

Before Starting the CoC Application

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

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

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

1. The FY 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2024 CoC Program Competition on behalf of your CoC.
- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: TN-503 - Central Tennessee CoC

1A-2. Collaborative Applicant Name: Franklin Community Development, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Franklin Community Development, Inc.

1B. Coordination and Engagement–Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2023 to April 30, 2024:	
1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
2.	select Nonexistent if the organization does not exist in your CoC’s geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	Yes	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	No	No
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	No
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent	No	No
9.	Law Enforcement	Yes	No	No
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	No	No
11.	LGBTQ+ Service Organizations	Yes	Yes	No
12.	Local Government Staff/Officials	Yes	Yes	No
13.	Local Jail(s)	Yes	No	No
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes
16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes

17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	Yes	No
30.	State Sexual Assault Coalition	Yes	Yes	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	No	No
33.	Youth Service Providers	Yes	No	No
	Other: (limit 50 characters)			
34.				
35.				

By selecting "other" you must identify what "other" is.

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

(limit 2,500 characters)

Our CoC is dedicated to addressing the unique needs of Black and Brown communities, as they are disproportionately represented in our homeless population. According to our most recent StellaP data, 41% of the people served in our CoC were Black or African American, which, while a 2% decrease from the previous year, still reflects significant overrepresentation compared to the general population.

To ensure our system is addressing the needs of these communities, we are intentional about reducing racial disparities in both housing outcomes and service delivery. For instance, in 2023, persons of color experienced homelessness for an average of 5 days longer than white individuals, an improvement from the 14-day disparity observed in 2022. Additionally, we have seen a notable increase in the rate of Black or African American individuals exiting to permanent housing. In 2023, 48% of Black individuals exited to permanent destinations, compared to 42% in 2022. This surpasses the exit rate for white households, which was 45%, also up from the previous year's 43%. These improvements reflect the CoC's continued emphasis on addressing racial barriers within our crisis response system.

While we have made progress, our CoC remains committed to further reducing disparities. We have added an additional person with lived experience to our leadership board, we continue to work with a coalition of black pastors in our rural counties who meet monthly to identify resources for persons experiencing homelessness.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
	1. communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;	
	2. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
	3. invited organizations serving culturally specific communities experiencing homelessness in your CoC's geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

Our CoC ensures a transparent and inclusive invitation process by posting an open call for new members on our website and sending targeted emails to agencies serving underserved populations within our coverage area. We also meet directly with community leaders to foster collaboration. The CoC's efforts to attract new members is ongoing and spans our entire region. The Collaborative Applicant is actively reaching out to each county mayor within our 19-county area to better understand the unique needs of their communities and to engage local officials in the CoC's efforts to address homelessness. By fostering direct communication with local leadership, we aim to ensure that our initiatives are tailored to the specific challenges and resources of each county, while also encouraging greater collaboration and participation in the CoC's work.

Since COVID, all our CoC meetings have been virtual. This has made it easier for agencies across all 19 counties of the CoC to participate and ensure accessibility for persons with disabilities. All information provided is available in electronic formats which may be read via accessibility software (e.g. voice-to-speech) and other means.

The CoC is continually working to expand its recruiting efforts and engage a culturally diverse, broad cross section of service providers. In its rural counties, the CoC has convened a coalition of black church leaders who meet monthly to address community issues related to homelessness and poverty. The group is soliciting participation of persons with lived experience (two PLE individuals are participating now) to help in identifying workable solutions. The coalition stays engaged with the CoC through the quarterly stakeholder meetings. Email outreach, personal phone calls and networking at community meetings are also ways the CoC recruits new stakeholders. The CoC evaluates the diversity of its membership twice a year. It does targeted outreach to agencies representing underserved populations without representation among the current membership. Our Collaborative Applicant personally visits with prospective new members to introduce the CoC and solicit their participation in meetings, committees and strategic planning.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness. NOFO Section V.B.1.a.(3)	
Describe in the field below how your CoC:		
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;	
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

1. The CoC convenes quarterly meetings that include victim service providers, faith-based agencies, law enforcement, food banks, school leadership, local governments, affordable housing developers, substance abuse and mental health providers, homeless advocates and persons with lived experience. The CoC uses feedback from its meetings to inform its strategies and operational policies. CoC representatives attend the National Alliance to End Homelessness and National Human Services Data Consortium events to learn about the latest research and best practices in the field of homelessness. CoC leadership participates in monthly calls with all Tennessee CoCs to learn how others are addressing issues like rising rents, a lack of affordable housing and rural homelessness. CoC members have also participated in training related to Racial Diversity, Trauma Informed Care and Person- Centered Case Management.

2.The CoC shares information related to its progress in addressing homelessness during bi-monthly stakeholder and monthly leadership meetings. Our HMIS Lead reviews quarterly reports on System Performance metrics. Our Collaborative Applicant updates the CoC on strategic planning efforts and committee leaders report on the work of their respective groups. Information about specific accomplishments, special events or opportunities - like the Point-In-Time count, an employment event, training opportunity, major report deadlines (LSA, PSM, HIC/PIT) – is conveyed to the CoC during regular meetings. In addition, the CoC posts info publicly on its website and sends monthly emails to its membership.

3.CoC meetings are virtual to eliminate access issues related to disabilities or distance. The Zoom technology the CoC uses supports closed captioning for live meetings, and provides keyboard operability for persons with mobility impairments. Written materials distributed by the CoC are in PDF format to ensure compatibility with text-to-speech readers.

4.The CoC evaluates feedback from its public meetings to re-define its service delivery strategy and its resource allocation. Recent comments indicated a gap in services for northern parts of the CoC. . In response, the CoC leadership did outreach to local officials and school district staff inviting them to attend CoC meetings. This has led to closer collaboration with agencies in the northern parts of the CoC.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
NOFO Section V.B.1.a.(4)		
Describe in the field below how your CoC notified the public:		
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	
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(limit 2,500 characters)

The CoC notified the public the competition was open and accepting applications two ways; by posting an announcement on its website and by sending an email to the CoC mailing list which includes 100+ individuals and organizations. Each solicitation announcement for the local competition included the language "The CoC encourages organizations that have not previously received Continuum of Care Program Funding to apply for funds under this solicitation."

The solicitation announcement included specific instructions for applicants, indicating how to apply, the documents required as part of a submission and the deadline for submissions. Written instructions directed agencies interested in applying for a new project or a renewal project to submit a Letter of Intent, and stated "both Renewal and New Projects application packets must be completed according to the instructions on the following pages and submitted by 9/20/24". Examples of the New Project and Renewal project application packets were included in the solicitation announcement. The CoC hosted an Informational Meeting via Zoom to explain the eligible activities allowed by the NOFO, review the application process and answer questions. An email address was provided for anyone who had questions about the local competition process.

Both the renewal and new project application packets stated agencies should familiarize themselves with the details of the FY2024 – FY2025 CoC Competition and provided a link to the full NOFO announcement. The solicitation announcement included the scoring tools to be used to evaluate new and renewal projects. A statement saying "Applicants should review the attached scoring criteria to fully understand how the CoC will evaluate all projects" was in the solicitation announcement. The announcement also specified when the final evaluation results would be available to the public.

The CoC provides the application and announcements in accessible electronic formats to ensure that individuals with disabilities can participate in the grant application process. If additional support is needed to accommodate a disability, community disability advocates assist the applicant in completing the documents required to meet the submission requirements.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC’s coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC’s geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	No
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Nonexistent
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	No
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated?	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure family members are not separated?	Yes
3.	Worked with CoC and ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients?	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance?	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers?	No

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

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

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

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

The CoC prioritizes its partnership with local education agencies, working closely with McKinney-Vento Liaisons (MVLs) from across the 19-county region to ensure that individuals and families experiencing homelessness have access to the educational supports and services available through local school districts. These liaisons play a critical role in helping CoC agencies connect families with school district resources, in compliance with the educational provisions of the McKinney-Vento Act. To further strengthen this collaboration, the CoC governance charter reserves “at least one seat on the Board for an educational liaison, ensuring consistent coordination with McKinney-Vento requirements”. Additionally, the CoC’s Coordinated Entry lead facilitates quarterly meetings with MVLs across the CoC, creating opportunities to exchange information, share resources, and work together to find solutions to the challenges facing children and families experiencing homelessness.

1C-4b.	Informing Individuals and Families Who Have Recently Begun Experiencing Homelessness about Eligibility for Educational Services. NOFO Section V.B.1.d.	
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Describe in the field below written policies and procedures your CoC uses to inform individuals and families who have recently begun experiencing homelessness of their eligibility for educational services.

(limit 2,500 characters)

Policy: The CoC has a written Education Policy that requires all ESG and CoC funded providers to inform homeless families of their educational rights, link them with a McKinney-Vento liaison as part of intake procedures and make sure the children being served by the program are enrolled in school. The policy states agencies must “facilitate the enrollment, attendance, and success in school of homeless children and youth. This includes addressing problems due to transportation needs, immunization and residency requirements.”

Procedures: The CoC engages educational professionals to provide training to CoC members about the requirements of the McKinney-Vento Act, and how to best support families to ensure that children and youth receive the educational services they need. McKinney Vento liaisons provide posters and other materials to the CoC to distribute to service providers to give to families at intake to ensure they are aware of their eligibility for educational services.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers. NOFO Section V.B.1.d.	
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Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	Yes	No
2.	Child Care and Development Fund	No	No
3.	Early Childhood Providers	Yes	Yes
4.	Early Head Start	No	No
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	No
6.	Head Start	No	No
7.	Healthy Start	No	No
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking–Collaboration with Federally Funded Programs and Victim Service Providers. NOFO Section V.B.1.e.
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In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	State Domestic Violence Coalitions	Yes
2.	State Sexual Assault Coalitions	No
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.		

1C-5a.	Collaborating with Federally Funded Programs and Victim Service Providers to Address Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking. NOFO Section V.B.1.e.
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	Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:
1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

CoC wide policies: The CoC’s written standards governing the provision of CoC and ESG services were created and are continually updated in consultation with the victim advocates who are active in the CoC. The CoC seeks this specialized feedback to ensure policies are survivor-centered and eliminate barriers to service access. Bridges Domestic Violence Center and Center of Hope are two victim service providers who participate in regular meetings and assist the CoC in ensuring its Coordinated Entry policies and procedures are trauma informed and meet the needs of survivors. Their input informed protocols for collecting and protecting personal information. They recommended client risk factors to be considered in the prioritization process. Their insight also informed the development of the written standards governing shelter and housing services. Through consistent participation in both general membership and CoC committee meetings, our victim service providers and other advocates help guarantee the service delivery standards are safe, confidential, and tailored to meet both the immediate and evolving needs of survivors. This collaboration keeps the CoC focused on best practices for supporting survivors within the CoC crisis response system.

Trauma-Informed Housing and Services: Our CoC works closely with victim service providers and other advocates to make sure the day-to-day operations of our crisis response system are trauma informed and designed to provide a safe supportive environment for all survivors. One of our providers, Center of Hope conducted our annual training for CoC and ESG staff in key skill areas including assessing danger levels (lethality); supporting survivor empowerment (victim-centered); sensitivity (trauma-informed); confidentiality; and safety planning protocols. The training helps build the capacity of housing providers to recognize and address the effects of trauma on their clients. Having the victim advocates participate in CoC meetings and policy development ensures that the actual services delivered—such as emergency shelter, transitional housing, and supportive services—are tailored to meet the specific needs of survivors, providing them with a safe, empowering, and supportive environment.

1C-5b.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC’s coordinated entry addresses the needs of DV survivors by including:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

(limit 2,500 characters)

Our CoC collaborates with local domestic violence advocates to ensure our safety protocols align with best practices for protecting vulnerable populations. CE staff are trained in trauma-informed, victim-centered interview techniques so interactions with survivors are handled with sensitivity and care. Each client interview begins by verifying the individual's safety. If an individual indicates they are at-risk, CE staff will offer a connection to the County's sheriff, or to our local victim service provider. Our CE staff always advise clients of their right to confidentiality and the protocols in place to protect it. CE staff participate in yearly safety planning training to enable them to assist survivors in identifying the safe next steps. If the client is interested, staff are advised to administer the MAP assessment with caution and to recognize that some questions may be difficult for survivors of domestic violence and some individuals may not wish to proceed with the process. If this is the case, staff are advised to stop the assessment immediately. Otherwise, staff advise clients of housing and service resources and administer the assessment process to determine need and prioritization.

To protect confidentiality, DV survivors are assigned anonymous case numbers (e.g., Client 123) to ensure anonymity. The DV priority list is combined weekly with the general priority list to determine housing placements, ensuring that survivors receive the same access to housing resources as other individuals. The de-identified DV list is securely managed, and only authorized staff have access to it. All CE staff are trained to maintain confidentiality at every stage of the process, reinforcing the commitment to safeguarding survivors' privacy.

The CoC is committed to providing DV survivors with safe, confidential, and equitable access to housing resources. Our CE process prioritizes the safety and autonomy of survivors, ensuring they receive the support they need while maintaining their privacy and dignity.

1C-5c.	Coordinated Annual Training on Best Practices to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

		Project Staff	Coordinated Entry Staff
1.	Training Occurs at least annually?	Yes	Yes
2.	Incorporates Trauma Informed best practices?	Yes	Yes
3.	Incorporates Survivor-Centered best practices?	Yes	Yes
4.	Identifies and assesses survivors' individual safety needs?	Yes	Yes
5.	Enhances and supports collaboration with DV organizations?	Yes	Yes
6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
	Other? (limit 500 characters)		
7.			

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below:	
1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

Our CoC has adopted written emergency transfer policies to ensure survivors of DV, dating violence, sexual assault, or stalking are safe in their housing. The written plan is based on a model emergency transfer plan published by HUD. The written guidance identifies eligibility criteria for emergency transfer, documentation needed, confidentiality protections, emergency transfer process, and guidance to tenants on safety and security. Written Emergency Transfer policies were formally adopted by the CoC Board in October 2021. Once the policy was official, it was sent via email to the CoC membership and reviewed in detail with the full CoC at the next membership meeting.

All program participants receive an introductory packet of policy and procedure related information when they enter a CoC Housing program. The packet includes information describing the emergency transfer policy and the process to follow to request a transfer. Also, an infographic describing how persons who do not feel safe in their housing can seek a transfer to a safe, available unit is posted in high traffic areas where persons are likely see it.

3. The CoC's written Emergency Transfer Plan policies direct individuals wanting to request an emergency transfer to submit a written request for a transfer to their case manager or a member of the agency's management team. The client must indicate in their statement they have previously been a victim of domestic violence or sexual assault, they feel unsafe in their current housing, believe remaining in their housing places them at imminent risk and are requesting a transfer to ensure their future safety. The client is encouraged to provide documentation substantiating the reported threat if it is available.

4. Housing providers are required to act quickly to relocate a tenant in response to a emergency transfer request. The case manager begins by verifying the tenant's eligibility for the transfer and reviewing all provided documentation. In consultation with the client, the case manager (or other member of the housing provider's staff) will identify an alternate unit for the client. Staff will confirm the new unit provides the client the desired safety, and verify the client's eligibility for the unit before finalizing the transfer. At the client's request, staff will also assist the client in contacting the Oasis Women's Center, the CoC's local resource for assistance with issues related to domestic violence.

1C-5e.	Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

(limit 2,500 characters)

Our CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have equal access to all housing and services offered within the CoC, not just those provided by victim service organizations. Our Coordinated Entry System (CES) integrates survivors into the broader prioritization process, ensuring they have the same opportunities as all other populations experiencing homelessness.

Survivors are immediately connected with a trauma-informed case manager who sensitively assesses their needs. They are placed on a de-identified Domestic Violence (DV) priority list, which is combined with the general priority list for housing placements. This ensures that survivors are considered for all housing and services available, including those not specifically designated for victims of violence.

To maintain confidentiality, survivors are assigned anonymous case numbers, and only authorized personnel can access their information. The CoC's approach ensures that survivors receive the full spectrum of housing options and support services, such as emergency shelters, permanent housing, legal assistance, job training, and childcare, just as any other population experiencing homelessness would.

Collaboration with The Center of Hope, The Bridge Domestic Violence Center and other VSPs in our CoC enables us to respond quickly to survivors' needs, but it is the CoC's inclusive approach that guarantees their access to all resources. Our Housing First policy eliminates barriers such as credit or income requirements, ensuring that survivors can focus on safety and long-term stability without facing additional obstacles.

Through regular audits and survivor feedback, the CoC continuously improves its policies and practices, ensuring that all individuals, regardless of their experience, have equitable access to housing and services.

1C-5f.	Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures survivors receive safe housing and services by:

- | | |
|----|---|
| 1. | identifying barriers specific to survivors; and |
| 2. | working to remove those barriers. |

(limit 2,500 characters)

The goal of our Coordinated Entry system is to rapidly stabilize and rehouse persons experiencing homelessness—especially survivors of domestic violence. The CoC uses client surveys and feedback from its Victim Service Providers (VSP) to identify the barriers facing survivors within its crisis response system and identify viable strategies to address identified barriers.

1. Based on feedback, we know survivors seeking housing and support services face unique barriers, including safety and security concerns. Many worry about being found by their abusers and struggle with low or non-existent credit scores, making it difficult to sustain housing and employment. Additionally, survivors often face legal challenges, such as custody disputes or restraining orders, and require a specialized, sensitive support system as they recover from trauma. They need access to resources like job training, financial literacy and counseling.

2. To address these barriers, the CoC prioritizes safety and confidentiality by enforcing strict privacy protocols for data collection and handling. Annual assessments ensure all housing programs align with Housing First principles, removing housing readiness requirements and offering immediate access, even for those with financial instability or poor credit. Victims are connected to legal assistance to address custody issues, orders of protection and other concerns. CoC case managers receive training in trauma-informed and client-centered case management practices. Additionally, the CoC connects survivors with vital services such as counseling, job training (through Workforce Development), and financial resources, helping them rebuild their lives and maintain long-term housing stability.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Equal Access Trainings.	
	NOFO Section V.B.1.f.	

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

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

Describe in the field below:

1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;

3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. Our CoC's program standards and policies manual includes an antidiscrimination policy with language that mirrors HUD's Form 424-B. Our CoC wide anti-discrimination policy includes reference to applicable laws such as Title VI of the Civil Rights Act, the Rehabilitation Act, the Age Discrimination Act, and the Fair Housing Act. Our CoC reviews all its policies annually. It solicits feedback from LGBTQ+ advocates active in the CoC to ensure procedures are inclusive and welcoming. This includes the CoC's anti discrimination policy. Advocates recommend changes as needed to ensure the CoC is meeting the needs of LGBTQ+ individuals and families. The CoC also hosts Equal Access Rule training on an annual basis. The training reviews for stakeholders the requirements of HUD's Equal Access to Housing Final Rule (2012) and HUD's Equal Access to Gender Identity Final Rule (2016). Our CoC also relies on the information presented in this annual training to alert them to the need for changes to the anti-discrimination policy

2. The CoC provides training for CoC providers on HUD's Equal Access Rule and the Gender Identify Rule. The training encourages providers to review internal procedures and policies to ensure they comply with federal regulations. In addition, our CoC provides technical assistance to providers during annual program monitoring and ad hoc throughout the year. All homeless service providers within our CoC are expected to develop project-level anti discrimination policies that align with our CoC-wide anti- discrimination policy outlined in the program standards manual including explicit protections for LGBTQ+ individuals and families.

3. The CoC evaluates each agency's compliance with anti- discrimination policies during it's annual program monitoring. Program manuals and policy documents are evaluated to ensure tenant selection criteria is non-biased and ensure housing equity for persons without regard to family size, family composition, race or ethnicity.

4. Service providers found to be noncompliant with the CoC's anti-discrimination policy receive technical assistance toward resolving any identified issues. Programs are given a finding and have 30 days to resolve the finding. If the finding is not resolved, notification would be sent to HUD

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Franklin Housing Authority		Yes-Both	No
Clarksville Housing Authority		Yes-Public Housing	No

You must enter information for at least 1 row in question 1C-7.

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
	1. steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
	2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

There are 20 public housing authorities within the 19-county geographic area that is the TN 503 CoC. Two of the largest are the Tennessee Housing and Development Agency (THDA) and Franklin Housing. The CoC maintains a close working relationship with both entities. Franklin Housing is a CoC grant recipient. The agency does have a homeless preference (attached). The Tennessee Housing Development Agency is the largest PHA in the state, it administers the Emergency Solutions Grant program for 92 of the state's 95 counties and has an MOU with the CoC for Emergency Housing Vouchers. THDA does not have a homeless preference. The CoC advocates on an annual basis for THDA to consider adopting a homeless preference for its HCV units. This change in policy has not occurred.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	
	Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:	

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

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

	1.	Emergency Housing Vouchers (EHV)	Yes
	2.	Family Unification Program (FUP)	No
	3.	Housing Choice Voucher (HCV)	No
	4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	No
	5.	Mainstream Vouchers	No
	6.	Non-Elderly Disabled (NED) Vouchers	No
	7.	Public Housing	No
	8.	Other Units from PHAs:	

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

	1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	No
			Program Funding Source
	2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

		Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	No
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1D. Coordination and Engagement Cont'd

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1.	Prisons/Jails?	No
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	No
4.	Foster Care?	No

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition.	6
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2024 CoC Program Competition that have adopted the Housing First approach.	6
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.
 Describe in the field below:

1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation;
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach; and
4.	what your CoC has done to improve fidelity to Housing First.

(limit 2,500 characters)

1. We ensure applicants operate low-barrier, client-centered programs by reviewing monitoring reports during the local competition. The reports verify a project’s policies align with Housing First. New project applicants must commit to a Housing First approach as a threshold criterion in the review process. Applicants failing to agree to Housing First tenets are not considered for scoring.

2. We use the following factors to verify fidelity to Housing First:
 Access is not contingent on sobriety, income, criminal record, treatment, or participation in services.
 Applicants are not rejected due to poor credit, rental history, or minor criminal convictions.
 People with disabilities are offered clear opportunities to request reasonable accommodations during application, screening, and tenancy.
 Programs work through CE to ensure households have access to housing and services
 Housing and service goals are tenant-driven.
 Supportive services focus on engagement and problem-solving, not as conditions for tenancy.
 A harm-reduction philosophy guides services, recognizing that substance use is part of some tenants' lives.
 Substance use alone, without lease violations, is not grounds for eviction.
 Tenants in PSH are given flexibility in paying rent on time, with options for special payment arrangements and financial management assistance.
 Tenant eviction is avoided whenever possible.

New projects must allow applicants to enter a program without income, without being clean and sober, or compliant with treatment, and despite prior criminal justice involvement. Service and treatment plans are voluntary, and tenants cannot be evicted for non-compliance.

3. Our CoC evaluates projects beyond the local competition through annual project monitoring to ensure adherence to Housing First principles. We use a Housing First assessment tool based on the USICH Housing First Checklist, reviewing program policies and procedures to confirm that projects are low-barrier and that all policies governing admissions, participation, and discharge align with Housing First.

4. Our CoC has enhanced Housing First fidelity by emphasizing its importance in the application process, we use Housing First criteria in our scoring tool and eliminate non-compliant applications. We have clear performance indicators, annual monitoring using the USICH Housing First Checklist, and provide ongoing training and technical assistance to ensure client-centered service delivery.

1D-3.	Street Outreach—Data—Reaching People Least Likely to Request Assistance.	
	NOFO Section V.B.1.j.	

Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

All CoC providers and partners are responsible for outreach activities to ensure homeless persons are aware of housing and service providers in their service area. The CoC has organized street outreach in its two urban areas (Williamson and Montgomery counties). Teams consisting of mental health and substance abuse counselors, service providers & crisis response professionals identify persons experiencing homelessness and connect them to available community resources. Rural outreach is done through Operation Stand Down Tennessee (OSDTN), the SSVF grant recipient in five of Tennessee’s ten CoCs. OSDTN covers 16 of the 19 counties in the CoC, while other providers are available in the remaining three counties. The outreach efforts for homeless Veterans includes both street outreach and sheltered outreach.

Street outreach is conducted on a rotating basis throughout the CoC, with most counties getting a visit from an outreach team on a weekly basis. Some areas are visited more frequently.

The outreach teams work to engage persons on a personal level to build rapport. For example, in Montgomery County (home to Fort Campbell Army Post), Outreach teams recruited veterans to be a part of outreach since many veterans are reluctant to ask for help when homeless or needing services. Outreach teams visit locations where people are not easily seen. Another active outreach effort involves a CoC housing provider/substance abuse treatment facility who operates a mobile health clinic in partnership with the State of TN. The clinic provides healthcare services to 5 rural counties, , integrating primary and substance use care. Our SSVF provider, OSDTN, attends various meetings for individual counties. This allows OSDTN outreach to stay connected with various agencies and to also plan and execute various street engagements. Street engagements can come from various resources such as shelters or from physically engaging with the homeless from our various offices. OSDTN has personnel available from Clarksville, Columbia, and Nashville offices. OSDTN’s outreach teams have extensive experience in both Metro and Rural homeless engagements. OSDTN is also able to utilize canine services when the situation calls for it. Outreach to persons in the rural communities is done through printed materials such as brochures/flyers posted in places persons in need would frequents (hospitals, libraries, laundromats, etc)

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

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

Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
1. Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	No
2. Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	No
3. Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	No
4. Other:(limit 500 characters)		

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS. NOFO Section V.B.1.i.	
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	HIC Longitudinal HMIS Data	2023	2024
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	105	109

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff. NOFO Section V.B.1.m.	
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Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	
	Describe in the field below how your CoC:	
1.	works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and	
2.	promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.	

(limit 2,500 characters)

Our CoC partners with healthcare organizations across the region to ensure project participants can access a full range of healthcare services. Our membership includes substance abuse and mental health providers, as well as local county health departments, who collaborate closely with our housing and service providers to offer integrated support. For example, our Coordinated Entry (CE) team partners with Buffalo Valley, Inc. (BVI), the largest provider of behavioral health and substance abuse treatment in Middle Tennessee. During the intake process, CE staff identify individuals in need of substance-use disorder services and make direct referrals to BVI for comprehensive treatment and recovery support. This includes connecting participants with mainstream resources to promote long-term stability. Additionally, we leverage the State of Tennessee Health Department’s Project Rural Recovery to extend healthcare access to underserved rural areas. Providers are encouraged to utilize Project Rural Recovery’s mobile clinics, which deliver integrated behavioral and physical health services directly to clients in remote counties, ensuring that participants receive the healthcare they need, no matter where they reside.

The CoC encourages service providers to have staff participate in SOAR training at its regular meetings, emphasizing that SOAR certification improves the ability of support staff to assist clients in applying for SSI/SSDI benefits and reduces housing barriers. Many providers already have SOAR-trained staff integrated into their CoC programs. Agencies that don’t have trained staff are directed to the SAMSHA website to enroll in online training. In addition, the CoC works closely with the Consumer Housing Specialist from the Park Center. Providers without SOAR-trained staff can contact the Housing Specialist assigned to our region (Region 5) who will meet with a project participant, do a pre-screening, gather medical information and assist eligible individuals in completing a SOAR application.

ID-7.	Partnerships with Public Health Agencies–Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:	
1.	respond to infectious disease outbreaks; and	
2.	prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

The CoC collaborates with the Tennessee Department of Health in two ways. A) the CoC participates in a monthly call with the Department of Health and other state agencies that helps the CoC create policies and procedures for responding to disease outbreaks that are consistent with State Health recommendations and CDC guidance. B) CoC members participate in monthly regional meetings across the 19 counties in our coverage area. The meetings bring together the State Department of Health and the local county health department to discuss relevant information about emerging public health threats, local outbreaks, and ongoing health concerns at a local level. Information from these meetings helps the CoC align its policies with the specific needs of a region so shelters, housing programs, and outreach teams follow the latest guidelines on infection control, vaccination, and treatment. Policies are updated based on real-time health data and potential risks specific to the region.

By participating in the monthly meetings with the Tennessee Department of Health, the CoC can create targeted prevention strategies for service providers, such as disease-specific protocols for shelters and outreach teams, ensuring they align with public health recommendations. Additionally, the CoC leverages the availability of a mobile health unit, operated by a CoC member agency, that operates in rural counties, addressing the unique needs of persons who are unsheltered or at risk of homelessness. This proactive approach helps prevent the spread of infectious diseases and provides crucial healthcare for underserved populations.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.n.	
	Describe in the field below how your CoC:	
1.	effectively shared information related to public health measures and homelessness; and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

The CoC has two ways of sharing information about public health issues with stakeholders. A) Public Health Resource Hub: The CoC has dedicated a section of its website to public health content from the Tennessee Department of Health, the CDC, HUD or county health departments across its 19-county region. This includes information about outbreak alerts, vaccination events, prevention measures, and response guidelines B) Listserv Notifications: The CoC maintains an active listserv that connects providers across the region. The CoC will disseminate public health guidance, information related to vaccination campaigns, new testing locations and other information as related to emerging healthcare needs for those experiencing homelessness.

The CoC uses its Listserv and Bi-monthly CoC Meetings to communicate specific information from The Tennessee Department of Health and/or local health departments to its service providers. This direct communication ensures providers have specific guidance, training, and tools to actively prevent or respond to disease outbreaks.: The CoC’s bi-monthly meetings offer a platform for sharing updates on local public health initiatives, available healthcare services, and community resources such as food, utility assistance, and essential supplies. These meetings foster a coordinated response by bringing together key stakeholders to address public health and homelessness concerns in real time.

1D-8.	Coordinated Entry Standard Processes.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC’s coordinated entry system:	
1.	can serve everybody regardless of where they are located within your CoC’s geographic area;
2.	uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC;
3.	collects personal information in a trauma-informed way; and
4.	is updated at least annually using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. Our CoC’s primary Coordinated Entry (CE) access point is the Housing Helpline, which covers 100% of the CoC’s region, ensuring access to services regardless of location. The Helpline is advertised on the CoC website, through mailing lists, and at community meetings. CE staff actively engage service providers across the 19-county area, including those not yet involved with the CoC, to ensure clients can access all available resources. Flyers promoting the Helpline are distributed to service providers, and the Tennessee Housing Development Authority hotline refers individuals from middle Tennessee, further expanding access.
2. The CoC’s assessment process ensures fair and equitable access to housing and services for all individuals. CE staff use an evidence-based tool to evaluate the needs and vulnerabilities of those seeking assistance. This standardized approach eliminates bias, with prioritization based on need and vulnerability factors like homelessness duration, chronic homelessness status, and the Matching to Appropriate Placement (MAP) tool score. For example, families with children may be prioritized for rapid rehousing, while chronically homeless individuals with severe health conditions are likely to be referred to permanent supportive housing. This process ensures vulnerable populations, including families, youth, and survivors, are connected to appropriate services.
3. CE staff receive annual training on trauma-informed practices to ensure sensitive, non-intrusive questioning and to protect client privacy. Often CE is the first point of contact for individuals seeking services making it imperative that questions are non-intrusive, asked in a sensitive way and the client’s privacy and confidentiality are ensured throughout the process.
4. CE processes are evaluated annually, using feedback from CoC providers and persons with lived experience to modify procedures. Annual training updates providers on any process and policy changes and reviews standardized assessment protocols.

1D-8a.	Coordinated Entry–Program Participant-Centered Approach.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC’s coordinated entry system:	
1.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
2.	prioritizes people most in need of assistance;	
3.	ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and	
4.	takes steps to reduce burdens on people seeking assistance.	

(limit 2,500 characters)

1. Our outreach extends across various community touchpoints, including homeless service providers, churches, school liaisons, and County officials. Coordinated entry staff collaborate closely with local agencies to engage unsheltered individuals, many of whom are chronically homeless and hesitant to seek help due to mental health or substance abuse issues. We work closely with various outreach groups like Operation Standdown and Colby’s Army who frequently engage with homeless individuals who need assistance but are least likely to request assistance on their own.

2. Our Coordinated Entry (CE) process is designed to prioritize individuals who are most in need of immediate assistance. Utilizing the MAP scoring tool, CE staff assess vulnerability and determine the most suitable housing options based on chronic homelessness status, safety concerns, health conditions, and other critical factors. This approach ensures that those at greatest risk are promptly referred to appropriate housing and services, with a focus on addressing their unique needs.

3. CE staff ensure individuals are rapidly housed by actively managing the referral process and fostering strong relationships with housing providers. After making a referral, CE staff follow up with housing agencies to expedite placements. The HMIS dashboard app alerts agencies to new referrals, allowing immediate access to client information for swift service delivery. In our rural communities, the small, relational nature of agencies and landlords strengthens the housing process. Local landlords, familiar with agency staff through reputation and community ties, often prioritize notifying them of vacancies and seek support when tenant issues arise. This relationship-building enables housing providers to quickly place individuals and help them remain housed, even in challenging circumstances.

4. Housing placements occur rapidly because of our programs’ low-barrier admission policies, ensuring access to services without unnecessary obstacles. The CoC verifies adherence to Housing First principles annually, ensuring housing providers operate with minimal barriers, prioritizing quick and lasting placements. The CE process is further streamlined by triaging immediate needs upfront, with full assessments conducted only when necessary, reducing data collection burdens and accelerating access to housing.

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC through its coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. The CoC publicizes the availability of its Coordinated Entry services to all eligible persons without regard to race, color, national origin, religion, sex, age, family status, disability, sexual orientation or gender identity. It uses its website and printed flyers prominently displaying the CE Hotline number to make sure individuals know how to reach out for assistance. The flyers are distributed to agencies, outreach workers and posted in locations frequently visited by persons in need of housing assistance. All materials encourage anyone in need of housing or support services to reach out for help. This broad distribution ensures that critical information about available resources reaches those most in need, enhancing accessibility and engagement with the CE system.

2. The Coordinated Entry (CE) Policies and Procedures, available on the CoC website, outline participants’ rights, including the right to file a nondiscrimination complaint. All CE participating agencies comply with federal and state laws related to fair housing. This includes the Fair Housing Act, the Americans with Disabilities Act, the HUD Equal Access Rule and the Tennessee Human Rights Act and the Tennessee Disability Act. Case managers frequently distribute Fair Housing Rights brochures to individuals who are talking to landlords and seeking housing to ensure they are aware of their rights. Participants are also reminded that they have the option to file complaints with local, state, or federal nondiscrimination bodies at any time. This process ensures that participants are fully aware of their rights and the steps to protect them.

3. The CoC process for addressing fair housing violations includes providing annual training on Fair Housing regulations and the HUD Equal Access Rule to service providers. In the event a fair housing concern is reported, the CoC would coordinate with the appropriate entities to resolve the complaint. This includes notifying the Tennessee Housing Development Agency, the entity responsible for the Consolidated Plan. This process ensures that all issues are addressed in a timely manner.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	07/03/2023

1D-9a.	Using Data to Determine if Racial Disparities Exist in Your CoC’s Provision or Outcomes of CoC Program-Funded Homeless Assistance.	
	NOFO Section V.B.1.p.	

Describe in the field below:	
1.	the data your CoC used to analyze whether any racial disparities are present in your CoC’s provision or outcomes of CoC Program-funded homeless assistance; and
2.	how your CoC analyzed the data to determine whether any racial disparities are present in your CoC’s provision or outcomes of CoC Program-funded homeless assistance.

(limit 2,500 characters)

1. To assess racial equity within our service delivery system, we use HMIS data and the StellaP tool. By reviewing demographic data in Stella P, we are able to identify disparities in program access and performance outcomes. We use this information to inform our assessment protocols and service strategies.

2. In reviewing our CoC's 2022 and 2023 data in Stella P to assess how effectively we are addressing disparities in our service delivery system, we focused on three key metrics: A) Access to Housing Programs by Race, B) Length of Homelessness by Race and C) Exits to Permanent Housing.

To analyze access to housing, we compared the demographic characteristics of participants in all program types to those who accessed Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH). The 2023 data shows that Black participants accessed RRH at a higher rate than white participants (51% compared to 42%), while Black participants accessed PSH at a significantly lower rate than white participants (32% vs. 65%). Compared to 2022, the rate of access to PSH remained the same, but the disparity in RRH had widened (in 2022, the gap was much smaller, with 47% of Black participants and 48% of white participants accessing RRH).

We considered length of homelessness by race by examining the number of days people were homeless, broken down by race/ethnicity, to see if Black participants were being connected to housing as quickly as white participants. In 2022, Black individuals were homeless for an average of 14 days longer than white individuals. By 2023, this disparity had improved significantly, with Black participants only being homeless for 5 days longer than white participants.

Our most surprising finding came from examining exits to permanent destinations. In 2022, Black and white households exited to permanent housing at an equal rate. However, in 2023, the placement rate for Black households surpassed that of white households, with 48% of Black participants exiting to permanent housing compared to 42% of white participants. We also looked at Returns to Homelessness by race/ethnicity but found no disparities in the data. These metrics indicate progress in some areas, such as the reduction in the length of homelessness for Black individuals and an increase in their exits to permanent housing. However, disparities in access to certain housing programs, such as PSH, remain an area for further improvement.

1D-9b.	Implemented Strategies to Prevent or Eliminate Racial Disparities.	
	NOFO Section V.B.1.p	

Select yes or no in the chart below to indicate the strategies your CoC is using to prevent or eliminate racial disparities.

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes

4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes
5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity?	Yes
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
	Other:(limit 500 characters)	
12.		

1D-9c.	Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity.	
	NOFO Section V.B.1.p.	

Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

(limit 2,500 characters)

Our CoC Board has adopted a formal System Evaluation Plan “to continuously evaluate its processes, policies and procedures to prevent or eliminate racial disparities in the provision or outcomes of CoC Program-funded homeless assistance” The plan includes the following:

1. An annual membership review to ensure the participation of advocates and service providers most engaged with underserved communities and populations. This includes making sure persons with lived experience are engaged with the CoC and their voices are heard. This is the first quarter of every year.
2. Annual Review of CoC/Agencies Policies and Procedures ensure adherence to CoC written standards, Housing First tenants and confirm the absence of biases in organizational structures and policies, decision-making processes, and service delivery. This occurs is ongoing through the year.
3. Completing an annual gaps analysis to solicit feedback from persons with lived experience and community stakeholders to identify unseen barriers and ensure services are tailored to the diverse needs of marginalized groups. The CoC uses survey tools and/or focus groups to collect feedback on policies, procedures and barriers clients face. The gaps analysis examines data related to service utilization, income growth, housing outcomes and CE prioritization to identify racial disparities and gaps in service delivery. The Gaps Analysis is to be done in the 4th quarter.
4. Annual Coordinated Entry Assessment to ensure that the system operates in a way that provides equitable access to housing and services for all racial and ethnic groups. The evaluation is in the second quarter of the year.
5. Included in the approved System Evaluation Plan is the commitment that the CoC will organize and promote training opportunities for stakeholders and service providers on key subjects related to racial equity. Examples of the topics the CoC wants to offer include: Racial Equity & Inclusion (training offered by C4), HUD Equal Access Rule, Racial Equity and Fair Housing and Implicit Bias in Coordinated Entry.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.	
	NOFO Section V.B.1.p.	
	Describe in the field below:	
	1. the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	
	2. the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.	

(limit 2,500 characters)

1. The COC uses data related to service utilization, housing placements, housing exits and returns to homelessness to track its progress on eliminating racial bias in its service delivery processes. These critical data points are reviewed to ensure there are no disparities in housing outcomes for people of color. This information helps the CoC monitor changes in a key system performance measures and track changes in the racial breakout of positive outcomes to ensure more equitable results. The CoC has begun using the dashboards in Stella P to share information about the racial disparities in the CoC's housing outcomes. The initial focus is access to programs. Our most recent data shows a 2% decrease in the number of persons of color participating in our housing programs. While this could be a positive indicator, it could also mean a barrier preventing access has developed and BIPOC individuals are having trouble accessing our system. We are working to better understand what factors have caused the identified change in participant demographics. The CoC is in the process of creating a data dashboard to track and easily display key metrics related to who is on the Prioritization List, who is being referred and placed in programs and what do housing outcomes are occurring. The intent of the new dashboard is to make it easier to visualize racial disparities in housing outcomes, service utilization, and access to programs, enabling the CoC to identify adjustments needed in CoC procedures to eliminate disparities and minimize the number of persons affected.

2. The CoC uses the HUD Racial Equity Tool, Stella P and HMIS to collect and anew alyze data related to racial disparities. Custom reports in HMIS enable the Executive Committee to examine specific data points and measure the progress of its efforts to prevent continuing outcome disparities.

1D-10.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
	NOFO Section V.B.1.q.	

Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decisionmaking processes.

(limit 2,500 characters)

The CoC’s outreach efforts to engage individuals with lived experience are ongoing, reflecting our commitment to ensuring their voices are part of our planning and decision-making. We use a multi-pronged approach to identify and engage those interested in participating in CoC meetings and contributing to discussions.

Our targeted outreach extends to service providers, where we encourage agencies to nominate current or former program participants who have valuable insights and are interested in joining the CoC or its committees. Additionally, our outreach teams invite unsheltered individuals to share their lived experiences to help the CoC identify response strategies by offering firsthand perspectives on housing barriers and solutions.

We’ve also broadened our efforts by sending recruitment emails to the full network of CoC stakeholders. Many of these organizations employ individuals with lived experience, and we encourage them to participate in CoC meetings so their experiences can inform our work. Our goal is to engage persons with lived experience and sustain their involvement in the CoC by cultivating an inclusive and collaborative environment that demonstrates we value their expertise.

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

You must upload the Lived Experience Support Letter attachment to the 4B. Attachments Screen.
Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Routinely included in the decisionmaking processes related to addressing homelessness.	2	2
2.	Participate on CoC committees, subcommittees, or workgroups.	3	2
3.	Included in the development or revision of your CoC’s local competition rating factors.	1	1
4.	Included in the development or revision of your CoC’s coordinated entry process.	1	1

1D-10b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

Our Continuum of Care (CoC) and partner agencies recognize the valuable insight that persons with lived experience (PLE) of homelessness bring, understanding both the challenges faced by the unhoused and the most effective solutions. As a result, our agencies actively create employment opportunities for current or former program participants, integrating PLE into their operations across a range of roles. Currently, PLE individuals work in administrative, maintenance, and housekeeping positions, serve as house monitors in residential programs, operate as staff in emergency shelters, and work as delivery drivers for program-related services. These roles offer valuable, real-world employment experience while contributing meaningfully to agency operations.

Many agencies in our CoC are committed to mentoring program participants to prepare them for employment opportunities. When staff openings arise, PLE are encouraged to apply and often secure positions within the very agencies that supported them through their housing journey. One of our largest housing providers has implemented a progressive hiring model that engages PLE in case management and peer support roles. This model incrementally increases responsibilities, coupled with professional development and job training, to help peer mentors transition into full-time employment within the agency. This approach builds both confidence and capacity, ensuring PLE can thrive in more advanced positions over time.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
1.	how your CoC gathers feedback from people experiencing homelessness;	
2.	how often your CoC gathers feedback from people experiencing homelessness;	
3.	how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program;	
4.	how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and	
5.	steps your CoC has taken to address challenges raised by people with lived experience of homelessness.	

(limit 2,500 characters)

1. The CoC collects information from persons experiencing homelessness who are not participating in CoC/ESG program through community meetings and the survey tool used for our Annual Gaps Analysis.

In the southern part of our CoC, a coalition of black pastors host quarterly community meetings with persons experiencing homelessness to gather feedback, identify needs and try to connect persons with services. In another region of the CoC, a provider hosts monthly classes with homeless and formerly homeless individuals. The meetings allow the agency to collect information about current needs. They use the information to tailor their services to the needs of the community and adjust policies and procedures to best support people who need services. The survey tool associated with the CoC's Annual Gaps Analysis is designed to collect feedback concerning housing barriers, service accessibility, support gaps, quality of services and unmet needs. Most importantly, the survey tool seeks feedback about whether individuals feel the CoC's processes are inclusive and fair. The results of the Gaps Analysis informs CoC planning.

2. Community meetings to collect feedback from persons with lived experience occur monthly in some parts of the CoC and quarterly in other parts. The Gaps Analysis occurs annually.

3. The CoC collects feedback from its project participants in multiple ways to ensure responses are captured in a timely manner. Examples of our feedback processes include the following: a) Intake Interviews - providers solicit feedback during the initial intake interview. This helps build trust with the client, helps identify barriers impacting the client and often identifies urgent needs. It also enables staff to define a person-centered plan for assisting the client. b) Home Visit/Client Check Ins – Additional information is gathered during home visits and/or virtual check ins throughout a client's project stay, allowing participants to voice concerns and receive support in real time. c) Client Feedback Surveys: Anonymous surveys are conducted throughout the year and during participant exits to collect data on service quality. These surveys offer ongoing opportunities for participants to evaluate their experiences and inform service improvements. These results are reviewed to address service delivery gaps.

4. All of the feedback mechanisms are on-going throughout the year.

5.

1D-11.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.s.	
	Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

Two examples of efforts undertaken by the CoC membership to engage elected officials are included below:

1. The City of Clarksville has taken significant steps toward reforming zoning and land use policies to permit more housing development. The City has hired a consultant to conduct a thorough review of existing housing codes and gather community input, with the goal of drafting new, more inclusive zoning codes that support the development of affordable and supportive housing. This process is designed to identify specific barriers in the current code that hinder housing development. These findings will be submitted to both the City Council and the County Commission for review and approval.

2. The Executive Director of Franklin Community Development, our Collaborative Applicant, is actively working to reduce regulatory barriers to housing development by engaging with each of the 19 County Mayors in our geographic areas to advocate for changes to restrictive housing policies. For example, in Williamson County he has met with city and county officials to advocate for lifting the current moratorium on multifamily housing development within Franklin’s city limits. This moratorium not only hampers efforts to expand low-income housing options but also prevents homeowners from creating efficiency apartments on their own properties, which could serve as viable housing options for Rapid Rehousing clients. By pushing for this policy change, we hope to remove a significant obstacle that prevents the development of much-needed affordable housing in the community.

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Advance Public Notice of Your CoC's Local Competition Deadline, Scoring and Rating Criteria.	
	NOFO Section V.B.2.a. and 2.g.	

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	08/12/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	08/12/2024

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.	

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

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

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	157
2.	How many renewal projects did your CoC submit?	7
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process. NOFO Section V.B.2.d.	
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Describe in the field below:	
1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1. For rapid rehousing programs, the CoC evaluated the program’s ability to successfully house persons in permanent housing by looking at the percentage of leavers who exit the project to go to a permanent housing destination. For PSH projects, the metric considers the number of participants who exit to a permanent housing destination + the number of persons who remain in the project at the end of the report period to determine the percentage of participants with a positive outcome.

2. The CoC scoring tool included a metric that evaluated the length of time between project start date and housing move-in date. Higher scores were given to projects that were able to quickly move persons into permanent housing.

3. The CoC’s scoring tool gives points to projects that serve participants with severe needs and vulnerabilities. Vulnerabilities are assessed by analyzing four key indicators from the APR: Cash Income Sources (#17), Physical and Mental Health Conditions at Start (#13a1), History of Domestic Violence (#14a), and Number of Chronically Homeless Persons (#26b). Projects earn points based on the percentage of their participants exhibiting these vulnerabilities. For instance, if over 80% of adults in a project had an income below \$501 at project start, the project earned 4 points; 79-59% earned 3 points; 58-38% earned 2 points; 37-21% earned 1 point; and below 20% earned 0 points. This same point structure was applied for indicators like mental illness, substance abuse, chronic homelessness, and history of domestic violence, ensuring that projects addressing participants with the greatest barriers received higher scores.

4. The CoC’s scoring tool considered the most important barriers to consider were: lack of income, mental illness, substance abuse, chronic homelessness and a history of domestic violence.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	
	Describe in the field below:	
	1. how your CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
	2. how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
	3. how your CoC rated and ranked projects based on the degree that proposed projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and steps the projects took or will take to eliminate the identified barriers.	

(limit 2,500 characters)

1. Our CoC prioritizes soliciting input from persons of different races and ethnicities, particularly those over-represented in the local homeless population. The CoC rating tools used in our local competition were created by a committee; whose membership includes 40% people of color. This closely mirrors our 2023 demographic data which shows 44% of the persons receiving services in the CoC are Black. Each tool included at least one rating factor related to how a project applicant would ensure racial equity in the delivery of services. A narrative response describing the steps the applicant would take to assist persons of color in overcoming housing barriers was required.

2. The CoC’s evaluation team included persons of color (25%), lived experience (25%) and key service sectors (50%). This diverse group reviewed project applications, read narrative responses and scored each application using pre-defined rubrics. Their individual perspectives ensured that the subjective elements of the CoC’s evaluation process accounted for a broad spectrum of needs.

3. Each evaluation tool included rating factors related to how a project applicant would ensure racial equity in the delivery of services and how the applicant would incorporate feedback for persons with lived experience into policies and procedures. The responses to these questions give evaluators insight as to how a project addresses barriers faced by its program participants. The renewal scoring rubric awarded 30 points to applicants with a clear, well defined answers to these two questions (19% of the total score). In the new project scoring rubric, the answers were worth 10 points (12% of the total score).

1E-4.	Reallocation—Reviewing Performance of Existing Projects.	
	NOFO Section V.B.2.f.	
	Describe in the field below:	
1.	your CoC’s reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;	
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC’s local competition this year;	
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and	
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.	

(limit 2,500 characters)

1. Our Continuum of Care (CoC) uses data from HMIS and SAGE to determine which projects are candidates for reallocation. The process begins with the use of a comprehensive scoring tool that evaluates each project’s success in achieving key performance metrics, such as exits to permanent housing, income growth, and housing retention. The tool is designed to prioritize projects that address the most severe needs and vulnerabilities of participants, including factors like income levels, health conditions, domestic violence history, and chronic homelessness status.

In addition to performance evaluations, the CoC reviews financial information for each project. The rating tool scores projects based on their percentage of unspent funds and the average cost of positive outcomes in comparison to the CoC average. In addition, the last three years of spending data is reviewed for each renewals. This review helps identify projects that have consistently underspent their funds or failed to fully utilize their allocations, suggesting that resources could be better allocated to other high-performing or more urgently needed projects.

2. The CoC did not identify any underperforming projects.

3. The CoC did not reallocate any funds

4. The CoC did not reallocate any projects because there was a unanimous agreement that all the projects currently operating in the CoC were needed, performing well and considered an asset to the CoC.

1E-4a.	Reallocation Between FY 2019 and FY 2024.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	
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You must select a response for question 1E-4a.

1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/08/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status–Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	
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You must enter a date in question 1E-5c.

1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	
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You must enter a date in question 1E-5d.

2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

	Enter the name of the HMIS Vendor your CoC is currently using.	Wellsky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC's HMIS coverage area.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2024 HIC data into HDX.	
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You must enter a date in question 2A-3.

2A-4.	Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

In the field below:

1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and
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2. state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards.

(limit 2,500 characters)

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

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	154	7	135	83.85%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	83	0	83	100.00%
4. Rapid Re-Housing (RRH) beds	83	0	83	100.00%
5. Permanent Supportive Housing (PSH) beds	38	0	38	100.00%
6. Other Permanent Housing (OPH) beds	0	0	0	0.00%

2A-5a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.
 NOFO Section V.B.3.c.

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

- steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
- how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

- The TN 503 Competition Report is not accurate. It does not provide an accurate coverage rate or summarize what is in HDX2. The report says only 7 of the CoC's emergency beds are DV beds. HDX2 correctly indicates 30 beds are DV beds. This means the adjusted number of total non VSP beds should be 131 with 100% of those beds in HMIS. There are four victim service providers with a total of 30 beds listed on the HIC in HDX2. One provider, who has 7 beds, has a comparable database. The other three providers do not received ESG or CoC funds. The competition report also incorrectly identifies VSP TH beds. Our CoC has 38 VSP TH beds. They all use a comparable database and they are correctly accounted for in HDX2.
- Not applicable. When the coverage rates are accurately calculated all rates are above 84.99%

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	Yes
---	-----

2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2024 PIT count.	01/30/2024
--	---	------------

2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/10/2024
--	---	------------

2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

Describe in the field below how your CoC:

- | | |
|----|---|
| 1. | engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process; |
| 2. | worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and |
| 3. | included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count. |

(limit 2,500 characters)

1. Our CoC has done outreach to youth service providers to increase their participation in the CoC. We consulted with them when planning the 2024 count to make sure their insight informed how our volunteer teams were deployed.
2. The CoC did not identify locations with a specific focus on homeless youth.
3. The CoC did not include youth experiencing homelessness as counters in the unsheltered count.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	

	In the field below:
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
3.	describe whether your CoC’s PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs’ geographic; and
4.	describe how the changes affected your CoC’s PIT count results; or
5.	state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2024.

(limit 2,500 characters)

1. There was no change in the sheltered count methodology.
2. There was no change in the unsheltered count methodology.
3. Our PIT count was not affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs’ geographic area
4. Both the Sheltered and unsheltered count were higher in 2024. This increase is not associated with a change in methodology. Rather, there were changes in participation. A new shelter (not operating on the 2023 PIT night) was operating in 2024, and more volunteers participating in the unsheltered count. This led to an increase in the number of unsheltered individuals who were identified and surveyed by volunteers.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reducing the Number of First Time Homeless—Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
1.	describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
2.	describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1. The CoC analyzed its Coordinated Entry and assessment data to identify common characteristics existing for persons becoming homeless for the first time. The review showed insufficient income, family conflict, a lack of a local support system and substance abuse and/or mental health issues were most frequently cited by individuals as being the cause of their becoming homeless. This information prompted Coordinated Entry to adjust the intake protocols to make sure these and other similar risk factors are being identified early in the assessment process.

2. The CE Helpline serves as the first point of contact for persons needing housing and support services. CE staff focus on connecting persons at-risk of homelessness with prevention resources and other financial help to assist with utilities, food and transportation to supplement income needs. The CE staff use a triage assessment tool to quickly identify the most critical needs of a household, the potential barriers to resolving the household's housing crisis and the most appropriate intervention available to stabilize their housing situation. When appropriate, referrals to service providers offering supports like landlord mediation, employment services and mental health counseling are made. If a client is a potential candidate for mainstream resources, CE staff will connect them with a SOAR-certified housing specialist to assist with a benefits application. Referrals are documented in HMIS to enable the CoC to identify the most critical interventions and strategically allocate resources and funding to meet identified needs.

3. The CoC Executive Committee will be responsible for overseeing the CoC's strategy for this performance measure.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoC's geographic area?	No

2C-2.	Reducing Length of Time Homeless—CoC's Strategy.	
	NOFO Section V.B.5.c.	

In the field below:

1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1. To reduce the length of time individuals and persons in families remain homeless, our CoC is focused on improving agency collaboration and streamlining our processes. Our CE Lead has invested a significant amount of time building relationships with both CoC-funded and non-funded service providers to ensure staff have a thorough understanding of the resources available in the CoC. This preparation is enabling CE (and other providers) to more effectively connect individuals with the appropriate resources to address their immediate needs. Coordinated Entry staff manage the CoC Prioritization List and refer to the list to identify who has been homeless the longest and is most vulnerable when a housing opening occurs. The CE Lead also leads regular Case Conferencing meetings enabling the larger group of case managers to collectively problem ways to overcome individual housing barriers. Lastly, the CoC monitors its housing programs annually to verify they all operate with fidelity to Housing First principles. This helps ensure individuals can access housing quickly without any housing readiness conditions.

2. Our CoC uses HMIS data, assessment questions and shelter records to identify persons who have been homeless the longest. Persons who are chronically homeless are prioritized for PSH (but sometimes referred to RRH when no PSH is available). CE staff will use the length of time homeless and the individual’s acuity score to determine who will be considered first. Referrals for RRH openings are made based on acuity score and length of time homeless.

3. The CoC Executive Committee is responsible for overseeing the CoC’s strategy to reduce length-of-time homeless.

2C-3.	Successful Permanent Housing Placement or Retention –CoC’s Strategy.	
	NOFO Section V.B.5.d.	

	In the field below:
1.	describe your CoC’s strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC’s strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1. To increase the rate at which individuals in emergency shelter, transitional housing, and rapid rehousing move to permanent housing, our CoC focuses on two key strategies. First, case managers work with project participants to create a comprehensive housing plan. This includes identifying the necessary skills and resources an individual will need to achieve their housing goals. Staff assist clients in connecting to mainstream benefits, employment resources, job training and educational opportunities that will support their housing retention. Our second priority is for the CoC to continue to expand its landlord engagement efforts, to grow the availability of affordable housing options for clients ready to transition to permanent housing. In addition to landlord outreach, our CE Lead is continuously looking for permanent housing options beyond traditional landlord arrangements, such as HCV and EHV vouchers and housing units from nonprofit housing developers to add to the inventory of options available to clients.

2. Our CoC's strategy to improve the retention of individuals and families in permanent housing and increase exits to permanent housing focuses on three areas. First, the CoC is committed to offering case management staff with housing-focused case management and motivational interviewing training opportunities to help them effectively guide and support clients in securing housing. Second, we work closely with Workforce Development programs, employment resources, and mainstream benefits to help participants gain the financial stability needed to maintain housing. Third, we will encourage participation in life skills education and strengthen connections to community resources to empower clients to advocate for themselves and enhance their housing stability. This comprehensive approach will provide clients with the necessary support and resources to successfully retain and sustain permanent housing.

3. The CoC Planning Committee is responsible for overseeing this strategy

2C-4.	Reducing Returns to Homelessness—CoC's Strategy.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC's strategy to reduce the rate that individuals and families return to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1. Our CoC's strategy for identifying individuals and families at risk of returning to homelessness involves reviewing historical data in HMIS, as well as using targeted intake and Coordinated Entry assessment questions to identify previous episodes of homelessness.

2. Our CoC's strategy to reduce the number of individuals and families returning to homelessness includes several elements. First, all housing providers operate using Housing First principles, ensuring housing is provided without preconditions, using low-barrier admissions, and offering tailored case management. Second, all agencies adhere to adopted service delivery standards, which include discharge planning procedures, eliminating lease restrictions related to sobriety or mandatory service participation, and implementing flexible policies to prevent evictions, such as offering mediation services between tenants and landlords, allowing for repayment plans, and providing access to emergency rental assistance to address non-payment of rent. Third, the CoC recognizes prior homelessness as a risk factor and ensures households with a history of homelessness are matched with intensive support services. Additionally, project participants are referred to ancillary resources such as legal aid services, financial counseling, and employment programs to address a range of issues that can impact housing stability. Finally, agencies work closely with clients to develop contingency plans that define possible obstacles to sustaining housing and strategies for overcoming common problems.

3. The CoC's Executive Committee is responsible for overseeing this strategy.

2C-5.	Increasing Employment Cash Income—CoC's Strategy.	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC's strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.	

(limit 2,500 characters)

1. The CoC’s strategy to increase employment income is to help program participants develop marketable job skills and connect with vocational training, educational opportunities, and employment resources they can leverage to successfully gain employment or find a better paying job. To accomplish this, the CoC works with local employment agencies, private employers, Workforce Development and Job Center staff to identify job openings and training opportunities available to program participants. Coupled with the identification of potential job opportunities, the CoC provides job coaching, assistance with resume writing, interviewing preparation and even childcare, if needed, to help individuals in their job search efforts.

2. CoC member agencies work with several mainstream employment agencies in middle Tennessee to connect persons with job opening and training opportunities. The CoC reaches out to the South Central Tennessee Workforce Alliance (with locations in 9 counties), Workforce Essentials, Tennessee Workforce Development, Job Corps and American Job Center Tennessee. Case managers work directly with program participants to: a) connect them with mainstream employers, temporary staffing agencies and/or apprenticeship programs to secure opportunities for participants; b) provide in-house job training & assist in job searches; c) identify employers in areas where their housing is located; and, d) assist with resume writing, dress for success, how to access computers for job searches and mock interviews, etc. For individuals who are unable to work, access to benefits is the best source of income.

3. The CoC Executive Committee will be responsible for overseeing the CoC's strategy for this performance measure.

2C-5a.	Increasing Non-employment Cash Income—CoC's Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
	1. describe your CoC's strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.	

(limit 2,500 characters)

1. The CoC works to make sure individuals and families are connected to all available supports to help them obtain and retain stable housing. All case managers in the CoC are encouraged to participate in SOAR training online which gives them the ability to identify eligible candidates for assistance and navigate the application process for SSI and SSDI benefits. In addition, there is a Housing Specialist assigned to our region (Region 5) who will meet with a project participant, do a pre-screening, gather medical information and assist eligible individuals in applying for benefits. Case managers also work to link households with Families First, SNAP, EITC, CTC, and TennCare benefits when appropriate.

2. The CoC Executive Committee will be responsible for overseeing the CoC's strategy for this performance measure.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

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

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

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

Project Name	Project Type	Rank Number	Leverage Type
This list contains no items			

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.r.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
--	--	----

3C-2.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applicants.	
	NOFO Section I.B.3.j.	

	Did your CoC submit one or more new project applications for DV Bonus Funding?	No
Applicant Name		
This list contains no items		

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	10/15/2024
1C-7. PHA Moving On Preference	No		
1D-10a. Lived Experience Support Letter	Yes	Lived Experience ...	10/24/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/15/2024
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	10/24/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	10/24/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notifications of ...	10/09/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/09/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/09/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's Homeless Da...	10/09/2024
3A-1a. Housing Leveraging Commitments	No	Housing Leveraging	10/15/2024
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	10/15/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preferences

Attachment Details

Document Description:

Attachment Details

Document Description: Lived Experience Support Letter

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notifications of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Results

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: HUD's Homeless Data Exchange Competition Report

Attachment Details

Document Description: Housing Leveraging

Attachment Details

Document Description: Healthcare Formal Agreement

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/27/2024
1B. Inclusive Structure	10/18/2024
1C. Coordination and Engagement	10/18/2024
1D. Coordination and Engagement Cont'd	10/24/2024
1E. Project Review/Ranking	Please Complete
2A. HMIS Implementation	Please Complete
2B. Point-in-Time (PIT) Count	10/18/2024
2C. System Performance	10/18/2024
3A. Coordination with Housing and Healthcare	10/18/2024
3B. Rehabilitation/New Construction Costs	10/16/2024
3C. Serving Homeless Under Other Federal Statutes	10/09/2024

4A. DV Bonus Project Applicants	10/09/2024
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required



CLARKSVILLE HOUSING AUTHORITY

ADMISSIONS AND CONTINUED OCCUPANCY POLICY FOR THE PUBLIC HOUSING PROGRAM

Revision Date	
January 17, 2018	

Approved by the PHA Board of Commissioners:
Submitted to HUD:

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PHA Policy

The PHA offers a preference for working families, described in Section 4-III.B.

The PHA may verify that the family qualifies for the working family preference based on the family's submission of the working member's most recent paycheck stub indicating that the working member works at least 30 hours per week. The paycheck stub must have been issued to the working member within the last thirty days.

The PHA may also seek third party verification from the employer of the head, spouse, cohead or sole member of a family requesting a preference as a working family.

The PHA offers a preference for victims of domestic violence, dating violence, sexual assault, or stalking, as described in Section 4-III.B. To verify that applicants qualify for the preference, the PHA will follow documentation requirements outlined in Section 16-VII.D.

The PHA offers a preference for involuntarily displacement due to fire, flood, or other disaster. To verify that applicants qualify for the preference, the PHA will accept documentation from various agencies, including but not limited to FEMA, Red Cross, Fire Department, or City Department of Code Enforcement.

The PHA offers a preference for Homeless Veterans. To verify that applicants qualify for the preference, the PHA will accept documentation from various agencies working with Veterans and Homeless individuals.

The PHA offers a preference for residency in in Montgomery County. To verify that applicants qualify for the preference, the PHA will accept documentation of proof of residency such as but not limited to current lease, voter registration card, or

The PHA offers a preference for Educational or Training programs designed to prepare people for the job market. To verify that applicants qualify for the preference, the PHA will accept documentation for the educational or training facility or agency documenting 50% completion.

PART III: VERIFYING INCOME AND ASSETS

Chapter 6, Part I of this ACOP describes in detail the types of income that are included and excluded and how assets and income from assets are handled. Any assets and income reported by the family must be verified. This part provides PHA policies that supplement the general verification procedures specified in Part I of this chapter.

7-III.A. EARNED INCOME

Tips

PHA Policy

Unless tip income is included in a family member's W-2 by the employer, persons who work in industries where tips are standard will be required to sign a certified estimate of tips received for the prior year and tips anticipated to be received in the coming year.

If the applicant pays their share of rent to a cohabitant and is not named on the lease, FHA will require both verification from the Landlord that the applicant resides in the unit, and verification from the cohabitant of the amount of rent paid by the applicant.

If the applicant is subletting, they must have the legal right to sublet.

If an applicant owns a mobile home, but rents the space upon which it is located, then "Rent" must include the monthly payment made to amortize the purchase price of the home.

3. Families with an Elderly (age 62 and over) or Disabled Head of Household or Spouse with income from the Social Security Administration (40 points)

Note: Applicants must bring a current benefit letter from the SSA to their eligibility appointment. Persons who have applied for but are not receiving SSA income (social security, social security disability, or supplemental security income (SSI)) at the time of their eligibility determination do not qualify for the preference.

4. Head of Household / Spouse / Sole Member with Employment (30 Points)

Individuals that are either the Head of Household or Spouse that are employed at least part-time (20 hours a week)

5. Homeless (15 points)

Individuals and families that meet the HUD- published Category 1 or Category 4 definitions of homeless

[Redacted text block]

[Redacted text block]

[Redacted text block]

Note: Applicants claiming the homeless preference under category 4 must provide a statement and certify that they are fleeing, are in need for assistance, have no subsequent residence and lack the support and financial resources to obtain other permanent housing.

6. Displaced person(s) (10 points)

Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws. Households who have been involuntarily displaced because of a natural disaster (fire, flood, tornado, etc.), which occurred within the boundaries of Williamson County, AND occurred no more than six (6) months from the date of pre-application; AND where the household has not secured permanent replacement housing at the time of pre-application.

- *Persons who request a local preference due to a fire must present a fire or damage report from a reputable source (local fire department, Red Cross, etc.) that shows the fire caused the unit to be uninhabitable and that no member of the household on the application caused the fire to occur.*

Note: Families who are eligible for other disaster relief housing assistance do not qualify for this preference, housing or service provider, and for those exiting an institution, they must also provide discharge paperwork from that institution.

7. Local Residency (5 points)

Households who live in Williamson County on the date they submit a pre-application. The residential/physical address entered on the pre-application will be used to determine residency. If an applicant self-selects the local residency preference and enters a non-local residential/physical and/or mailing address (address in another county or state), FHA will not contact the applicant to verify the preference. A mailing address within Williamson County is not sufficient for this preference. FHA will remove the preference selection and return the applicant to the appropriate position on the list.

Note: A post office box mailing address will not be considered sufficient proof to verify residency and qualify the family for the residency preference.

8. Victims of Domestic Violence (3 points)

Verification: Copy of Police Report and/or statement from Domestic Violence shelter showing the nature of the act in question or that the applicant received services and housing from the shelter.

9. Veterans Preference (1 point)

This preference is available to current member of the U.S. Military Armed Forces, veterans, or surviving spouses of veterans.

October 12, 2024

U.S. Department of Housing and Urban Development
451 7th Street S.W.,
Washington, DC 20410

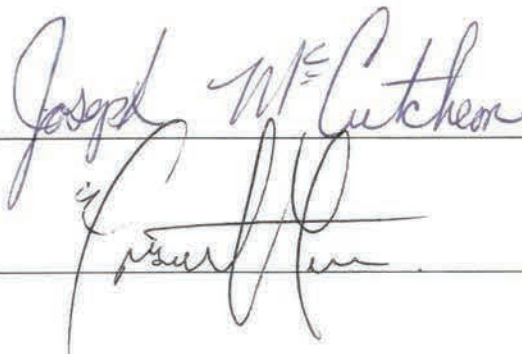
Dear SNAPS Office,

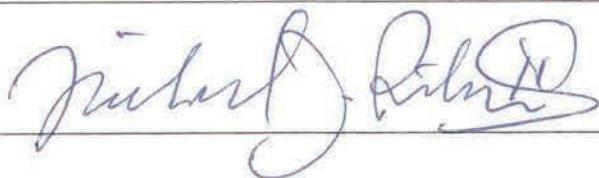
We are signing this letter of support for the Central Tennessee Continuum of Care because we believe in their commitment to preventing and ending homelessness in our region. Each of us has personally experienced homelessness, and we understand the challenges faced by those who are currently without stable housing.

We appreciate being able to contribute to the CoC's efforts by sharing our knowledge of what's needed in our community. Our experiences give us insight into what works and what doesn't, and we're grateful for the chance to help shape the policies and procedures that impact people in situations like ours.

We support the CoC's application for FY2024 funding, and its efforts to help people experiencing homelessness with severe service needs in our area.

Sincerely,





HOUSING FIRST CHECKLIST

Agency Name: FRANKLIN COMMUNITY DEVELOPMENT

For Program Monitoring: Do the Agency's policies and procedures support the following?
(check the box to indicate yes)

- Access to programs is not contingent on sobriety, minimum income requirements, lack of a criminal record, completion of treatment, participation in services, or other unnecessary conditions.
- Programs or projects do everything possible not to reject an individual or family based on poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that are interpreted as indicating a lack of "housing readiness."
- People with disabilities are offered clear opportunities to request reasonable accommodations within applications and screening processes and during tenancy and building and apartment units include special physical features that accommodate disabilities.
- Programs or projects that cannot serve someone work through the coordinated entry process to ensure that those individuals or families have access to housing and services elsewhere.
- Housing and service goals and plans are tenant driven.
- Supportive services emphasize engagement and problem-solving over therapeutic goals.
- Participation in services or compliance with service plans are not conditions of tenancy but are reviewed with tenants and regularly offered as a resource to tenants.
- Services are informed by a harm-reduction philosophy that recognizes that drug and alcohol use and addiction are a part of some tenants' lives. Tenants are engaged in non-judgmental communication regarding drug and alcohol use and are offered education regarding how to avoid risky behaviors and engage in safer practices.
- Substance use in and of itself, without other lease violations, is not considered a reason for eviction.
- Tenants in supportive housing are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements.
- Every effort is made to provide a tenant with the opportunity to transfer from one housing situation, program, or project to another if a tenancy is in jeopardy. Whenever possible, eviction back into homelessness is avoided.

Kevin Rego
Name

6-17-24
Date

TN 503 Renewal Project Scoring Tool

Renewal Project Scoring Tool 2024

PROJECT NAME:

Threshold Questions (Pass/Fail)

Category	Required Attachment	Received Yes/No
Evidence of Agency's Non-Profit Status	501(c)3 Letter	
Agreement to Participate in Coordinated Entry	CoC Coordinated Entry Letter	
Match	Letter of Intent from Agency	
Most Recent Audit	Audited Financial Statement from last completed fiscal year	
Evidence of HMIS Participation (or Comparable Database)*	CoC APR for prior program year	
Outstanding HUD Audit Findings	Audit Outcome Document	
HUD Monitoring Finding (within the last 2 years)	Documentation of Corrective Action Plan from HUD and related correspondence	
Housing First	Checklist completed by Project Applicant	

The following information is collected from the applicant's RFP response. Scoring is based on applicant answers describing their proposed program

Priority Populations

Info Source: APR

Objective	Scoring Rubric	Possible Points	Actual Points
Project serves individuals with low or no income	50% or more of adults had no income or very low income when entering project = 5 points, less than 50% = 0 points	5	
Project serves individuals with Mental Illness	50% or more of adults had mental illness when entering project = 5 points, less than 50% = 0 points	5	
Project serves individuals with Alcohol or Drug Abuse	50% or more of adults had alcohol or substance abuse when entering project = 5 points, less than 50% = 0 points	5	
Project serves individuals with a history of domestic violence	50% or more of adults had a history of domestic violence = 5 points, less than 50% = 0 points	5	

Fund Management

Info Source: Sage/APR

Expenditure of Funds	Agency successfully expended 100% - 98% of funds without budget modification = 5 points, 3%-4% return of funds = 4 points, 5-8% return = 3 points, 9-11% = 2 points, 13-14% = 1 point, more than 15% = 0	5	
Effective Use of Funds	Cost/Successful Outcomes are equal to or below CoC average in comparison to like projects = 5 points, within 5% of average = 4 points, within 10% of average = 3 points, within 15% of average = 2 points, within 20% of average = 1 point, more than 20% == 0 points	5	

TN 503 Renewal Project Scoring Tool

Local Priority

Service Priority	Permanent Housing, RRH =4	4	
	Joint Transitional Hsg/RRH = 3		
	Coordinated Entry=3, HMIS=3, TH=2		
Project Dedicates Beds for Persons experiencing chronic OR Project Prioritizes Beds for persons experiencing chronic homelessness	100%= 3 points; 99%-1% = 1 point	3	
Attendance at CoC General Meeting, CoC Committee, and/or Weekly Match	2=yes	2	
	0=no		
Subtotal 1		39	

Narrative Questions	Scoring Rubric	Maximum Score	Assigned Score
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NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	Actual Score
Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes =5	5	
	Plan shows basic understanding of client stability and expected outcomes = 3		
	Plan is vague and poorly structured, or information is missing = 0		
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3		
	Plan is vague and poorly structured or information is missing = 0		
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. =7		
	Plan is vague and poorly structured or information is missing = 0		
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	
	Plan shows basic understanding of need to use feedback in designing service delivery. =7		
	Plan is vague and poorly structured or information is missing = 0		
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5	
	Plan shows basic understanding of client stability and expected outcomes = 3		
	Plan is vague and poorly structured, or information is missing = 0		
Subtotal 2		45	

TN 503 Renewal Project Scoring Tool

Performance Metrics

The Continuum of Care will use data from HMIS, SAGE or a comparable database to evaluate a program's prior performance based on the criteria listed below:

			Possible Points	Actual Points
PSH	Length of Stay	Days spent between project entry and residential move-in is less than 30 days = 15 points; 31-60 = 12 points; 61-180 days = 9 points; 181-365 = 6 points; 366-730 = 3 points	15	
TH	Length of Stay	Percentage of clients who spend 9 months or less in TH. 85% or more = 15 points; 84%-75%=12 points; 74%-65% = 9 points; 64%-55% = 6 points; 54%-45%=3 points; 49%-25%=2 points; less than 25% = 1point	15	
RRH	Length of Stay	Days spent between project entry and residential move-in is less than 30 days = 15 points; 31-60 = 12 points; 61-180 days = 9 points; 181-365 = 6 points; 366-730 = 6 points	15	
All	Exits to Permanent Housing	100% of participants exit PSH to a HUD defined permanent housing option or remaining in housing =25 points; 99%-85% = 20 points; 84%-75% = 15 points; 74%-60% = 10 points; 59%-25%= 5 points; less than 25%=2 points	25	
Stayers	New or Increased Earned Income	50% or more of project stayers have new or increased earned income=6 points; 49%-40%=5 points; 39%-30%=4 points; 29%-20%=3 points; 19%-10%=2 point, less than 10%=1	6	
Stayers	New or Increased Other Income	50% or more of project stayers have new or increased other income=3 points; 49%-25%=2 points; 24%-10%=1 point	3	
Leavers	New or Increased Earned Income	50% or more of project leavers have new or increased earned income=6 points; 49%-40%=5 points; 39%-30%=4 points; 29%-20%=3 points; 19%-10%=2 point, less than 10%=1	6	
Leavers	New or Increased Other Income	50% or more of project leavers have new or increased other income=3 points; 49%-25%=2 points; 24%-10%=1 point	3	
All	Coordinated Entry	100-75% of clients who entered project came from Coordinated Entry Prioritization List= 5 points, 74-50%= 4 points, 49%-25%= 3 points, 24% or less=2	5	
All	Housing First	Compliance with Housing First (1 Point for each "yes" answer in a 10 question monitoring review attached to project application)	10	
TOTAL POSSIBLE SCORE 157				
Total				

New Projects Scoring Tool 2024

PROJECT NAME:

Final Score:

Project Component:

- Permanent Supportive Housing
- Rapid Re-Housing
- Joint Transitional Housing and Permanent Housing -Rapid Re-housing**
- Supportive Services Only - Coordinated Entry
- Support Servives Only
- Project will serve victims of domestic violence

If project will serve victims of DOMESTIC VIOLENCE, include score for questions #10 and #11 related to SAFETY PLANNING and CONNECTING TO COMMUNITY RESOURCES and question #18 regarding a COMPARABLE DATABASE

A. Project Priorities	Points Available/Method of Measurement	Max Score	Final Score
1. All required documents submitted as listed in RFP	On time, all documents included = 3 On time, 1 or 2 attachments missing =2 On time, incomplete or 3 or more missing attachments = 0	3	
2. Priority Housing Service.	Permanent Housing (PSH or RRH) = 3 points Joint Transitional Housing and Permanent Housing –Rapid Re-Housing = 3 points Supportive Services Only- Coordinated Entry = 2 points	3	
3. Project <u>prioritizes</u> beds for persons experiencing chronic homelessness. Dedicated Plus	100% = 3 points 1-99% = 1 point 0% = 0 points	3	
4. Attendance at CoC General Meeting, CoC Committee, and/or Weekly Match	2=yes/ 0=no	2	
5. Project indicates it will serve individuals with low or no income	2=yes/ 0=no	2	
6. Project proposal indicates it will serve individuals with mental illness	2=yes/ 0=no	2	
7. Project indicates it will serve individuals with alcohol or drug abuse.	2=yes/ 0=no	2	
B. Experience	Points Available/Method of Measurement	Max Score	Final Score
8. Experience of applicant working with the proposed population and in providing housing services similar to the proposed in the application.	Strong history (10+ years)=4	4	
	Experienced (6-10 years)=3		
	Moderate (3-6 years)=2		
	Novice (1-3 years)=1		
	No prior history=0		
9. Experience in effectively utilizing funds including HUD grants and other funding sources.	Letter submitted with all required information and expenditure rate. = 5	5	
	Letter submitted without all required information. = 3		
	Letter not submitted = 0		

TN 503 New Project Scoring Tool

C. Design of Housing and Supportive Services	Points Available/Method of Measurement	Max Score	Final Score
12. Proposal clearly identifies the population and provides detailed discussion of service needs.	Proposal clearly defines population and provides thorough discussion of services need = 5	5	
	Proposal shows basic understanding of population and services needed =3		
	Proposal is vague and poorly structured or information is missing = 0		
13. Plan to prevent clients from returning to homelessness after project exit	Plan clearly defines path to meet or exceed 2018 System Performance Measures = 5	5	
	Plan shows basic understanding of path to meet or exceed 2018 System Performance Measures=3		
	Plan is vague and poorly structured or information is missing = 0		
14. Staffing required to effectively administer the program is identified and hired. If staff is to be hired after project is awarded, Agency has described an effective plan to secure staff in a timely fashion.	Yes = 4 points	4	
	Hiring in Progress = 2 points		
	No, staff is not appropriate and/or no plan is in place = 0 points		
15. Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes = 5	5	
	Plan shows basic understanding of client stability and expected outcomes = 3		
	Plan is vague and poorly structured or information is missing = 0		
16. Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3		
	Plan is vague and poorly structured or information is missing = 0		
17. Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color.	Plan clearly steps the program will take to identify and overcome barriers to participation faced by persons of color= 5	5	
	Plan shows basic understanding of barriers/steps necessary = 3		
	Plan is vague and poorly structured or information is missing = 0		
18. Plan to ensure feedback from persons with lived experience is incorporated into project policies and procedures.	Plan clearly indicates how client feedback is incorporated into program operations= 5	5	
	Plan indicates a basic understanding of the need to include client feedback in program design = 3		
	Plan is vague and poorly structured or information is missing = 0		

TN 503 New Project Scoring Tool

D. Fiscal Practices	Points Available/Method of Measurement	Max Score	Final Score
19. Budget costs are allowable and structure detailed in narrative are reasonable to effectively administer program.	Budget and Budget Narrative reflect effective program administration and costs are allowable. = 10	10	
	Budget and Budget Narrative included but the information is unclear. =5		
	Budget and Budget Narrative do not include detailed information or information is missing. =0		
22. Housing First Agency agrees to follow Housing First policies and protocols	2 points for each yes on the "Quick Screen" list	10	
Total		80	

TN 503 Renewal Project Scoring Tool

Renewal Project Scoring Tool 2024

PROJECT NAME:

**South Central Family Center RRH (SCFC RRH)
Threshold Questions (Pass/Fail)**

Category	Required Attachment	Received Yes/No
Evidence of Agency's Non-Profit Status	501(c)3 Letter	Yes
Agreement to Participate in Coordinated Entry	CoC Coordinated Entry Letter	Yes
Match	Letter of Intent from Agency	Yes
Most Recent Audit	Audited Financial Statement from last completed fiscal year	Yes
Evidence of HMIS Participation (or Comparable Database)*	CoC APR for prior program year	Yes
Outstanding HUD Audit Findings	Audit Outcome Document	N/A
HUD Monitoring Finding (within the last 2 years)	Documentation of Corrective Action Plan from HUD and related correspondence	N/A
Housing First	Checklist completed by Project Applicant	Yes

The following information is collected from the applicant's RFP response. Scoring is based on applicant answers describing their proposed program

Priority Populations

Info Source: APR

Objective	Scoring Rubric	Possible Points	Actual Points
Project serves individuals with low or no income	50% or more of adults had no income or very low income when entering project = 5 points, less than 50% = 0 points	5	0
Project serves individuals with Mental Illness	50% or more of adults had mental illness when entering project = 5 points, less than 50% = 0 points	5	0
Project serves individuals with Alcohol or Drug Abuse	50% or more of adults had alcohol or substance abuse when entering project = 5 points, less than 50% = 0 points	5	0
Project serves individuals with a history of domestic violence	50% or more of adults had a history of domestic violence = 5 points, less than 50% = 0 points	5	0

Fund Management

Info Source: Sage/APR

Expenditure of Funds	Agency successfully expended 100% - 98% of funds without budget modification = 5 points, 3%-4% return of funds = 4 points, 5-8% return = 3 points, 9-11% = 2 points, 13-14% = 1 point, more than 15% = 0	5	5
Effective Use of Funds	Cost/Successful Outcomes are equal to or below CoC average in comparison to like projects = 5 points, within 5% of average = 4 points, within 10% of average = 3 points, within 15% of average = 2 points, within 20% of average = 1 point, more than 20% == 0 points	5	5

TN 503 Renewal Project Scoring Tool

Local Priority

Service Priority	Permanent Housing, RRH =4	4	4
	Joint Transitional Hsg/RRH = 3		
	Coordinated Entry=3, HMIS=3, TH=2		
Project Dedicates Beds for Persons experiencing chronic OR Project Prioritizes Beds for persons experiencing chronic homelessness	100%= 3 points; 99%-1% = 1 point	3	0
Attendance at CoC General Meeting, CoC Committee, and/or Weekly Match	2=yes	2	2
	0=no		
Subtotal 1		39	16

Narrative Questions	Scoring Rubric	Maximum Score	Assigned Score
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NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	Actual Score
Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes =5	5	5
	Plan shows basic understanding of client stability and expected outcomes = 3		
	Plan is vague and poorly structured, or information is missing = 0		
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	5
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3		
	Plan is vague and poorly structured or information is missing = 0		
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	15
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. =7		
	Plan is vague and poorly structured or information is missing = 0		
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	15
	Plan shows basic understanding of need to use feedback in designing service delivery. =7		
	Plan is vague and poorly structured or information is missing = 0		
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5	
	Plan shows basic understanding of client stability and expected outcomes = 3		
	Plan is vague and poorly structured, or information is missing = 0		
Subtotal 2		45	40

TN 503 Renewal Project Scoring Tool

Performance Metrics

The Continuum of Care will use data from HMIS, SAGE or a comparable database to evaluate a program's prior performance based on the criteria listed below:

			Possible Points	Actual Points
PSH	Length of Stay	Days spent between project entry and residential move-in is less than 30 days = 15 points; 31-60 = 12 points; 61-180 days = 9 points; 181-365 = 6 points; 366-730 = 3 points	15	
TH	Length of Stay	Percentage of clients who spend 9 months or less in TH. 85% or more = 15 points; 84%-75%=12 points; 74%-65% = 9 points; 64%-55% = 6 points; 54%-45%=3 points; 49%-25%=2 points; less than 25% = 1point	15	
RRH	Length of Stay	Days spent between project entry and residential move-in is less than 30 days = 15 points; 31-60 = 12 points; 61-180 days = 9 points; 181-365 = 6 points; 366-730 = 6 points	15	15
All	Exits to Permanent Housing	100% of participants exit PSH to a HUD defined permanent housing option or remaining in housing =25 points; 99%-85% = 20 points; 84%-75% = 15 points; 74%-60% = 10 points; 59%-25%= 5 points; less than 25%=2 points	25	25
Stayers	New or Increased Earned Income	50% or more of project stayers have new or increased earned income=6 points; 49%-40%=5 points; 39%-30%=4 points; 29%-20%=3 points; 19%-10%=2 point, less than 10%=1	6	6
Stayers	New or Increased Other Income	50% or more of project stayers have new or increased other income=3 points; 49%-25%=2 points; 24%-10%=1 point	3	3
Leavers	New or Increased Earned Income	50% or more of project leavers have new or increased earned income=6 points; 49%-40%=5 points; 39%-30%=4 points; 29%-20%=3 points; 19%-10%=2 point, less than 10%=1	6	4
Leavers	New or Increased Other Income	50% or more of project leavers have new or increased other income=3 points; 49%-25%=2 points; 24%-10%=1 point	3	3
All	Coordinated Entry	100-75% of clients who entered project came from Coordinated Entry Prioritization List= 5 points, 74-50%= 4 points, 49%-25%= 3 points, 24% or less=2	5	5
All	Housing First	Compliance with Housing First (1 Point for each "yes" answer in a 10 question monitoring review attached to project application)	10	10
TOTAL POSSIBLE SCORE			157	71
Total				127

Linda Chocklett
Budgets OVC
Renewal

TN 503 Renewal Project Scoring Tool

Disabled
if

NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	SCFC PSH	SCFC RRH	C of H	FHA	FCD
Plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes = 5	5	5	5	5	5	5
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment = 5	5	5	5	5	5	5
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	15	15	15	15	15
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. = 7						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	15	15	15	15	15
	Plan shows basic understanding of need to use feedback in designing service delivery. = 7						
	Plan is vague and poorly structured or information is missing = 0						
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5		5			
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						

NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	SCFC PSH	C of H	FHA	FCD
Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes =5	5	5	5	5	5
	Plan shows basic understanding of client stability and expected outcomes = 3					
	Plan is vague and poorly structured, or information is missing = 0					
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	5	5	5	5
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3					
	Plan is vague and poorly structured or information is missing = 0					
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	15	15	15	15
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. =7					
	Plan is vague and poorly structured or information is missing = 0					
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	15	15	7	15
	Plan shows basic understanding of need to use feedback in designing service delivery. =7					
	Plan is vague and poorly structured or information is missing = 0					
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5	0	5	0	0
	Plan shows basic understanding of client stability and expected outcomes = 3					
	Plan is vague and poorly structured, or information is missing = 0					

NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	SCFC PSH	SCFC RRH	C of H	FHA	FCD
Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes =5	5	5	5	5	5	5
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	5	5	5	5	5
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	15	15	15	15	15
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. =7						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	15	15	7	15	15
	Plan shows basic understanding of need to use feedback in designing service delivery. =7						
	Plan is vague and poorly structured or information is missing = 0						
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5		0	5		
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						

Erik Boucher

NARRATIVE QUESTIONS - SCORING TEMPLATE

		Points Possible	SCFC PSH	SCFC RRRH	C of H	FHA	FCD
Plan to assist clients to rapidly secure and maintain permanent housing that is safe affordable, accessible and acceptable to their needs.	Plan clearly defines path to client stability and expected outcomes =5	5	5	5	5	5	5
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						
Plan to assist clients to obtain or increase employment.	Plan clearly defines path to assist clients to obtain or increase employment= 5	5	5	5	5	5	5
	Plan shows basic understanding of services needed to assist clients to obtain or increase employment = 3						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure racial equity in the delivery of services, including steps the program will take to identify and overcome barriers to participation faced by persons of color	Plan clearly defines how program will ensure all persons have equal access to services = 15	15	15	15	15	15	15
	Plan shows basic understanding of potential barriers facing persons of color without specific plan to overcome barriers. =7						
	Plan is vague and poorly structured or information is missing = 0						
Plan to ensure feedback from persons with lived experience is incorporated into program policies and procedures	Plan clearly defines how program will use feedback to inform services = 15	15	15	15	15	15	15
	Plan shows basic understanding of need to use feedback in designing service delivery. =7						
	Plan is vague and poorly structured or information is missing = 0						
VICTIM SERVICE PROVIDERS: Proposal describes safety planning process with clients (applies only to Center of Hope)	Plan clearly defines path to client stability and expected outcomes = 5	5		5			
	Plan shows basic understanding of client stability and expected outcomes = 3						
	Plan is vague and poorly structured, or information is missing = 0						



Outlook

Notification Reduction in Funding

From Deb Little <dlittle@pathwaysmisi.org>

Date Tue 10/8/2024 2:50 PM

To Tena Hardy-Payne <tpayne@franklinhousingauthority.com>

Cc Kevin Riggs <kevin@franklincommunitychurch.org>

Good Afternoon Tena,

I'm writing to confirm that, per your agency's decision, the funding for the HNM RRH program has been reduced from \$885,267 to \$739,367 for the FY2024 CoC Competition. We appreciate your flexibility and look forward to continuing our partnership.

This morning you received notification that a portion of your project has been ranked in Tier Two on the final Priority Listing. We remain hopeful this project will be fully funded. Please let me know if you have any questions or need further assistance.

Best regards,

Deb

 [Competition Results 1 2.pdf](#)



Deb Little

e: dlittle@pathwaysmisi.org

Available Mon-Thu Request a meeting

www.pathwaysmisi.org



Central Tennessee Continuum of Care FY24-25

Local Competition Selection Results

	Project Name	Score	Tier	Status	Rank	Amount Requested from HUD	Reallocated funds
1	HNM HMIS	Not Scored	1	Accepted	1	\$157,500.00	\$0.00
2	TN 503 Coordinated Entry	Not Scored	1	Accepted	2	\$70,000.00	\$0.00
3	South Central Rapid Rehousing	127	1	Accepted	3	\$62,344.00	\$0.00
4	Center of Hope DV Transitional Housing	96	1	Accepted	4	\$70,486.00	\$0.00
5	HNM Permanent Supportive Housing	96	1	Accepted	5	\$334,059.00	\$0.00
6	Franklin Community Development (J297)	93	1	Accepted	6	\$471,341.00	\$0.00
7	TN Rural Rapid Rehousing (new)	73.75	1	Accepted	7	\$203,624.00	\$145,900.00
8	Franklin Housing Authority (FHA) RRH	85	1	Reduced	8	\$476,543.00	-\$145,900.00
			2			\$262,824.00	
9	Planning Grant	Not Scored	N/A	Accepted	N/A	\$174,610.00	\$0.00



Outlook

FY24 Final Competition Selection Results

From Deb Little <dlittle@pathwaysmisi.org>

Date Tue 10/8/2024 11:06 AM

To Dawn Taylor <dawn@familycenter.org>; Kevin Riggs <kevin@franklincommunitychurch.org>; Tena Hardy-Payne <tpayne@franklinhousingauthority.com>; Cindy Sims <csims@centerofhopetn.org>; Deb Little <dlittle@pathwaysmisi.org>

Good Morning CoC Grantees,

The CoC's Executive Committee met last week to review and rank the project applications for the HUD FY24 CoC Competition. Attached to this email is the **FINAL** Priority Listing for Central Tennessee (TN 503). Included in the attachment is a list of all projects submitted for consideration during our application process, their evaluation score, rank and the amount of funding being applied for in the consolidated application. Please let me know if you have any questions.

Thank you for all you do to serve the needs of persons experiencing homelessness in the region.

Deb

 [Competition Results 1.pdf](#)



Deb Little

e: dlittle@pathwaysmisi.org

Available Mon-Thu [Request a meeting](#)

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Central Tennessee Continuum of Care FY24-25

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WILLIAMSON COUNTY HOMELESS ALLIANCE



511 West Meade Blvd. Franklin, TN 37064 615.499.0071 www.wilcohomeless.com

October 15, 2024

Franklin Community Development
Attn: Dr. Kevin Riggs
511 West Meade Blvd.
Franklin, TN 37064

Dear Dr. Riggs,

Please accept this letter from the Williamson County Homeless Alliance in support of the your project being proposed by Franklin Community Development as part of the FY2024 CoC Competition. The Alliance is interested in supporting the new project you are submitting. Should this project receive funding, the Williamson County Homeless Alliance will provide 4 units of housing to be considered leveraging for your new project. The units will be made available during the time of the new grant's anticipated operating year 4/1/25 – 3/3126.

If we can provide additional support, please let me know.

Sincerely,

Eric Boucher, Operations Manager

Buffalo Valley Inc.

People Helping People Help Themselves



415 South Park Street
Hohenwald, TN 38462
931.796.5427
Fax: 931.796.0584

www.buffalovalley.org

October 10, 2024

Dr. Kevin Riggs
Franklin Community Development, Inc.
Franklin, TN 37064

RE: Letter of Support

Dear Dr. Riggs:

Please accept this letter from Buffalo Valley, Inc. in support of the Central Tennessee Rural Rapid Rehousing Project. This letter is to certify that Buffalo Valley will provide alcohol and substance abuse services, as they are available, to clients of the Rapid Rehousing project should it be funded.

Our services may be provided to project participants who consent to begin services with us and will be provided in accordance with Tennessee laws and regulations. Services may include any of the following: advocacy, case management, health home and community support, counseling, linkage, mobile crisis response, assessment, treatment planning, residential treatment for behavioral health, outpatient substance use disorder treatment, and psychiatric and medical services.

The estimated value of these in-kind services is approximately \$50,906 and will be available during the period of the new grant's anticipated operating year 10/1/24 – 9/30/25.

If we can provide additional support, please let me know.

Sincerely,

A handwritten signature in black ink, appearing to read "Deborah Hillin".

Deborah Hillin, MA, LADAC, QCS
President
Buffalo Valley, Inc.



Funding Provided by HUD and the Private Sector

