TX BoS CoC Board has forty-eight (48) hours to investigate and respond in writing, using the attached official form. Applicant Organization should expect to receive the response via email. The Board's decision/response is final and binding.

## **Step 3**

If the Applicant Organization is not satisfied with the TX BoS CoC Board's response, depending on the type of appeal, the Applicant Organization may file an appeal with HUD, as outlined in 24 CFR 578.35. Details can be found in [Section X of the 2019 NOFA](#)

1. The initial grievance must be submitted in writing to the TX BoS CoC within the allowable time frame, in order to be considered. Email is strongly preferred.
2. The Grievance Appeal Forms provided by the TX BoS CoC (attached) must be used in pursuing a grievance appeal.
3. To expedite the process the Applicant Organization should cite the applicable sections of the RFP, NOFA, and/or the relevant CoC policy pertaining to their grievance.

**TX BoS CoC's FY 2019 CoC Program Local Application Process  
Grievance Appeal Form**

Applicant Organization: \_\_\_\_\_

Applicant Organization's Address: \_\_\_\_\_

Applicant Organization's Phone Number: \_\_\_\_\_

Applicant Representative: \_\_\_\_\_ Job Title: \_\_\_\_\_

Applicant Representative's Email Address: \_\_\_\_\_

We have received a response to our organization's grievance from the CoC Director (or designated staff person, in his/her absence) on (date) \_\_\_\_\_. Because this answer is unacceptable to us, we wish to file a formal grievance appeal.

Nature of grievance appeal. Explain how your organization was unfairly treated, including names and dates, and cite the specific applicable sections of the RFP, NOFA and/or Re-Allocation P&P. (Use additional pages if needed.)

We believe a just and fair resolution of our grievance appeal is:

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Date

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Signature

**TX BoS CoC's FY 2019 CoC Program Application Process**  
**Grievance Appeal Form – The TX BoS CoC Board Response**

Applicant Organization:\_\_\_\_\_

Applicant Representative:\_\_\_\_\_

The TX BoS CoC Board Response to Applicant Organization's Grievance Appeal:

If the Applicant Organization is not satisfied with the Board's response, depending on the type of grievance appeal, the Applicant Organization may file an appeal with HUD as outlined in 24 CFR 578.35. Details can be found in Section X of the 2019 NOFA:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature