Overview of the urgent and important action items:

1. Need to send out a **public invitation** to join the CoC.

2. Need to establish a **Board of Directors** and incorporate into the governance (by-laws).

3. Describe how the CoC monitors the performance of **ESG** and CoC Program recipients.

4. CoC Written Standards for Order of Priority: **Did the CoC adopt the orders of priority in all CoC Program-funded PSH** as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ? If yes, attach the CoC's written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC's update.

5. **CoCs Process for Reallocating:** Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process.

6. **Project review, ranking and selection procedures:** as part of this process all renewal applications APR's need to be reviewed by the CoC including the LOS, % PH exit destinations, % increases in income, monitoring criteria including participant eligibility, utilization rates, drawdown rates, frequency or amount of funds recaptured by HUD, and need for specialized population services. **Written documentation of the CoC's publicly announced Rating and Review Procedure must be attached to the application.** Also, describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority.

7. **Coordinated entry:** Need to establish **written policies** that include how the CoC's coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.

8. Need to obtain/review the **discharge policies** for the systems of care including foster care, health care, mental health care, correctional facilities and identify those with whom the CoC actively coordinates to ensure people are not discharged into homelessness.

9. **Joint HMIS Governance:** this needs to be reviewed and attached to the application.

10. **HMIS policies and procedures** need to be attached to the application.

Detailed Summary:

Section 1: CoC Governance and Structure

- Section 1B discusses who participates and votes including electing the CoC Board and asks who sits on the CoC Board.

- Asks how the CoC solicits and considers full range of opinions and to give 2 examples (same question as last year).

- Need to list RHY and DV agencies and whether they participate as a voting member of the CoC and whether they sit on the CoC Board.

- RHY questions: get list of RHY Grantees from website and also check CoC meeting attendance rosters and then select yes/no to the questions ☑

- DV questions: list the DV's from the MCEDV website that operate in the CoC geographic area also check CoC meeting attendance rosters ☑

- Does CoC intent to meeting timelines for ending homelessness as defined in Opening Doors?

- How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?

- Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015.

- How CoC coordinates with Con Plans and also ESG recipients, as well as DV and PHA's (attach PHA part of written plan for homeless preference to get full credit).

- CoC needs to invite new members to join the CoC through a publicly available invitation process. Then it needs to answer whether this is bi-monthly, monthly, quarterly, annually, etc.

- Discharge planning

- Coordinated Assessment/Entry ?'s (ideal would be to attach written standards)

- CoC Project Review, Ranking and Selection policies

- Need to write up process for reallocation and submit this as an attachment

- Need written process for how the CoC monitors the performance of projects

Section 2: Data Collection and Quality

- Joint HMIS Governance: this needs to be reviewed and attached to the application.

- HMIS policies and procedures need to be attached to the application.

- The majority of this section will be completed by the HMIS team as it specifically relates to the PIT/HIC data.

Section 3: CoC Performance and Strategic Planning

- Performance Measure: **First Time Homeless**: Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.

- Performance Measure: **Length of Time Homeless:** Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.

- Performance Measure: **Successful Permanent Housing Placement or Retention:** In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

- Performance Measure: **Returns to Homelessness:** Describe the CoC's efforts to reduce the rate of individuals and families who return to homelessness.   Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness.
- Performance Measure: **Job and Income Growth:** Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non- employment related income, and name the organization responsible for carrying out each strategy).

- Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.

- How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?

- From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless

persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015.

- o 100% of non-CH PSH beds will be prioritized for CH. This maximizes efficient use of these scare resources, as CH are difficult to identify in rural areas causing long vacancies in CH-designated units.
- o City of Bangor will designate 7 S+C beds for CH.
- o In 2014 KBH will place in service 5 MCOC-funded PSH beds, approved in 2010 (prioritized for CH)
- o 20 new PSH units will be placed in service in 2014 using funding from a 2013 MaineHousing Homeless RFP, all prioritized for CH.
- o MaineHousing's Home to Stay (HTS) is a RRH program combining ESG- funded services with short-term TBRA & Section 8 HCV to help homeless access & retain housing. This will prevent repeated & lengthy homeless episodes leading to new CH.
- o Shelters are targeting long term stayers to help them move into PSH; this helps prevent new CH.

- **Of the strategies listed in the FY 2013/FY 2014 CoC Application represented above, which of these strategies and actions were accomplished?**

- **Did the CoC adopt the orders of priority in all CoC Program-funded PSH** as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ? If "Yes", attach the CoC's written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC's update.

- Is the CoC on track to meet the goal of ending chronic homelessness by 2017? If "Yes," what are the strategies implemented by the CoC to maximize current resources to meet this goal? If "No," what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017?

- Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter.

- How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, or gender when entering shelter or housing? (check all strategies that apply).

- What strategies the CoC has to address the unique needs of unaccompanied homeless youth including LGBTQ, trafficking, exits from foster date into homelessness, PYD, Trauma informed, etc. and especially exploitation. Also has the LEA and COC attended each others meetings and how is the CoC collaborating?

- Describe in detail how the CoC collaborates with the McKinney-Vento local education liaisons

and State educational coordinators.

- How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenile justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs. (limit 2000 characters)

- Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2015. This question will not be scored. 3B-3.5a. If "Yes," what are the strategies being used to maximize your current resources to meet this goal? If "No," what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2015?

- Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and mainstream program changes that can affect homeless clients?

- List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants

Section 4: Cross Cutting Policies

- Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state- mandated restrictions, and d) history of domestic violence.

- What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

- What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

- Did the CoC or any of its CoC program recipients/subrecipients request technical assistance

from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

Section 4C: Attachments

1. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects
2. CoC Consolidated Application: Public Posting Evidence
3. CoC Rating and Review Procedure
4. CoC's Rating and Review Procedure: Public Posting Evidence
5. CoCs Process for Reallocating
6. CoC's Governance Charter
7. HMIS Policy and Procedures Manual
8. PHA Administration Plan (Applicable Section(s) Only)
9. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)
10. CoC Written Standards for Order of Priority

Application Review Information:

Criteria: **CoC Consolidated Applications will be assessed on a 200 point scale, plus a possible 3 bonus points.**

1. **CoC Coordination and Engagement.** HUD will award up to 49 points to CoCs that demonstrate coordination with other systems of care that serve homeless individuals and families, including sources of funding other than the CoC Program; an inclusive and outcome-oriented community process, including an organization structure(s) and decision-making process for developing and implementing a CoC strategy that is inclusive of representatives from both the private and public sectors, has a fair and impartial project review and selection process; and has created, maintained, and built upon a community-wide inventory of housing for homeless individuals and families.

2. **Project Ranking, Review, and Capacity.** HUD will award up to 26 points to CoCs that clearly demonstrates the existence of a coordinated, inclusive, and outcome-oriented community process for the solicitation, objective review, ranking, and selection of CoC Program project applications that includes a GIW that does not require revisions that would have increased the CoC's ARD after the 10-day grace period described in the Section, "Additional Overview Information, C. Amendments to FY 2015 CoC Program Registration" to accurately reflect those projects eligible for renewal, and a process by which renewal projects are reviewed for performance and compliance with 24 CFR part 578.

3. **Homeless Management Information System.** HUD will award up to 18 points to CoCs that clearly demonstrate the existence of a functioning HMIS that facilitates the collection of information on homelessness using residential and other homeless services and stores that data in an electronic format.

4. **Point-in-Time Count.** HUD will award up to 9 points to CoCs related to the collection, use, and submission of 2015 PIT count data.

5. **System Performance.** HUD will award up to 38 points based on CoC system-wide performance related to reducing homelessness within the CoC's defined geographic area.

6. **Performance and Strategic Planning.** HUD will award up to 60 points based on the CoC's plan for and progress towards reducing homelessness within its geographic area and decreasing the number of recurrences of homelessness.

7. **Bonus Points.** HUD will award 3 bonus points to CoCs that submit the FY 2015 CoC Consolidated Application by 7:59:59 p.m. eastern time on November 19, 2015. In order to receive these points, the Collaborative Applicant must submit the CoC Consolidated Application–CoC Application **and** CoC Priority Listing with all project applications either accepted and ranked or rejected–no later than 7:59:59 p.m. eastern time on November 19, 2015.

Administrative and National Policy Requirements: Federal agencies are required to measure the performance of their programs. HUD captures this information not only from monitoring visits and APRs, but also on the data gathered in annual competitions. HUD's homeless assistance programs are being measured in FY 2015 by the objective to "end chronic homelessness and to move the homeless to permanent housing." HUD has chosen six indicators which directly relate to the CoC Program. These six indicators, as described below, will be collected in the FY 2015 CoC Application:

1. The creation of new PSH beds for chronically homeless individuals and families;
2. The decrease in the number of chronically homeless individuals and families in the CoC's geography;
3. The increase of employment of the homeless residing in or exiting HUD homeless assistance projects;
4. The increase of the use of mainstream resources for the homeless residing or exiting from HUD homeless assistance projects;
5. The percentage of turnover in CoC Program-funded PSH not dedicated to chronically homeless that will be prioritized to serve chronically homeless individuals and families; and
6. The percentage of individuals and households with children that are served in rapid re-housing that came from unsheltered locations.