# FY2023 HUD Continuum of Care (CoC)

# Local New Project ADDENDUM

FOR

## NEW/EXPANDED

**PERMANENT SUPPORTIVE HOUSING**

**&**

**RAPID RE-HOUSING**

DEADLINE FOR SUBMISSION OF APPLICATIONS: THURSDAY, AUGUST 24, 2023 3:00 P.M.



NOTE: This year, the traditional application has been divided into 2 documents. To streamline the actual application form, this addendum which includes the detailed specifics on eligible expenses, regulations, definitions, etc. is separated from the actual application. This Addendum is based on the best information currently available, and MDHA may need to revise the requirements described herein and/or request additional information based on additional guidance made available by HUD, and/or decisions made by the Nashville CoC Performance Evaluation Committee. MDHA will disseminate all information about this funding opportunity as it becomes available through the CoC's email listserv. To ensure that you receive the latest information please subscribe to the Nashville CoC mailing list by emailing MDHA's Homeless Coordinator, Suzie Tolmie, at stolmie@nashville-mdha.org with subject heading *CoC 2023 listserv*.

On August 3 from 11:15 – 1 pm, The National Alliance to End Homelessness will present *Promoting Equity, Lived Experience, Housing First, and System Performance: What Matters in the 2023 NOFO.  Applicants are strongly encouraged to register at* [https://endhomelessness.org/blog/what-matters-in-the-2023-nofo/](https://endhomelessness.org/blog/what-matters-in-the-2023-nofo/)

**HUD At a Glance PDF Resources online:**

[https://www.hudexchange.info/resource/6325/coc-and-esg-virtual-binders-at-a-glance/](https://www.hudexchange.info/resource/6325/coc-and-esg-virtual-binders-at-a-glance/)

Eligible Admin Costs

[https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-eligible-activities/project-administration/](https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-eligible-activities/project-administration/)

**BACKGROUND**

**The Nashville Continuum of Care (CoC) is requesting applications (RFA) for new projects for inclusion in the CoC's 2023 application for HUD CoC funds. Each year Nashville competes with other Continuums across the country to secure federal funds to end homelessness made available through the U.S. Department of Housing and Urban Development's (HUD) Continuum of Care program.**

**A critical aspect of the [McKinney-Vento Homeless Assistance Act](#), as amended, is a focus on viewing the local homeless response as a coordinated system of homeless assistance options as opposed to homeless assistance programs and funding sources that operate independently in a community. To facilitate this perspective, the Act now requires communities to measure their performance as a coordinated system, in addition to analyzing performance by specific projects or project types.  Below are the key outcomes desired by HUD:**

**HUD CoC System Performance Measures**
**1. Reducing the length of time persons remain homeless**
**2. Reducing returns to homelessness by persons who exit homelessness to permanent housing**
**3. Reducing the number of homeless persons**
**4. Access to jobs and income growth for homeless persons in CoC Program-funded projects**
**5. Reducing the number of persons who become homeless for the first time**
**6. Successful housing placement**

**This year, in addition to funding intended to renew a substantial existing inventory, HUD has new funding available for CoC Bonus projects to house and serve persons experiencing homelessness ($533,751 for Nashville) as well as Domestic Violence (DV) Bonus funding ($500,012 for Nashville).**

**MDHA will convene the CoC Performance Evaluation Committee (or "PEC"- the CoC's independent scoring & ranking committee) to review and score applications submitted in response to this RFA, focusing on the degree to which projects improve Nashville's system performance (measures above).  Nashville uses the scores to determine which applications will be submitted to HUD and the order in which they are rated.  Projects that**

score higher generally have a greater chance of being funded.  Per HUD's CoC Program Project Rating & Ranking tool, the rating scores are generally an important input into the ranking process (e.g., projects might be ranked according to their score), but the CoC might want to add other factors to inform ranking.  For instance, ranking might be prioritized based on project type, population groups, relative levels of unmet need, or other local funding priorities.  Once projects have been conditionally selected for inclusion in the application to HUD, MDHA staff[1] will work with applicants to determine next steps for submission of project applications in eSNAPS[2] - the web-based system HUD uses for the CoC competition.   Final awards will be made and announced by HUD via the national CoC program competition, anticipated in late 2023/early 2024.

Nashville encourages applications from agencies that have never previously received CoC funds, as well as from applicants that are currently receiving, or have in the past received, CoC funds.  MDHA will provide technical assistance to ensure the application process is accessible to all applicants.

In addition to being sure you are on the local CoC listserv (see cover), please sign up for HUD's 2 LISTSERVs below so you do not miss important information regarding the FY2023 CoC Program Competition, and other information related to HUD Special Needs Assistance Programs (SNAPS).

1. To subscribe to the SNAPS Competitions listserv please click on the link: https://www.hud.gov/subscribe/signup?listname=SNAPS%20Competitions&list=SNAPS-COMPETITIONS-L
2. To subscribe to the SNAPS Program Information listserv please click on the link:  https://www.hud.gov/subscribe/signup?listname=SNAPS%20Program%20Information&list=SNAPS-PROGRAM-INFORMATION-L

All applicants should review HUD's FY2023 Notice of Funding Opportunity (NOFO), https://www.hudexchange.info/programs/e-snaps/fy-2023-coc-program-nofa-coc-program-competition/ , which contains comprehensive details, as well as the federal regulations guiding HUD CoC funding, found at https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/  .

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[1] MDHA serves as the Collaborative Applicant for the Nashville CoC, preparing and submitting the CoC narrative and all project applications to HUD.

[2] All applicants whose projects are selected by the CoC for inclusion in the final application for HUD will need to submit applications online in eSNAPS.  MDHA will notify applicants at a later date on whether their applications have been selected and of the deadline for submission of applications in eSNAPS.

## DEFINITIONS OF KEY TERMS:

**Category 4 HUD Homeless Definition** -- HUD defines four categories under which individuals and families may qualify as homeless.
**https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf**   Category 4 is individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.  It is this category, as well as Category 1 (literally homeless), that meets eligibility for new local CoC project funding.

**Chronically Homeless** -- As stated in HUD's Definition of Chronically Homeless final rule is:

**(a)  A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:**

**i.        Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and**

**ii.       Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;**

**(b)  An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;**

**(c)  A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b), including a family whose composition has fluctuated while the head of household has been homeless.**


**DedicatedPLUS**  - A DedicatedPLUS project is a permanent supportive housing (PH-PSH) project where 100% of the beds are dedicated to serve individuals, households with children, and unaccompanied youth that at intake are:

**(1) experiencing chronic homelessness (CH); or**

**(2) residing in a Transitional Housing (TH) project that will be eliminated and were chronically homeless when entered TH project; or**

**(3) residing in Emergency Shelter or unsheltered location and had been enrolled in a PSH or RRH project (having met CH criteria upon entering) within the last year, but were unable to maintain housing placement; or**

**(4) residing in TH funded by a Joint TH and Rapid Re-Housing (PH-RRH) component project and who were experiencing chronic homelessness prior to entering the project; or**

**(5) residing in Emergency Shelter or unsheltered location for at least 12 months in the last three years, but have not done so on four separate occasions and the individual or head of household meets the definition of 'homeless individual with a disability'; or**

**(6) receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.**

## How is a DedicatedPLUS project similar to a project that is 100% dedicated to chronic?

• **The criteria for DedicatedPLUS and chronic are pretty similar, for example, DedicatedPLUS projects still must serve only households with a disabled adult or head of household who have been homeless for a least 12 months.**

• **The following are required in all PSH projects, including DedicatedPLUS projects:**

  ↓ **Serving households who have a disabled adult or head of household and have been homeless for a least 12 months; AND**
  ↓ **Prioritizing PSH applicants based on both length of homelessness AND severity of service needs (applicants are prioritized and referred by Coordinated Entry/CE and both types of projects may only accept referrals from CE).**

• **Neither chronic dedicated nor DedicatedPLUS projects are required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH.**

## How is a DedicatedPLUS project different than a project that is 100% dedicated to chronic?

**A DedicatedPLUS project can prioritize serving some people who don't meet the strict HUD definition of chronic homelessness, for example people who have been homeless for 12 months over 3 years during fewer than 4 separate occasions and some people who had been enrolled in a PSH or RRH project within the last year, who were unable to maintain the housing placement.  These people can also currently be served in a chronic dedicated bed, but only if there is no eligible chronic person who wants that bed.**

**Disabling Condition** -- Disabling Condition is defined by HUD as a condition that: (1) (i) Is expected to be long-continuing or of indefinite duration; (ii) Substantially impedes the individual's ability to live independently; (iii) Could be improved by the provision of more suitable housing conditions; and (iv) Is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post-traumatic stress disorder, or brain injury; (2) A developmental disability, as defined in this section; or (3) The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome, including infection with the human immunodeficiency virus (HIV). See also: **https://files.hudexchange.info/resources/documents/Virtual-Binders-At-A-Glance-Disability-Definition.pdf**

**Housing First Principles** -- HUD continues to encourage Continuums of Care (CoCs) and providers to implement and strengthen Housing First approaches. All new projects must adopt this approach.

Housing First is a programmatic and systems approach that centers on providing homeless people with housing quickly and then providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice. It prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions such as sobriety or a minimum income threshold.

For more details, see **https://www.csh.org/toolkit/supportive-housing-quality-toolkit/housing-and-property-management/housing-first-model/**

and

**https://www.hudexchange.info/programs/coc/toolkit/responsibilities-and-duties/housing-first-implementation-resources/#housing-first-implementation** .

## INSTRUCTIONS

This is the RFA for the Nashville CoC permanent housing funds - including both Permanent Supportive Housing (PSH) and Rapid Rehousing (RRH) - as well as any Dedicated Homeless Management Information Systems (HMIS) projects proposed by Nashville's HMIS Lead entity, the Metro Homeless Impact Division. Projects may be funded through the CoC permanent housing bonus  or DV bonus and/or any available reallocation funds.

**The Nashville CoC is currently seeking applications for the following project types:**

- **New DedicatedPLUS[3] or 100% Chronic Permanent Supportive Housing (PSH) projects that will add units to the PSH inventory for single adults and/or families, including transition age youth (TAY) under 25 years of age.  Projects must use the scattered site or master leasing models. The master lease model involves a nonprofit housing provider engaging in a long-term lease with a property owner for control of a block of rental units. Not all of the units have to be at the same property. Under this agreement, the nonprofit applicant assumes property management responsibilities and leases these units to participants meeting HUD's definition of homeless. These leases provide stability to both the property owner and the tenant. The owners get dedicated cash flow, and the tenants get affordable housing with additional protections.**

- **New DedicatedPLUS or 100% Chronic Permanent Supportive Housing (PSH) projects that will <u>not</u> add new units to the PSH inventory but will provide additional services to participants in one or more existing PSH projects serving single adults and/or families, including transition age youth (TAY) under 25 years of age.  Additional services funded through this RFA or other sources must be used to serve participants who meet the DedicatedPLUS definition, which includes people experiencing chronic homelessness.**

- **New Rapid Rehousing (RRH) projects that will add units to the RRH inventory with appropriate services to participants in one or more existing RRH projects.**

- **New rapid rehousing (RRH) projects that will <u>not</u> add additional units to the RRH inventory but will provide additional services to participants in one or more existing RRH projects.  Additional services funded through this RFA must be used to serve homeless individuals and families, including transition age youth (TAY) under 25 years of age, coming directly from the streets or emergency shelters, or meeting the criteria of Category 4 of the HUD definition of homeless. (See DEFINITIONS OF KEY TERMS - fleeing domestic violence, dating violence, sexual assault, stalking or other dangerous situations).**

- **New Dedicated HMIS project, if desired, from HMIS Lead for Nashville, the Metro Homeless Impact Division**

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[3] See DEFINITIONS OF KEY TERMS.

Please note that applicants proposing projects that will not add units to the inventory but rather will provide additional services to participants in one or more PSH or RRH projects must certify that the funding will not be used to off-set/replace other State or local funding sources, and that they will add staff capacity to enhance currently available services.

**Expansion Projects:**

HUD allows project applicants to apply for a new project to expand existing projects by adding units to house additional persons, and/or expanding services available to current participants. Applications for new PSH and RRH projects that will not create additional units but will provide additional services to participants in one or more existing project must be submitted for funding as Expansion Projects.  Applicants with existing CoC renewal projects may apply to add units using expansion funds.  If the applicant has an existing CoC renewal project that is funded and the proposed expansion to that project is also funded, HUD will execute a single expanded grant agreement. Applications for expansion projects can be submitted regardless of whether or not the applicant has an existing CoC renewal project, so this does not preclude applicants who have not been previously funded by the CoC from applying. Applicants seeking funding for an expansion project should complete the relevant section of this application. The component type for the existing project and the new expansion project must be identical (e.g., an existing PSH project may only apply for a PSH expansion, an existing RRH project may only apply for a RRH expansion).  Applicants cannot apply for an expansion project to replace State or local funds previously used, or designated for use, to assist homeless persons.

Applications are due by Thursday, August 24, 2023 at 3:00 p.m. and must be sent to: Suzie Tolmie, Homeless Coordinator at MDHA  stolmie@nashville-mdha.org . Only emailed proposals will be accepted.  Use Subject Heading *CoC 2023 New Project Application*.

- Applicants are responsible for reading and following all instructions contained in this RFA.  Any questions about the application form or process should be directed to stolmie@nashville-mdha.org in writing via email by 3 p.m. August 15 with Subject Heading *CoC 2023 New Project Question*.

- Please save your application document with the following naming convention:

      <CoC 2023 New Project Local App Agency name –Program Name>.

      Example: CoC 2023 New Project Local App ABC Services-Home to Stay

- Insert the name of your agency and project name in the header of the document.

- Applicants must compile all relevant sections into a single document, and delete sections that are not applicable to the type of project for which they are applying – while keeping the section heading, and entering N/A.

- The Performance Evaluation Committee (PEC) will not review late nor incomplete applications, or applications that do not meet the project requirements described in this RFA or HUD's threshold

eligibility requirements.   The PEC also will not review applications that exceed page limits specified in this RFA (attachments are excluded from the limit).

- **Application Sections  -- This application is divided into 7 sections.  Applicants must complete only the applicable sections as follows:**

  - **Section 1 - 2023 CoC – TN-504 Project Cover Sheet and General Project Information**

  - **Section 2 PSH  – Section must be completed only by applicants seeking funding for PSH; applicants must also complete the agency information and matching sections.**

  - **Section 3 RRH  - Section must be completed only by applicants seeking funding for RRH; applicants must also complete the agency information and matching sections.**

  - **Section 4 Performance Outcomes– Section must be completed separately by all applicants for each PSH and RRH project being proposed.**

  - **Section 5 Budget & Cost Effectiveness  – Section must be completed separately by all applicants for each project being proposed.**

  - **Section 6 Organizational Capacity & Grant Management- Applicants applying for multiple projects must complete this section only once.**

  - **Section 7 Equity**

**Project Requirements and Priorities**

- **Coordinated Entry**

**All Applicants awarded HUD CoC funding are required to participate in CE, meaning that applicant staff must notify the CE lead of all openings and fill those openings with participants referred from CE.  CE is designed to ensure standardization, coordination and intentional prioritization in the process of administering homeless assistance in a fair and objective manner.  Metro's Office of Homeless Services serves as the CE Lead in Nashville.  All applicants are required to certify they are aware of this expectation and are already complying or will comply with any additional instructions or procedures required for participation.   For details on CE, please contact Sally Lott at Office of Homeless Services, [Sally.Lott@nashville.gov](mailto:Sally.Lott@nashville.gov) . Participation in CE includes the following:**
- **Support efforts to streamline housing and homeless support services through coordination**
- **Support a needs-based model for resource connection rather than a first-come first-served approach.**
- **Support a Housing First/low barrier approach and philosophy**
- **Adhere to policies and procedures as identified within the most recent CE manual (Exhibit 5)**
- **Understand that participation in CE is required by the CoC through the funding requirements established by HUD for the ESG/CoC competitive funds.**
- **Use the designated Homeless Management Information System (HMIS)'s CE implementation**
- **Collect and enter all needed data into the designated HMIS, on persons experiencing a housing crisis, this includes entries and exits from the system**

- If operating a bed program, report project vacancies to the CE Lead.  The Homeless Impact Division (Office of Homeless Services) is the CE Lead for the Continuum of Care and ESG programs.
- Accept referrals from CE based on need and vulnerability
- Work with CoC CE Lead (Office of Homeless Services) to resolve project implementation challenges
- Participate in CE care coordination meetings, as requested by the CE Lead (Office of Homeless Services) and provide input on CE policies and procedures and other CE topics;  CE staff at OHS will assess attendance at Coordinated Entry (CE) related meetings (for example, Care Coordination meetings) & report to MDHA
- Participate in project and system evaluation activities


- **Location**

  - **Projects must be located within Nashville-Davidson County, Tennessee.**

- **Eligible applicants**

  - **Nonprofit organizations with a 501(c)3 designation and incorporated in the State of Tennessee, as evidenced by a tax exemption determination letter from Internal Revenue Service (IRS) and a Certificate of Existence filed with the Tennessee Secretary of State's Office that is active in all respects;**

  - **States, local governments, instrumentalities of State and local governments, and public housing agencies.**

  - **Applicants in good standing with HUD for CoC funding, with MDHA for local ESG funding and/or with another primary funding source. This means the applicant does not have any open monitoring or audit findings, history of failure to expend funds in a timely manner in accordance with contractual deadlines, outstanding obligation to funders that is in arrears or for which a payment schedule has not been agreed upon, history of serving ineligible program participants or expending funds on ineligible costs without an MDHA approved Corrective Action Plan (CAP).  MDHA will validate that applicants are in good standing with HUD or other primary funding sources.  Generally, if applicant has an outstanding obligation to funders which is in arrears or for which a payment schedule has not been agreed upon, has audit findings or other financial concerns which remain unresolved or not satisfactorily addressed through ongoing corrective action plans, the PEC reserves the right not to consider the application for funding, as HUD will likely reduce or reject a project application from such applicants (see p. 60 of this year's NOFO).**

*Project Applicant Eligibility Threshold.* **The PEC or MDHA staff will review all new project applications to determine if the following applicant threshold requirements are met:**

**Submit 501(c)3 nonprofit documentation- if on Giving Matters, please indicate.**

**SAM Registration Requirement.** Applicants must be registered with https://www.sam.gov/SAM before submitting their application. Applicants must maintain current information in SAM on immediate and highest-level owner and subsidiaries, as well as on all predecessors that have been awarded a federal contract or grant within the last three years, if applicable. Information in SAM must be current for all times during which the applicant has an active Federal award or an application or plan under consideration by HUD.

**UEI Number Requirement.** Applicants must provide a valid UEI number, registered and active at https://www.sam.gov/SAM in the application.

*Applicant Code of Conduct.* All project applicants must ensure their organization has a Code of Conduct that complies with the requirements of 2 CFR part 200 and is on file with HUD at https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conduct . If the organization's Code of Conduct does not appear on HUD's website, the project applicant must attach its Code of Conduct that includes all required information.  See https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/conductgrants for details.

**Demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and the capacity to administer federal funds. Demonstrating capacity should include a description of the applicant and any subrecipient experience with similar projects and with successful administration of CoC Program funds or other federal funds.**

**Agree to participate in a local HMIS system. However, in accordance with Section 407 of the Act, any victim service provider that is a recipient or subrecipient must not disclose, for purposes of HMIS, any personally identifying information about any client. Victim service providers must use a comparable database that meets the needs of the local HMIS.**

- **Eligible populations**

    o **Permanent Supportive Housing (PSH) must serve exclusively disabled households as defined by HUD (See DEFINITIONS OF KEY TERMS), and must serve:**

        ▪ **Single adults and/or families, including transition age youth (TAY) under 25 years of age, referred via Coordinated Entry; and**

        ▪ **Dedicate 100% of units and/or provide services exclusively to people who meet the HUD DedicatedPLUS definition or meet the HUD definition of chronic.**

    o **Rapid Re-Housing (RRH) must serve:**

        ▪ **Single adults and/or families, including transition age youth (TAY) under 25 years of age, referred via Coordinated Entry.**

        ▪ **100% people experiencing literal homelessness who meet the following criteria:**

            - **Reside in an emergency shelter or unsheltered location;**

- Qualify under the domestic violence criteria in Category (4) of the HUD definition of homelessness, including persons fleeing or attempting to flee human trafficking;

- Receive services through a VA-funded homeless assistance program and meet one of the above criteria at initial intake to the VA's homeless assistance system.

Individuals coming from an institution, where they have resided for 90 days or less AND have entered the institution from the streets or emergency shelter, maintain their literal homeless status during that time, and are considered eligible for PSH and RRH at discharge.

Except as noted above, persons in transitional housing *are not eligible* for new PSH or RRH projects funded through this RFA.

- <u>Grant Term</u>   Generally one year, unless acquisition and/or renovation is involved.  Projects that are awarded funds may be eligible for renewal funding through subsequent annual CoC funding competitions.

- <u>Funding Priorities</u>   (see also the 9 Homeless Policy Priorities outlined in HUD's FY2023 NOFO at the end of this document)

  - Projects that leverage housing resources with housing subsidies or units not funded through CoC or ESG programs and/or will leverage health resources, including a partnership commitment with a healthcare organization.

    - NOTE:  In points for leverage to the CoC, HUD is looking for projects that utilize 25% housing subsidies/units NOT funded through CoC or ESG.

    - HUD wants commitments from health care organizations equaling 25% of funding being requested.

  - Projects that will serve persons experiencing homelessness outdoors.

  - Projects that will connect homeless and/or formerly homeless individuals to jobs, and/or increase their incomes via other means such as benefits.

  - Applicants that demonstrate a viable plan to begin housing & serving eligible participants within 12 months of an executed Grant Agreement with HUD, anticipated in Spring 2023.

- <u>Eligible activities and projects</u>

  - All projects must be Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), or HMIS.

  - PSH and RRH activities cannot be combined into the same project.

  - Applicants can request funds for:

- **PSH:** Rental assistance (tenant-based only), leasing or operating funds, supportive services, capital costs (i.e., acquisition, rehabilitation, or new construction), admin, HMIS;

- **RRH:** Short (up to 3 mos.) or medium-term (4-24 mos.) rental assistance (tenant-based only), supportive services, admin, HMIS;

- **Dedicated Homeless Management Information Systems (HMIS - applications accepted only from Office of Homeless Services).**

    o **Applicants cannot combine the following types of assistance in a single structure or housing unit:**

    - **Rental assistance and operating**

    - **Rental assistance and leasing**

    o **Applicants proposing projects that will not add units, but will provide additional services to participants in one or more PSH or RRH projects, must certify that the funding will not be used to off-set/replace other State or local funding sources and that they will add staff to expand currently available service capacity.**

    o **Applicants must demonstrate that they will meet HUD's match requirements (25% for all activities except leasing). See Section 6, Sources of Match.**

- **Other Requirements**

    o **All Applicants, except victim service providers as defined by HUD, must agree to enter client data into the CoC's HMIS. Excepted projects must enter data into a comparable database.**

    o **Applicants must agree to participate in the annual homeless Point-in-Time count (PIT Count).**

    o **Applicants must agree to participate in Coordinated Entry, and comply with all Nashville CoC Policies and Procedures.[4]**

    o **Applicants/projects must comply with all HUD requirements.[5]**

    o **Applications must demonstrate:**

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4 See http://www.nashville-mdha.org/community-development/about-the-continuum-of-care/#1570119251460-cdb55d73-4de2

5 See, for example, https://www.hudexchange.info/resource/2033/ hearth-coc-program-interim-rule/; http://portal.hud.gov/hudportal/documents/huddoc?id=TransitionNotice22715.pdf

- **A plan for rapid implementation; the project narrative must document how the project will begin housing program participants within 12 months of the Grant Agreement date, when the project will achieve full occupancy, and a detailed plan for how the project will ensure timely implementation.**

- **A connection to mainstream service systems is in place, specifically to:**

  1) **Identify and enroll all Medicaid-eligible program participants, AND whenever possible the project includes Medicaid-financed services, including case management, tenancy supports, behavioral health services, or other services important to support housing stability. If there are barriers to including Medicaid-financed services in the project, applicants must demonstrate that the project will attempt to leverage non-Medicaid resources available, including mainstream behavioral health system resources such as mental health or substance abuse prevention and treatment block grants or state behavioral health system funding.**

  2) **Connect participants to mainstream resources, including benefits, health insurance and employment services**

  3) **Assess stable PSH participants' interest in moving on to independent affordable housing and offer assistance to help them explore independent housing options and apply for mainstream affordable housing opportunities.**

- **Experience in, or commitment to, operating a successful program design that meets the definition of Housing First (see DEFINITIONS).**

## HEARTH ACT

On May 20, 2009, President Obama signed into law a bill to reauthorize HUD's McKinney-Vento Homeless Assistance programs.

| In order for any project to be considered for funding in FY2023, applicants should self-check yes to all of the following statements: | | |
|---|---|---|
| Our agency understands our CoC-funded project(s) can only accept persons meeting the HUD definition of literally homeless, or in the case of the DV Bonus, Category 4. (See https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-homeless-eligibility/four-categories/category-1/ & https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-esg-homeless-eligibility/four-categories/category-4/ | ☐YES | ☐NO |
| Increase Permanent Supportive Housing beds dedicated for chronic homeless persons | ☐YES | ☐NO |
| Increase Rapid Re-housing beds, especially for homeless families | ☐YES | ☐NO |
| Adhere to principles of Housing First, primarily by reducing barriers in project's program entry processes (criminal background checks, sobriety requirements, etc. are not barriers - HUD wants 75% of local housing projects to be low-barrier), and assist homeless persons with housing entry as quickly as possible | ☐YES | ☐NO |
| Reallocate funding from lower-performing projects to more effective options that will improve overall CoC performance and better respond to the needs of homeless people | ☐YES | ☐NO |
| Staff at our agency have read the 9 Homeless Policy Priorities outlined in HUD's FY2023 NOFO & found below (note FY2023 changes/additions highlighted), which provide additional context regarding HUD's selection criteria, & are included here to help applicants better understand how the criteria support the goal of ending homelessness. | ☐YES | ☐NO |

*1. Ending homelessness for all persons.* To end homelessness, CoCs should identify, engage, and effectively serve all persons experiencing homelessness. CoCs should measure their performance based on local data that consider the challenges faced by all subpopulations experiencing homelessness in the geographic area (e.g., veterans, youth, families, or those experiencing chronic homelessness). CoCs should partner with housing, health care, and supportive services providers to expand housing options, such as permanent supportive housing, housing subsidies, and rapid rehousing. Additionally, CoCs should use local data to determine the characteristics of individuals and families with the highest needs and longest experiences of homelessness to develop housing and supportive services tailored to their needs.

*2. Use a Housing First approach.* Housing First prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions. CoC Program funded projects should help individuals and families move quickly into permanent housing, and the CoC should measure and help projects reduce the length of time people experience homelessness. Additionally, CoCs should engage landlords and property owners to identify an inventory of housing available for rapid rehousing and permanent supportive housing participants, remove barriers to entry, and adopt client-centered service methods. HUD encourages CoCs to assess how well Housing First approaches are being implemented in their communities.

*3. Reducing Unsheltered Homelessness.* In recent years, the number of people experiencing unsheltered homelessness has risen significantly, including a rising number of encampments in many communities across the country. People living unsheltered have extremely high rates of physical and mental illness and substance use disorders. CoCs should identify permanent housing options for people who are unsheltered.

*4. Improving System Performance.* CoCs should be using system performance measures (e.g., average length of homeless episodes, rates of return to homelessness, rates of exit to permanent housing destinations) to determine how effectively they are serving people experiencing homelessness. Additionally, CoCs should use their Coordinated Entry process to promote participant choice, coordinate homeless assistance and mainstream housing, and services to ensure people experiencing homelessness receive assistance quickly, and make homelessness assistance open, inclusive, and transparent. CoCs should review all projects eligible for renewal in FY 2023 to determine their effectiveness in serving people experiencing homelessness, including cost-effectiveness. CoCs should also look for opportunities to implement continuous quality improvement and other process improvement strategies. HUD recognizes the effects of COVID-19 on CoC performance and data quality and, compared to previous CoC NOFOs, reduces the points available for rating factors related to system performance. This FY 2023 CoC NOFO significantly increases the points available for system performance rating factors.

*5. Partnering with Housing, Health, and Service Agencies.* Using cost performance and outcome data, CoCs should improve how all available resources are utilized to end homelessness. This is especially important as the CARES Act and American Rescue Plan have provided significant new resources to help end homelessness. HUD encourages CoCs to maximize the use of mainstream and other community-based resources when serving persons experiencing homelessness and should:

a. work closely with public and private healthcare organizations and assist program participants to obtain medical insurance to address healthcare needs. This includes developing close partnerships with public health agencies to analyze data and design approaches that reduce homelessness, improve the health of people experiencing homelessness, and prevent and address disease

outbreaks, including HIV/AIDS. b. partner closely with PHAs and state and local housing organizations to utilize coordinated entry, develop housing units, and provide housing subsidies to people experiencing homelessness. These partnerships can also help CoC Program participants exit permanent supportive housing through Housing Choice Vouchers and other available housing options. CoCs and PHAs should especially work together to implement targeted programs such as Emergency Housing Vouchers, HUD-VASH, Mainstream Vouchers, Family Unification Program Vouchers, and other housing voucher programs targeted to people experiencing homelessness. CoCs should coordinate with their state and local housing agencies on the utilization of new HOME program resources provided through the Homelessness Assistance and Supportive Services Program that was created through the American Rescue Plan; c. partner with local workforce development centers to improve employment opportunities; and d. work with tribal organizations to ensure that tribal members can access CoC-funded assistance when a CoC's geographic area borders a tribal area.

6. *Racial Equity.* In nearly every community, Black, Indigenous, and other people of color are substantially overrepresented in the homeless population. HUD is emphasizing system and program changes to address racial equity within CoCs. Responses to preventing and ending homelessness should address racial inequities to ensure successful outcomes for all persons experiencing homelessness using proven approaches, such as: developing a coordinated community response created in partnership with a racially diverse set of stakeholders and people experiencing homelessness and partnering with organizations with experience serving underserved populations. CoCs should review local policies, procedures, and processes with attention to identifying barriers that result in racial disparities, and taking steps to eliminate barriers to improve racial equity and to address disparities.

7. *Improving Assistance to LGBTQ+ Individuals.* Discrimination on the basis of gender identity or sexual orientation manifests differently for different individuals and often overlaps with other forms of prohibited discrimination. CoCs should address the needs of LGBTQ+, transgender, gender non-conforming, and non-binary individuals and families in their planning processes. Additionally, when considering which projects to select in their local competition to be included in their application to HUD, CoCs should ensure privacy, respect, safety, and access regardless of gender identity or sexual orientation in projects. CoCs should also consider partnering with organizations with expertise in serving LGBTQ+ populations.

8. *Persons with Lived Experience.* HUD is encouraging CoCs to include in the local planning process people who are currently experiencing or have formerly experienced homelessness to address homelessness. People with lived experience should determine how local policies may need to be revised and updated, to improve the effectiveness of homelessness assistance programs, including participating in planning and oversight activities and

developing local competition processes. CoC leaders and stakeholders should also prioritize hiring people who have experienced homelessness in areas where their expertise is needed (e.g. peer outreach and support).

9. *Increasing Affordable Housing Supply.* The lack of affordable housing is the main driver of homelessness. CoCs play a critical role in educating local leaders and stakeholders about the importance of increasing the supply of affordable housing and the specific consequences of the continued lack of affordable housing. CoCs should be communicating with jurisdiction leaders, including for the development of Consolidated Plans, about the harmful effects of the lack of affordable housing, and they should engage local leaders about steps such as zoning and land use reform that would increase the supply of affordable housing. This FY2023 CoC NOFO awards points to CoCs that take steps to engage local leaders about increasing affordable housing supply.

| | | |
|---|---|---|
| Reduce length of time persons are homeless | ☐YES | ☐NO |
| Increase income and connection to benefits | ☐YES | ☐NO |
| Move homeless persons into permanent housing, and assure high rate of housing retention | ☐YES | ☐NO |
| End homelessness among chronic homeless persons, veterans, families with children and unaccompanied youth | ☐YES | ☐NO |
| Our agency understands the requirements of data collection and the priority on data-driven planning using the continuum's local HMIS. | ☐YES | ☐NO |

# 2023 Nashville-Davidson County Continuum of Care (CoC) Local Application
## Scoring Criteria for New Projects
### Total points available = 100

| Section | Criterion | Points |
|---|---|---|
|  |  |  |
|  | 1.a Primary Activity type = **5 Points** maximum | ☐ Proposed PSH or PSH Expansion project = **5 Points**<br>☐ Proposed RRH units = **3 Points** |
| 1 | Project addresses Local and HUD Priorities = up to 26 Points |  |
|  | 1.a Will improve system performance = **up to 10 points** | ☐ **Narrative Questions a. i. – v.** = up to **10 Points**<br><br>1) Identifies how the proposed target population and severity of need address local priorities. (up to 2 points)<br>2) Describes a program design that will credibly support improved system performance by reducing lengths of time homeless, help people to obtain and retain housing and income. (up to 3 points)<br>3) Utilizes evidence-based practices to increase positive housing outcomes, recovery, self-sufficiency, and reduce homelessness. (up to 3 points)<br>4) Describes how the project connects participants to mainstream benefits. (up to 2 points) |
|  | 1.b Employment Services = **up to 3 points** | ☐ Employment and Training **Narrative Question** = up to **3 Points**. Describes how the proposed project serves the employment and job-training needs of adult participants, including whether Project offers work opportunities to clients/tenants and/or links them with employment and vocational programs to support self-sufficiency and income growth. To receive full points, applications must include documentation through MOUs, letters of support, documented successful referrals and outcomes in comparable programs, etc. |
|  | 1.c Housing First narrative = up to **4 Points** | ☐ Housing First **Narrative Questions** = up to **4 Points**.<br>Project certifies that it is low barrier and operates in adherence with Housing First principles. Participants: 1) are not screened out based on income, active/history of substance abuse, having a criminal record, or a history of domestic violence, and 2) are not terminated from the project for failure to participate in services, and 3) are prioritized for rapid placement and stabilization in permanent housing and offered needed supports so that returns to homelessness are avoided. |
|  | 1.e Housing/serving persons experiencing unsheltered homelessness = up to **9 Points** (NA for DV proposals, which will | Unsheltered **Narrative Question** clearly describes how project will house unsheltered persons rapidly, reduce unsheltered homeless numbers, and offer appropriate supports desired by participant to increase stability in housing. If no = **0 points**. If yes, score via the following parameters:<br>☐ Houses 75 unsheltered persons = **9 Points**<br>☐ Houses 50 unsheltered persons = **7 Points**<br>☐ Houses 25 unsheltered persons = **4 Points** |

| | | |
|---|---|---|
| | be scored on a 91-pt scale) | |
| 5 | Outcome Performance = up to **25** Points | |
| | 5.a APR /Performance Outcomes A-C = up to **20 Points** | **See Sector Specific Benchmarks that follow this criteria scoring chart, and Self Scoring Chart in Section 5 of the application.**<br>☐ Performance outcomes for comparable project(s) = up to **20 points** |
| | 5.b Benchmark Performance = up to **5 points** | ☐ **Narrative Question:** Proposed project describes best practices, training, or process developments that demonstrate how the project will meet or exceed local benchmarks = up to **5 points** |
| 6 | 6.a Budget and Cost Effectiveness = up to **4 points** | ☐ Budgeted staff and expenses are adequate to support the proposed project and cost effective. Factors considered include staffing ratios, rent reasonableness, project type and population served. Cost per Outcome is reasonable. = **4 Points** |
| | Health/Housing Leverage= up to **3 points** | ☐ Leverages either health or housing 25% = **3 Points** |
| 7 | Organizational Capacity & Grant Management = **36** points maximum for entire section | |
| | 7.a Fiscal Management = up to **8 points** | ☐ Proposed projects provided the most recent annual independent audit (or financial statement if audit is not required) that shows no findings or areas of concern in the management letter. = **8 Points**<br>☐ Proposed projects provided the most recent annual independent audit (or financial statement if audit is not required) that does show findings or areas of concern in the management letter which have been formally addressed by the Agency and/or funders. = **5 Points**<br>☐ Proposed projects provided the most recent annual independent audit (or financial statement if audit is not required) that does show findings or areas of concern in the management letter which have not been addressed. = **0 Points** |
| | 7.b Grant Spending = up to **4 Points** | ☐ Proposed project applicant has a record of expending 95-100% of funds in a comparable project = 4 **Points**<br>☐ Proposed project applicant has a record of expending 90-94.9% of funds in a comparable project = **3 Points**<br>☐ Proposed project applicant has a record of expending less than 89.9% of funds in a comparable project = **0 Points** |
| | 7.c Reports and Invoicing = up to 4 **points** | ☐ Proposed project can provide evidence of on-time submission of APRs or equivalent funder reports, and quarterly LOCCS draws or funder invoices for the last two grant cycles of a comparable program (or for as long as the project has operated if less than two years old), 76-100% of the time = 4 **Points**<br>☐ At least 51-75% of time = 2 **Points**<br>☐ 50% or less of time OR proposed project does not provide evidence of on-time submission of funder reports and invoices for a comparable project = **0 Points** |

| | | |
|---|---|---|
| | 7.d Financial/ Performance Issues = **Minus max of 20 points** | ☐ Project or the Applicant agency has any or all of:<br>• audit or monitoring findings from any HUD or other source (including, but not limited to: ESG, HOPWA, HOME, CDBG; as well as CoC funding);<br>= **Minus up to 15 Points**<br>☐ HUD has instituted sanctions on any project of Applicant, including, but not limited to, suspending disbursements (e.g., freezing e-LOCCS), requiring repayment of grant funds, or de-obligating grant funds due to performance issues = **Minus 20 Points** |
| | 7.e Capacity to Serve Population targeted by project = up to **9 Points** | ☐ Proposed project will be scored a **maximum of 9 points** for their experience serving the population targeted by the project as indicated by this narrative response. |
| | 7.f Capacity and Utilization = up to **6 points** | ☐ Applicant demonstrates a comparable project was fully utilized (100%) during the program year = **6 Points**<br>☐ 90-99% during the program year = 5 **Points**<br>☐ 80-89% during the program year = 4 **Points**<br>☐ 79% or less during the program year OR applicant does not provide evidence of capacity and utilization for a comparable project = **0 Points** |
| | 7.g Quality Assurance = up to **5 Points** | ☐ Proposed project demonstrates use of a Consumer Satisfaction Survey = **1 point**<br>☐ Applicant annually reviews client feedback _and_ uses it to inform program planning, implementation, and management in a comparable project = **2 points**<br>☐ Applicant or proposed project has a former or current program participant on Board of Directors or Advisory Board. = **1 point**<br>☐ Applicant demonstrates staff attends or participates in trainings which are designed to ensure a high quality of care = **1 point** |
| 7 | Equity | ☐ Racial-- Applicant has assessed racial disparities; describes actions taken over the past year to identify barriers that lead to racial disparities & steps taken & measures to evaluate them; identifies future efforts= 4 **points**<br>☐ LGBTQ+ -- Applicant describes anti-discrimination policy; willing to collaborate on CoC process = 2 **points** |

**2023 New Project Benchmark Scoring Tool for Outcome Measures, by Sector**
**From Nashville's CoC/ESG Standards of Care Committee -**
http://www.nashville-mdha.org/wp-content/uploads/2023/08/Continuum-of-Care-Coc-Emergency-Solutions-Grants-ESG-Standards-of-Care.pdf

### Permanent Supportive Housing

| | Measure | Benchmark | Scoring |
|---|---|---|---|
| A | Retains housing and/or exits to other Permanent Housing | 80% | ☐ Meets or exceeds local benchmark in comparable project = **14 Points**<br>☐ Is within 5 percentage points = **10 Points**<br>☐ Is within 10 percentage points = **6 Points**<br>☐ Is > 10 percentage points below the local benchmark = **0 Points** |
| B | Adults who increase income | 70% of leavers and stayers | ☐ Meets or exceeds local benchmark in comparable project = **6 Points**<br>☐ Is within 5 percentage points = **4 Points**<br>☐ Is within 10 percentage points = **2 Points**<br>☐ Is > 10 percentage points below the local benchmark =**0 Points** |

### Rapid Rehousing

| | Measure | Benchmark | Scoring |
|---|---|---|---|
| A | Obtains Permanent Housing | 90% | ☐ Meets or exceeds local benchmark in comparable project = **8 Points**<br>☐ Is within 5 percentage points = **5 Points**<br>☐ Is within 10 percentage points = **3 Points**<br>☐ Is > 10 percentage points below the local benchmark = **0 Points** |
| B | Adults who Increase Income | 40% of leavers and stayers | ☐ Meets or exceeds local benchmark in comparable project = **6 Points**<br>☐ Is within 5 percentage points = **4 Points**<br>☐ Is within 10 percentage points of = **2 Points**<br>☐ Is > 10 percentage points below the local benchmark in comparable project = **0 Points** |
| C | Median Length from program entry to housing | 45 days | ☐ Meets or is shorter than local benchmark in comparable project = **6 Points**<br>☐ Is within 5 percentage points = **4 Points**<br>☐ Is within 10 percentage points = **2 Points**<br>☐ Is > 10 percentage points longer than the local benchmark = **0 Points** |

### Transitional Housing

| | Measure | Benchmark | Scoring |
|---|---|---|---|
| A | Obtains Permanent Housing (or remains in TH) | 70% | ☐ Meets or exceeds local benchmark = **8 Points**<br>☐ Is within 5 percentage points = **5 Points**<br>☐ Is within 10 percentage points = **3 Points**<br>☐ Is > 10 percentage points below the local benchmark = **0 Points** |
| B | Adults who increase income | 40% of leavers and stayers | ☐ Meets or exceeds local benchmark = **6 Points**<br>☐ Is within 10 percentage points = **4 Points**<br>☐ Is within 15 percentage points = **2 Points**<br>☐ Is > 15 percentage points below the local benchmark = **0 Points** |

| C | Length of stay (LOS) in program | Average LOS < 9 months or 270 days | ☐ Meets or is shorter than local benchmark = **6 Points**<br>☐ Is within 10% (27 days) of local benchmark = **4 Points**<br>☐ Is within 20% (54 days) of local benchmark = **2 Points**<br>☐ Is > 20% above local benchmark = **0 Points** |
|---|---|---|---|

**THE NASHVILLE COC RATING & RANKING PROCESS FOR NEW PROJECTS**

The PEC intends to score using the 100-point scale broken down in each section above (91-point scale for DV projects), but may add others, and/or modify as needed in light of any new areas of emphasis in HUD's 2023 CoC Notice of Funding Opportunity (NOFO) or additional information from HUD.

While scoring projects based on standardized performance criteria is key to the rating process, the PEC must also rank all renewal and new projects each year. This is the process of prioritizing projects for funding based on the CoC's local priorities, which can take into consideration the project type, local unmet need or other funding parameters.

**ADDITIONAL INFORMATION ON PROJECT ADMINISTRATIVE BUDGET LINE ITEM AND INDIRECT COSTS**
**See  https://files.hudexchange.info/resources/documents/Indirect-Cost-Toolkit-for-CoC-and-ESG-Programs.pdf**

**HUD establishes a maximum rate of 10% for project administrative costs (i.e., admin costs may not exceed 10% of the aggregated amount requested for all other budget line items).  HOWEVER, the CoC PEC reserves the right to limit direct plus indirect administrative fund requests to a level below 7% - a strategic priority aimed at maximizing direct assistance.**

**ADDITIONAL INFORMATION REGARDING MATCHING REQUIREMENTS**
**See https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/coc-match/coc-match-overview/**
**and**
**https://www.hudexchange.info/resource/3113/importance-of-documenting-match-under-the-coc-program/**

**GUIDANCE ON BUDGETING FOR RRH PROJECTS**
**HUD requires all new RRH project applications to budget each unit at the full FMR for 12 months. For example, a RRH project requesting 1 year of funding for 10 units with an FMR of $1,000/month would be required to budget rental assistance at 10 X 1,000 X 12 per year or $120,000 annually. This does not mean that you must provide rental assistance at full FMR or for a full year for all or any project participants.**

**RRH projects may anticipate serving more than one household during a year in a single budgeted unit. This does not mean that households are sharing units, rather that you are using the available budget to serve as many households as possible. For the purposes of the annual project budget, even if average length of rental assistance needed by participants is anticipated to be shorter or longer than 12 months, each unit included in the budget must be budgeted at 12 months.**

**For example, a project anticipating average length of rental assistance at full FMR for 4 months per household, would budget each unit included in the application at the full 12 months and anticipate serving 3 households in each budgeted "unit" during the year. In this example, assuming FMR of $1,000/month, the project might budget 10 units as follows:  10 X 12 X 1,000 = $120,000. If each participant actually receives full FMR for 4**

months, the cost would be $4,000/household.  With $120,000, the project would have sufficient funds to serve 30 households during the year ($120,000/$4,000 = 30), even though only 10 units were budgeted.  If in reality the households served need less than the full FMR or fewer than 4 months of assistance, the project may serve more households than indicated in the application.

Similarly, for the purposes of the annual project budget, even if the average amount of rental assistance required by participants is anticipated to be less than full FMR, each unit included in the budget must be budgeted at full FMR.  Here's another example:  a project anticipating average length of rental assistance at 50% of FMR for 4 months per household, would budget each unit included in the application at the full 12 months and anticipate serving 6 households in each budgeted unit during the year. In this example, if FMR is $1,000/month, each household would be anticipated to receive $500/month in rental assistance (i.e., 50% of full FMR) for 4 months.  You would budget each unit at the full 12 month FMR (i.e., 12 X $1,000 or $12,000/unit/year).  But you would anticipate serving 6 households during the year in that "unit", i.e., each household receives $500/month for 4 months (or $2,000 during the year) and six households per year receive $2,000 (6 X 2,000= $12,000); thus, you will have fully expended the $12,000 you budgeted for one unit for one year.  Again, this does not mean that households are sharing units, rather that you are using the available budget to serve as many households as possible.

In order to ensure cost effectiveness and maximize the number of participants who can be assisted, the Nashville CoC encourages participants to design their projects in a manner that provides the least assistance necessary to prevent a return to homelessness.  Some households may need a small amount of assistance for only one month.  Others may need a deeper subsidy for a longer period of time.  You should plan to serve at least the number of households proposed in your application, but can serve as many households as possible given the available budget.  You should be certain to include adequate supportive services funds to enable you to serve all of the households anticipated to receive rental assistance.

**Rating versus Ranking**

Per HUD's CoC Rating and Ranking Tool, while scoring projects based on standardized/objective performance criteria is key to the rating process, the PEC must also <u>rank</u> all renewal and new projects each year.  This is the process of prioritizing projects for funding based on the CoC's local priorities, which can take into consideration the project type, local unmet need or other funding parameters.  This offers CoCs flexibility to adjust in rank order to implement local funding priorities or CoC Program NOFO provisions that are not addressed within the Tool, & ensure that they are ranked appropriately according to community needs.  The rating tool for New projects should be <u>similar</u> to that on the chart below, but may need to be adapted based on additional guidance made available by HUD, and/or decisions made by the Nashville CoC Performance Evaluation Committee.

| CoC 2023 New Project Scoring DRAFT | | | | | Section Score | |
|---|---|---|---|---|---|---|
| Addresses Local/HUD Priorities | | | | | 26 | |
| | a. | Improves system performance | | 10 | | |
| | b. | Employment | | 3 | | |
| | c. | Housing First- Narrative | | 4 | | |
| | d. | Houses and serves unsheltered homeless | | 9 | | |
| Performance/Outcomes | | | | | 25 | |
| | a. | Performance re: outcomes/APR | | 20 | | |
| | b. | Benchmarks & Achievement History | | 5 | | |
| Budget & Cost Effectiveness | | | | 4 | 4 | |
| | | Health/Housing Leverage | | 3 | 3 | |
| Organizational Capacity & Grant Management | | | | | 36 | |
| | a. | Fiscal Mnmgt | | 4 | | |
| | b. | Grant Spending | | 6 | | |
| | c. | Reports & Invoicing | | 6 | | |
| | d. | Financial/Performance Issues | Minus max of 20 pts | | | |
| | e. | Capacity to Serve Target Pop | | 9 | | |
| | f. | Capacity & Utilization | | 6 | | |
| | g. | Quality Assurance | | 5 | | |
| Equity | | | | | 6 | |
| | a. | Racial | | 4 | | |
| | b. | LGBTQ+ | | 2 | | |
| | | | | | | |
| | | | Total pts | 100 | 100 | |
| | | | | | | |
| | | Unsheltered criterion not judged for DV- using 91 pt scale* | | | | |