FFY2024
COC FUNDING COMPETITION

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Agenda

- 2023 Recap

- 2024 Overview

- 2024 HUD Policy Priorities

- 2024 NOFO Changes

- CoC Application Components & Collaborative Application Scoring

- Ranking, Tiering & Available Funds

- Eligible Renewing and New Project Opportunities

- BoS Competition Process and Resources

FY23 Competition Recap

- MD-514 scored **180** out of 200 possible points or **90%**
  - Highest nationwide score 185.5
  - Lowest nationwide score 54.5
  - Average nationwide score 151.5

- MD-514 received **25 Merger Bonus Points**
  - Score with bonus **205** of 200 possible points or **103%**

- MD-514 received **$7,353,991**
  - **36 Renewal Projects**
  - **5 New Projects**

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

FY24 Competition Overview

- CoC NOFO Released July 31, 2024

- Competition Closes October 30, 2024

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

HUD POLICY PRIORITIES

2024 HUD Policy Priorities

1. Ending homelessness for all persons.

2. Use a Housing First approach.

3. Reducing Unsheltered Homelessness.

4. Improving System Performance.

5. Partnering with Housing, Health, and Service Agencies.

6. Racial Equity.

7. Improving Assistance to LGBTQ+ Individuals.

8. Persons with Lived Experience.

9. Build an Effective Workforce.

10. Increasing Affordable Housing Supply.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Ending homelessness for all persons

In 2023, the United States Interagency Council on Homelessness (USICH) presented All In: The Federal Strategic Plan to Prevent and End Homelessness to the President and Congress. The plan is built around six pillars: three foundations — equity, data and evidence, and collaboration — and three solutions — housing and supports, crisis response, and prevention. The work funded through this NOFO will support the actions and strategies proposed within the pillars. 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, older adults, those experiencing chronic homelessness, and people with disabilities, including those living with HIV/AIDS). CoCs should partner with housing, health care, and supportive services providers and agencies 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 periods experiencing homelessness to develop housing and supportive services tailored to their needs.

Use a Housing First approach

Housing First prioritizes rapid placement and stabilization in permanent housing and utilizes housing as a platform for providing supportive services that improve a person's health and well-being. CoC Program funded projects should help individuals and families move quickly into permanent housing without preconditions and ensure that participants can choose the services they need to improve their health and well-being and remain in their housing. Additionally, CoCs should engage landlords and property owners to identify housing units available for rapid rehousing and permanent supportive housing participants, remove barriers to entry, and adopt client centered service practices. HUD encourages CoCs to assess how well Housing First approaches are being implemented in their communities.

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 high rates of physical and mental health challenges, including substance use disorders. CoCs should explore all available resources, including CoC and ESG funded assistance, housing subsidies, health care programs, and other supportive services to help improve unsheltered people's well-being and help them move as quickly as possible to permanent housing. CoCs should work with law enforcement and their state and local governments to enlist their support for housing people residing in encampments, and to avoid practices that criminalize homelessness. Criminalization of homelessness risks the health of people living unsheltered and makes it more difficult for them to move into permanent housing. Additionally, CoCs should use their Coordinated Entry process to promote participant choice, coordinate homeless assistance and mainstream housing and services, and ensure people experiencing homelessness receive assistance quickly.

Improving System Performance

CoCs should be assessing the performance of all homelessness projects using system performance measures (e.g., average length of homeless episodes, rates of return to homelessness, rates of exit to permanent housing destinations). CoCs should review all projects eligible for renewal under this FY 2024 – 2025 CoC NOFO to determine their effectiveness in serving people experiencing homelessness, including their cost-effectiveness. The CoC Competition includes several options to help CoCs improve their effectiveness, including reallocation, expansion, and transition grants, and CoC's should take advantage of these options to improve their overall performance. CoCs should also look for opportunities to implement continuous quality improvement and other process improvement strategies.

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. 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 health care systems and agencies and assist program participants to obtain health care and supportive services, including behavioral health services, including those covered and financed by Medicaid. In addition, CoCs should develop 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 assistance 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 HUD-VASH, Mainstream Vouchers, Family Unification Program (FUP) Vouchers, Fostering Youth Independence (FYI) 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 program resources provided through the Homelessness Assistance and Supportive Services Program (HOME-ARP) that was created through the American Rescue Plan. CoCs should also work with organizations administering other housing assistance, such as assistance provided through HUD's Section 202 and 811 programs, HUD's Project Based Rental Assistance, and U.S. Department of Agriculture's housing assistance programs.

(c) Partner with local workforce development centers to improve employment opportunities.

Racial Equity

In nearly every community, Black, Indigenous, and other people of color are substantially over-represented in the homeless population. In this NOFO, HUD is emphasizing system and program changes to address racial equity within CoCs and projects. Responses to preventing and ending homelessness should address racial inequities to ensure successful outcomes for all persons experiencing homelessness using proven approaches, such as: partnering with a racially diverse set of community partners and people experiencing homelessness and partnering with organizations with experience serving underserved populations. CoCs should review local data, policies, procedures, and processes to identify barriers that result in racial disparities and take steps to eliminate barriers to improve racial equity and to address disparities.

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 that all projects provide privacy, respect, safety, and access regardless of gender identity or sexual orientation. CoCs should also partner with organizations with expertise in serving LGBTQ+ populations.

Persons with Lived Experience/Expertise

The people who know best what solutions will effectively end homelessness are those who are experiencing homelessness. HUD expects CoCs to include people with lived homeless expertise and experience in their local planning and decision-making processes. People with lived experience/expertise 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, developing local competition processes, monitoring and evaluation. CoC leaders and community partners should prioritize hiring people who have experienced homelessness in areas where their expertise is needed.

Building an Effective Workforce

Homeless assistance providers need effective, wellsupported staff to provide high quality assistance. Unfortunately, recruiting and retaining qualified staff for programs to assist persons experiencing homelessness has proven difficult due to low pay and the challenging nature of the work. To address this issue, HUD is applying cost of living adjustments to supportive service activities and other staffing-focused budget lines to allow CoC budgets to better keep up with rising costs. HUD also encourages CoCs to work with their funders and other community stakeholders to improve pay and support for people who work in the homelessness sector.

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 NOFO awards points to CoCs that take steps to engage local leaders about increasing affordable and accessible housing supply.

CHANGES FROM PRIOR COMPETITIONS

Changes from Prior Competitions

2 Year Competition Cycle.

➢ 2024 will serve as a typical Competition Cycle.

➢ 2025 will likely be renewals only, no Collaborative Application.

➢ *Any new project funding for 2025 will require Congressional approval – more to come!*

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Changes from Prior Competitions

Reallocation Restrictions.

Projects awarded for specific subpopulations (e.g., homeless youth or survivors of domestic violence, dating violence, sexual assault or stalking) may not be reallocated to other populations without consulting relevant stakeholders.

For the FY 2024 funds, HUD requires funding reallocated from projects previously funded with DV Bonus funding to be used for projects serving the same subpopulation.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Changes from Prior Competitions

Cost of Living Adjustments.

The Consolidated Appropriations Act, 2024 authorizes HUD to make reasonable cost of living adjustments to renewal amounts to help afford increasing cost of operations due to inflation.

Adjustments will impact Supportive Service activities, HMIS costs and other staffing-focused budget line items

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

COC APPLICATION COMPONENTS

CoC Application Submission: eSNAPS

CoC NOFO

- Collaborative Application — Written by DHCD
- Project Applications — Written by Project Applicants
- Priority Listing — Managed by DCHD

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE
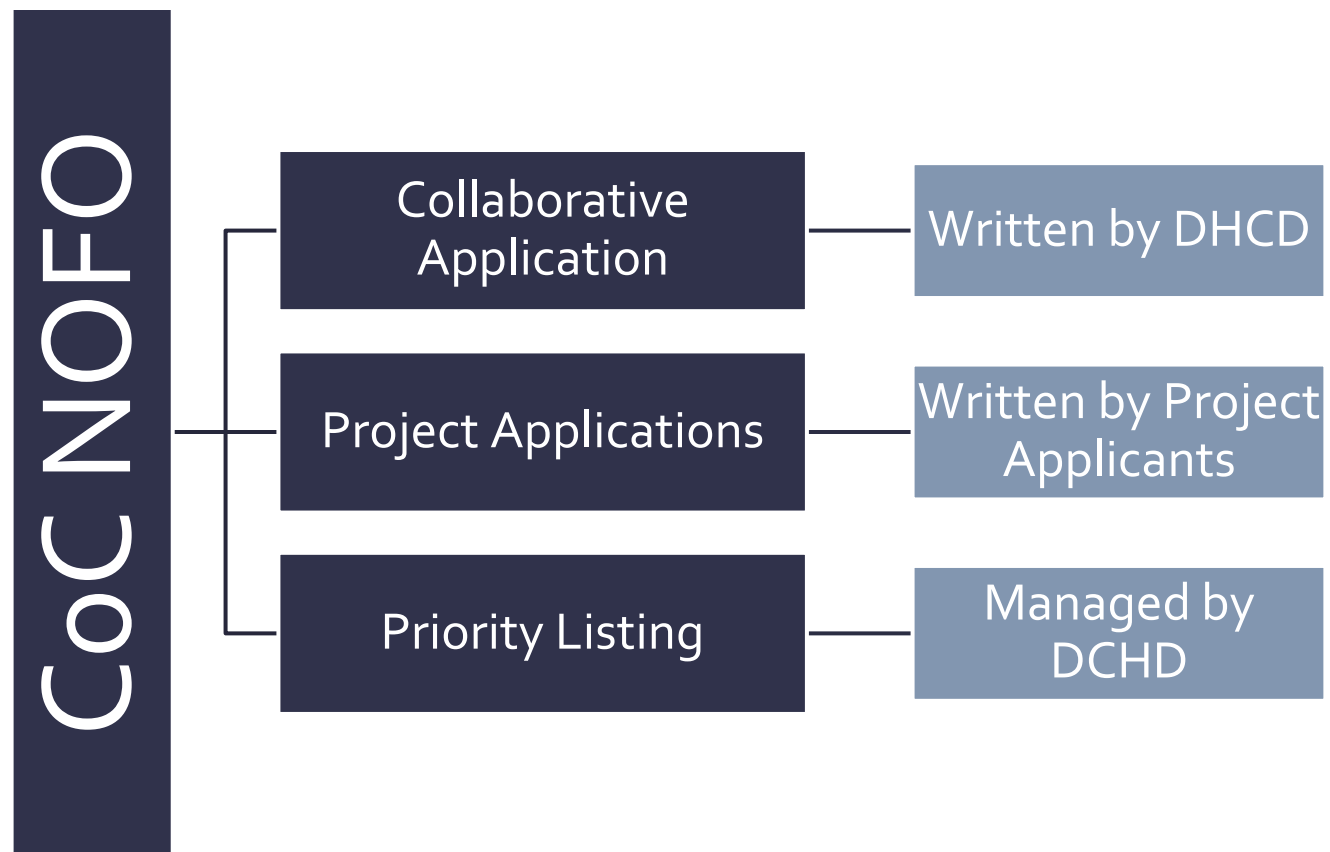
Collaborative Application: DHCD Writes

Collaborative Application

- System-Wide Coordination
- System Performance
- Transparent Process & Data

=

CoC Score & competitiveness for new funding

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE
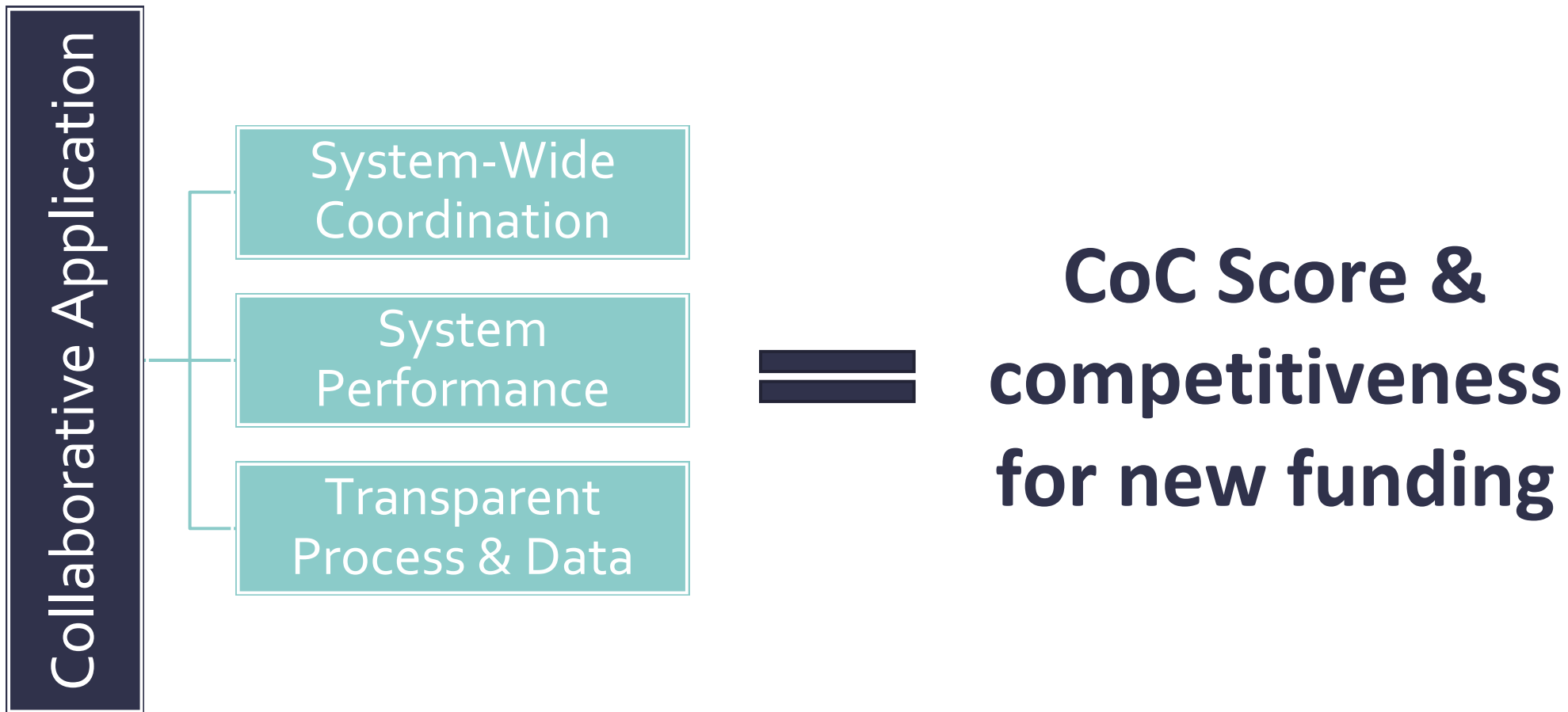
Project Applications: Projects Write

Project Applications

New & Renewing Projects

Individual Projects

Completed by Project Applicants

Completed in eSNAPS Check user accounts NOW!

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE
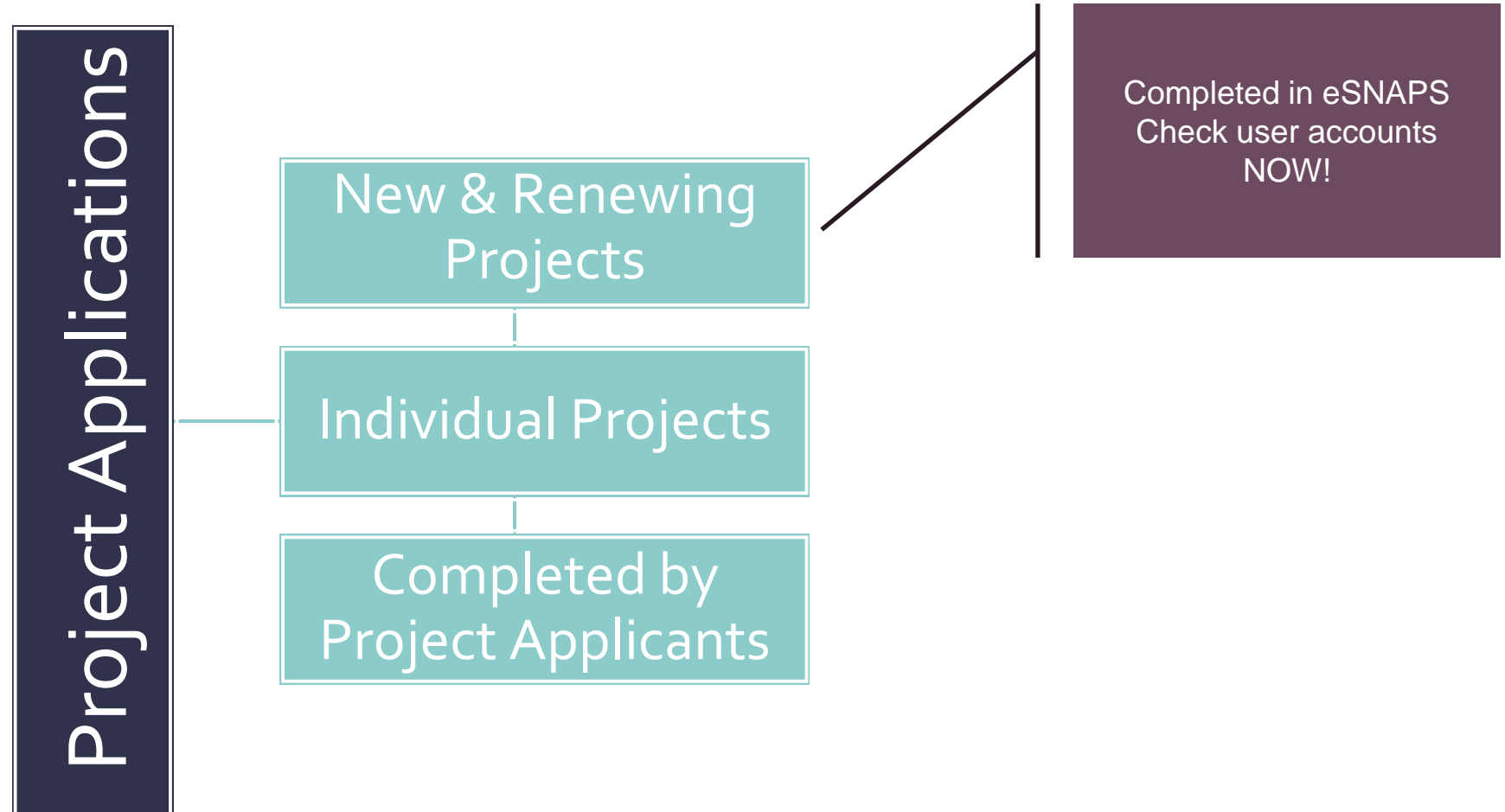
Priority Listing: DHCD Manages

Priority Listing

- Accept/Reject Applications
- Rank Projects in Priority Order
- Finalize Budgets
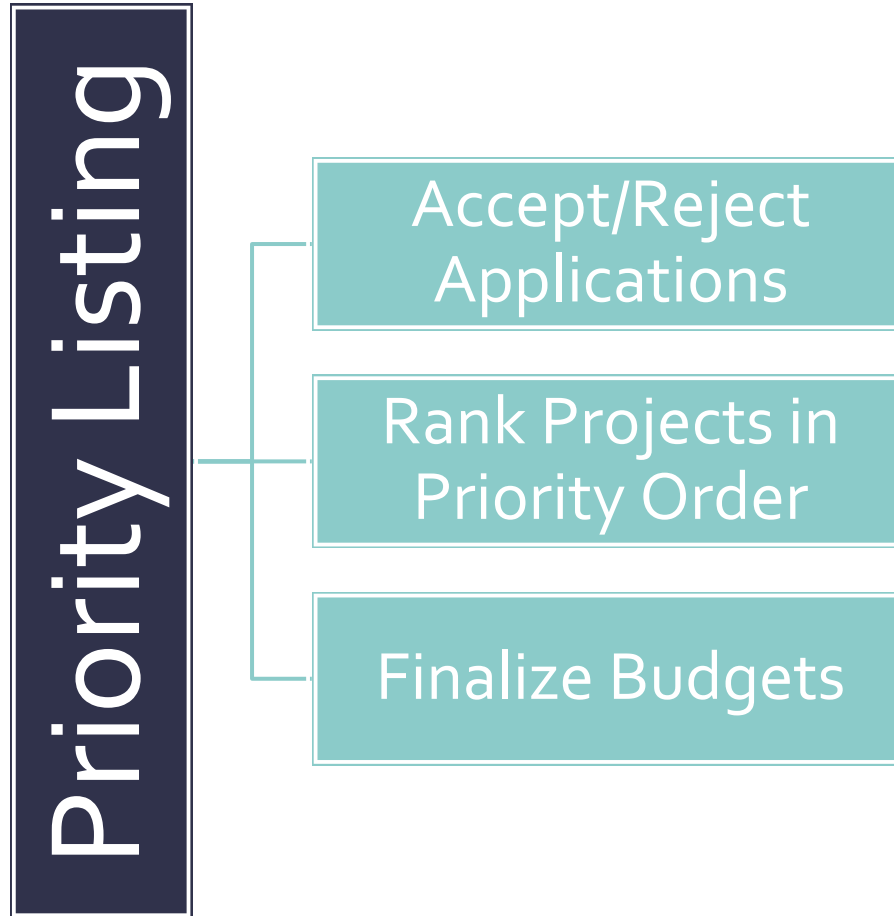
COLLABORATIVE APPLICATION SCORING

Collaborative Application Scoring

1. CoC Coordination & Engagement   84 Points

2. Project Capacity, Review & Ranking   28 Points

3. HMIS   9 Points

4. Point-In-Time Count   5 Points

5. System Performance   60 Points

6. Coordination with Housing & Healthcare   <u>14 Points</u>

200 Available Points

CoC Merger   *25 Bonus Points*

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

RANKING, TIERING & AVAILABLE FUNDS

Estimated Available Funding

2024 CoC NOFO
Total Project Funding: $7,896,272
+DV Bonus Amount

Annual Renewal Demand	CoC Bonus Funding 12% FPRN	DV Bonus Funding 15% PPRN
$7,050,242	$846,030	$ *PENDING*

Tier 1
(90% of ARD)
$6,345,382

Tier 2
(ARD Remainder + Bonus)
$1,550,890
+DV Bonus

CoC Planning
$352,512

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

29

Ranking & Tiering Funding Structure

- CoCS are required to rank all new and renewal project applications in priority order based on CoC policy which may include local priorities, needs and gaps

- Ranked projects will fall into two tiers

- Projects in Tier 1 likely to receive funding assuming threshold approval

- Projects in Tier 2 are subject to additional scoring and compete nationally based on CoC Performance and rank order

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Tier 1

Tier 1 Funding Amount: 90% of the Annual Renewal Demand (ARD)

- Projects in Tier 1 will be conditionally selected from the highest scoring CoC to the lowest scoring CoC (or until funding runs out), provided the projects pass both eligibility and threshold review

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Tier 2

Tier 2 Funding Amount: 10% ARD + Bonus Funds

- Projects that fall into Tier 2 undergo project eligibility and threshold review AND are subject to additional scoring and competition by HUD

- Scored Tier 2 projects then compete with all Tier 2 projects across the nation and funding is determined by HUD based on the score and available funds

- If a project application straddles Tier 1 & Tier 2, the portion in Tier 1 will be funded based on Tier 1 criteria, the Tier 2 portion will be scored and funded per the above

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Tier 2 Scoring

CoC Score: Up to 50 Points
- Direct proportion to the CoC Collaborative Application Score
  - *If a CoC receives 100 out of 200 available points on the CoC Application, the individual project application would receive 25 out of 50 points for this criterion*

CoC Project Ranking: Up to 40 Points
- HUD Formula based on Tier 2 rank order, the higher the rank, the higher the points

Commitment to Housing First: Up to 10 Points
- HMIS & SSO-CE Projects automatically receive 10 Points

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Ranking & Tiering

1 | Renewal PSH

2 | Renewal PSH

3 | Renewal PSH

4 | Renewal PSH

Tier 1: 90% of Annual Renewal Demand (ARD)

5 | New PSH

Tier 2: 10% of ARD + Bonus Funds

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

34

Rank	LHC	Applicant Name	Project Name	Housing Type	Project Type	Requested Amount	Allocations Award
			Tier 1				
1	SM	Housing Authority of St. Mary's County, MD	Aldridge PWD#16 Consolidated Grant - 2021 Renewal	PSH	Renewal	$ 98,252.00	$ 98,252.00
2	SM	Housing Authority of St. Mary's County, MD	Marek PWD#9 Consolidated Grant 2021 Renewal	PSH	Renewal	$ 197,685.00	$ 197,685.00
3	AC	Allegany County Human Resources Development Commission, Inc.	HRDC Leasing Supportive Housing Project	PSH	Renewal	$ 14,368.00	$ 14,368.00
4	SM	Catholic Charities of The Archdiocese of Washington, Inc	Fortitude	PSH	Renewal	$ 165,177.00	$ 165,177.00
5	WC	Potomac Case Management Services, INC	WC PSH Families	PSH	Renewal	$ 35,640.00	$ 35,640.00
6	SM	Housing Authority of St. Mary's County, MD	Nicholson - Permanent Housing Project #8 - 2021 Renewal	PSH	Renewal	$ 269,912.00	$ 269,912.00
7	SM	Maryland Department of Health	BHA PSH Southern MD FY 2021	PSH	Renewal	$ 1,385,965.00	$1,385,965.00
8	SM	Housing Authority of St. Mary's County, MD	Haina PWD#13 Consolidated Grant - 2021 Renewal	PSH	Renewal	$ 189,850.00	$ 189,850.00
9	SM	Housing Authority of St. Mary's County, MD	Horne - Permanent Housing Project #11 - 2021 Renewal	PSH	Renewal	$ 164,725.00	$ 164,725.00
10	WC	Maryland Department of Health	BHA PSH Washington County FY 2021	PSH	Renewal	$ 267,666.00	$ 267,666.00
11	WC	Potomac Case Management Services, INC	WC PSH Program Individuals	PSH	Renewal	$ 180,851.00	$ 180,851.00
12	GC	Garrett County Community Action Committee, Inc.	SHP DIS 2021	PSH	Renewal	$ 173,598.00	$ 173,598.00
13	AC	Maryland Department of Health	BHA PSH Allegany County FY 2021	PSH	Renewal	$ 64,105.00	$ 64,105.00
14	AC	YMCA of Cumberland	Y Permanent Housing	PSH	Renewal	$ 411,393.00	$ 411,393.00
15	CC	Maryland Department of Health	BHA PSH Cecil County 5 Unit FY 2021	PSH	Renewal	$ 78,425.00	$ 78,425.00
16	CC	Maryland Department of Health	BHA PSH Cecil County 7 Unit FY 2021	PSH	Renewal	$ 107,683.00	$ 107,683.00
17	CC	Cecil County, Maryland	Rapid Re-housing 2021	RRH	Renewal	$ 52,713.00	$ 52,713.00
18	SM	Three Oaks Homeless Shelter, Inc	Waring Rapid Re-Housing Consolidated Project - 2021 Renewal	RRH	Renewal	$ 118,505.00	$ 118,505.00
19	SM	Housing Authority of St. Mary's County, MD	Owens Rapid Rehousing Consolidated Grant - 2021 Renewal	RRH	Renewal	$ 199,902.00	$ 199,902.00
20	GC	Garrett County Community Action Committee, Inc.	RRH for Individuals and Families 2021	RRH	Renewal	$ 52,473.00	$ 52,473.00
21	SM	LifeStyles of Maryland Foundation, Inc.	LifeStyles' DV Joint RRH	Joint TH-RRH	Renewal	$ 49,880.00	$ 49,880.00
22	AC	YMCA of Cumberland	Y Transitional Housing	TH	Renewal	$ 70,350.00	$ 70,350.00
23	AC	Allegany County Human Resources Development Commission, Inc.	Transitional Housing Services	TH	Renewal	$ 67,365.00	$ 67,365.00
			Tier 2				
24	BoS	MD Housing & Community Development	HMIS - **CoC Bonus**	HMIS	New	$ 220,905.00	$ 220,905.00
25	SM	LifeStyles of Maryland Foundation, Inc.	Haven of Hope - **DV BONUS**	Joint TH-RRH	New	$ 65,300.00	$ 65,300.00

25 projects were submitted to MD-514. All 25 projects were accepted, ranked and tiered. All accepted projects in this list will be included in the MD-514 Consolidated Application submission.

BoS CoC Ranking Policy Goals

- To prioritize those activities that are most successful in ending homelessness

- To maximize funding available to end homelessness in the CoC

- To maximize the CoC overall application score and ensure the highest possibility of project funding

- To provide an incentive to all funded providers to monitor and improve their performance, including efficiency with funds, to ensure continued funding with CoC resources

- Effectively meet HUD policies and priorities

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Ranking Policy

Preliminary Rank Order

1. **Renewal Permanent Supportive Housing** projects, ranked in order of highest to lowest percentage score

2. **Renewal Rapid Rehousing projects**, ranked in order of highest to lowest percentage score

3. **Renewal Joint TH-RRH**, ranked in order of highest to lowest percentage score

4. **First time renewals** that do not have one full year of performance, by RFP score

5. **Renewal SSO-CE projects** that are not dedicated to the full BoS CoC geography

6. **New projects** based on committee score of RFP responses

7. **New DV Bonus projects** based on committee score of RFP responses

As **HMIS and Coordinated Entry** are HUD mandated activities, these projects **may be placed in Tier 1** to secure the funding needed for these activities. *Note:* only HMIS and SSO-Coordinated Entry projects that serve the full Balance of State CoC will be prioritized in Tier 1.

Tie Breaker - Rank order for renewal projects that receive equal scores and are of the same project component type will be determined based on the most recent year grant recapture rate, the project with the lower recapture rate will be ranked above the project with the higher recapture rate.

The CoC Planning Grant is non-competitive and is not a ranked project in this competition.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Ranking Policy Adjustments

Renewal Project Score Threshold

All scored renewing projects are subject to an eligibility threshold. Projects that score in the lowest 20% of all renewal projects may be moved to a lower ranking status and may be subject to reallocation. For example, the Performance Review Committee may rank a new project above a renewing project that scores in the bottom 10%.

Geography

HUD has determined that geographic diversity is an appropriate consideration in selecting homeless assistance projects in the CoC competition. Likewise, MD-514 recognizes that geography is an appropriate consideration for the competition. Projects may be ranked higher to ensure CoC funded programs are accessible to people experiencing homelessness throughout the entire MD-514 geography.

Vulnerable and High-Needs Populations

MD-514 recognizes that high quality projects serving vulnerable and high-needs populations, such as chronic homelessness, domestic violence and substance abuse; are a critical component to ending homelessness. The Performance Review Committee may rank the projects higher to ensure the programs are prioritized to receive CoC funding. These programs must meet a need in the community, show positive housing related outcomes and provide choice to participants seeking the services offered.

Voluntary Reallocation

Projects that choose to voluntarily reallocate at least 50% of their current grant amount in order to apply for a new reallocation-based project may be granted additional consideration in the ranking order. Projects that elect to fully reallocate their grant in order to change project component types, a Transition Grant, will be included in this scenario.

Funding Leverage

In alignment with the HUD CoC NOFO priorities, PSH and RRH project applications that demonstrate a commitment to leverage housing and/or health care system resources may be considered for a higher placement in the ranking order.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

ELIGIBLE PROJECT APPLICATIONS

Renewal Projects

Renewing: Permanent Supportive Housing, Rapid Rehousing, Joint TH-RRH, HMIS, SSO-CE Projects

A project that will be under grant agreement by December 31, 2024 and will have an expiration date in Calendar Year 2025 (between January 1, 2025, and December 31, 2025).

Renewal projects cannot request a higher amount than what is listed in the GIW

Renewal projects can move up to 10% of funds between the Budget Line Items

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

LHC	Applicant Name	Project Name	Project Type
AC	Allegany County Human Resources Development Commission, Inc.	HRDC Leasing Supportive Housing Project	PSH
AC	Allegany County Human Resources Development Commission, Inc.	Rapid Rehousing	RRH
AC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Allegany County	PSH
AC	YMCA of Cumberland	Y Gilchrist Housing	PSH
BoS	Maryland Department of Housing & Community Development	MD-514 HMIS	HMIS
BoS	Maryland Department of Housing & Community Development	CoC DV Bonus	SSO-CE
CC	Cecil County, Maryland	Rapid Re-housing	RRH
CC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Cecil County 7 Unit	PSH
CC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Cecil County 5 Unit	PSH
FC	City of Frederick	Housing 1st SRO - Individual Project	PSH
FC	City of Frederick	Housing 1st SRO - Individual Project	PSH
FC	Friends for Neighborhood Progress, Inc.	FFNP Housing First Renewal	PSH
FC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Frederick County	PSH
FC	Student Homelessness Initiative Partnership of Frederick County	RRH - COC - SHIP	Joint TH-RRH
GC	Garrett County Community Action Committee, Inc.	SHP DIS	PSH
GC	Garrett County Community Action Committee, Inc.	RRH	RRH
HC	Associated Catholic Charities, Inc.	AH PH-PSH Consolidated	PSH
HC	Harford Community Action Agency Inc.,	HCAA Centralized Intake Supportive Services	SSO-CE
HC	Harford Family House, Inc.	HFH Prologue	PSH
HC	Harford Family House, Inc.	HFH PSH I	PSH
HC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Harford County	PSH
HC	The Sexual Assault/Spousal Abuse Resource Center	RRH	RRH
SM	LifeStyles of Maryland Foundation, Inc.	Fortitude Renewal Project Application	PSH
SM	LifeStyles of Maryland Foundation, Inc.	LifeStyles' DV Joint TH-RRH	Joint TH-RRH
SM	LifeStyles of Maryland Foundation, Inc.	Fuller House Joint TH-RRH	Joint TH-RRH
SM	LifeStyles of Maryland Foundation, Inc.	Southern Crossing TH-RRH	Joint TH-RRH
SM	Maryland Department of Health, Behavioral Health Administration	BHA PSH Southern MD	PSH
SM	Three Oaks Homeless Shelter, Inc	Nicholson - Permanent Housing Project	PSH
SM	Three Oaks Homeless Shelter, Inc	Marek PWD#9 Consolidated Grant	PSH
SM	Three Oaks Homeless Shelter, Inc	Horne - Permanent Housing Project	PSH
SM	Three Oaks Homeless Shelter, Inc	Haina PWD#13 Consolidated Grant	PSH
SM	Three Oaks Homeless Shelter, Inc	Owens Rapid Rehousing Consolidated Grant	RRH
SM	Three Oaks Homeless Shelter, Inc	Waring Rapid Re-Housing Consolidated Project	RRH
SM	Three Oaks Homeless Shelter, Inc	Aldridge PWD#16 Consolidated Grant	PSH
WC	Maryland Department of Health, Behavioral Health Administration	BHA PSH Washington County	PSH
WC	Potomac Community Services	WC PSH Individuals	PSH
WC	Potomac Community Services	WC PSH Families	PSH

Consolidation

- **HUD encourages** applicants may **consolidate two or more (but no more than ten)** eligible renewal projects into one in the renewal project

- Projects must be held by the same recipient and be of the same project component type

- Projects must be in good standing and not have the following:
  - outstanding audit or monitoring findings;
  - outstanding obligation to HUD that is in arrears,
  - unresolved construction delays,
  - history of poor financial management or drawdown issues,
  - history of low occupancy levels, or lack of experience in administering the project type, or
  - other capacity issues

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Transition Grant

- Opportunity to transition an eligible renewal grant to a new program component type via a voluntary reallocation process
  - *Example:* Transition a Transitional Housing Project to a Permanent Supportive Housing Project
- Transition grants will have one year to fully transition to new component type during the normal operating year

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Expansion Grant

- HUD will allow project applicants to apply for a new expansion project (funded through reallocation, CoC Bonus, and DV Bonus processes) to expand existing projects to increase the number of units, persons served, services provided to existing program participants, or to add additional activities to HMIS and SSO-CE projects.

- The expansion portion will be considered a new project and will be required to submit a new project application to BoS and in eSNAPS

- Both the renewal and new project applications will be scored and ranked in the priority list

- If awarded by HUD, would be executed as one project

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Project Application Opportunities

CoCs may submit new project application created through

- ❖ **CoC Bonus**

- ❖ **DV Bonus**

- ❖ **Reallocation**

- ❖ **Combination of the three sources**

HUD will review project subrecipient eligibility as part of the project quality threshold review process. Project applicants are required to submit documentation of the subrecipient's eligibility with the project application.

New Projects: CoC Bonus

CoC Bonus: Up to 12% of the Final Pro Rata Need (FPRN), approximately $846,029

Must be one of the following project types:

- **Permanent Supportive Housing** projects that serve persons who meet the definition of DedicatedPLUS or persons experiencing chronic homelessness at the time of initial enrollment
- **Rapid Rehousing** projects may serve persons who qualify as homeless
- **Joint TH-RRH** projects may serve persons who qualify as homeless

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: DV Bonus

Domestic Violence Bonus: Up to 15 % of the Preliminary Pro Rata Need (PPRN) estimated amount **$ AMOUNT PENDING**

- New projects that want to be considered for the DV Bonus, must be:
  - Must serve survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless
  - **Rapid Rehousing or Joint TH-RRH** component projects that demonstrate trauma-informed, victim-centered approach and follow a housing first approach
  - **SSO for Coordinated Entry** to implement policies, procedures, and practices that equip the CoC's coordinated entry to better meet needs of survivors of domestic violence, dating violence, sexual assault, or stalking

- Can be stand alone new project or expansion of renewal project

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: Reallocation

REALLOCATION

Reallocation is the process of distributing funding from a lower performing project and making those funds available for new projects without decreasing the CoC's Annual Renewal Demand (ARD).

Per the FY2019 United States Department of Housing and Urban Development (HUD) Appropriations Bill, **HUD must give priority to Continuums of Care that allocate resources effectively**.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: Reallocation

VOLUNTARY REALLOCATION

Voluntary reallocation means that a project makes the choice to gives up a portion or the entire amount of their project funding for the purpose of creating a new project or to change their project component type.

To meet HUD and community priorities, *renewal projects within the MD-514 geography may request a voluntary reallocation request if there is a decision to reduce the overall budget, reduce the number of households served, or acknowledging a difficulty in implementing all performance and compliance related requirements of the grant.*

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: Reallocation

INVOLUNTARY REALLOCATION POLICY

Involuntary reallocation is when the CoC "reclaims" some or all of a renewal project's funding which has been allocated to a particular agency without the explicit consent of the Agency in control of the funds. Involuntary reallocation happens when funding is redirected from an existing Renewal Project for the purpose of creating a New Project.

Project Performance
Renewal projects will be assessed on their project quality and ability to meet performance outcomes such as occupancy rates, participant income growth, successful exits and cost efficiency. All scored renewing projects are subject to an eligibility threshold; ***projects that score in the lowest 20% of all renewal projects may be subject to further evaluation and review***. Further, ***those not meeting the eligibility threshold may be moved to a lower ranking status and therefore subject to involuntary reallocation.***

Spending History
HUD assumes that projects will spend 100% of the funds allocated to them. Projects that fail to spend the total grant award may see a decrease in funding as those funds are added to the pool of funds available for reallocation to other projects. ***Projects that have a high recapture rate of 10% or greater for two consecutive program years, may be reduced to the amount disbursed at the end of the 12-month review***. An exception to this policy may be made for new projects that could not expend funds due to implementation barriers. Please note that any organization found to have less than 100% of their grant expended may be required to provide an explanation on why funds were recaptured.

HMIS Participation
HMIS participation is required to meet HUD renewal project threshold requirements. Non-HMIS providers must use a comparable database that meets the needs of the local HMIS to meet this threshold. Monitoring results along with data quality reports will be examined to determine if agency participation in HMIS is adequate. Projects with a data error rate of 10% or more will be placed on a data quality corrective action plan to correct existing errors and prevent future occurrences. The corrective action plan will consist of a series of required data quality workshops for users within the project. ***Projects that do not meet threshold requirements or have the highest rates of data errors may be reallocated to higher performing projects or new projects***.

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: DV Bonus

- Must be 1 year grant term but may request a longer initial grant term not to exceed 18 months

- Any number of submissions per project type (RRH, Joint TH-RRH) provided each application is for at least $50,000

- Only one SSO for Coordinated Entry application may be submitted per CoC

- HUD will conditionally select DV Bonus projects based on the criteria established in the NOFA
  - Any project conditionally selected by HUD as part of the DV Bonus will be removed from the CoC's Project ranking list and all projects underneath of it will slide up in rank
  - Any project that indicated it would like to be considered as part of the DV Bonus but was not selected as part of the DV Bonus, will retain the ranking provided by the CoC and be considered as a normal ranked project

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: DV Bonus

HUD will award a point value using the following 100-point scale:

- Rapid Rehousing and Joint TH and RRH Projects
  - *CoC Score*: Up to 50 points in direct proportion to the score received on the CoC Application.
  - *CoC Collaboration with VSP*: Up to 10 points in direct proportion to the score received on the rating factors related to VSP Collaboration.
  - *Need for the Project*: Up to 10 points based on the extent the CoC quantified the need for the project in its portfolio, the extent of the need and how the project will fill the gap.
  - *Quality of the Project Applicant Experience:* Up to 15 points based on the previous performance of the applicant in serving survivors of domestic violence, dating violence, sexual assault or stalking and ability to house and meet safety outcomes of survivors.
  - *Demonstration of Inclusion of Victim-Centered Practices:* Up to 8 points based on quality of project plan to address needs of survivors by adopting victim-centered practices
  - *Demonstration of Plan to Include Survivors with Lived Experience*: Up to 7 points based on project ability to demonstrate plan to involve survivors in policy and program development

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

New Projects: DV Bonus

HUD will award a point value using the following 100-point scale:

- SSO Projects for Coordinated Entry
  - *CoC Score*: Up to 50 points in direct proportion to the score received on the CoC Application.
  - *CoC Collaboration with VSP*: Up to 10 points in direct proportion to the score received on the rating factors related to VSP Collaboration.
  - *Need for the Project*: Up to 25 points based on the extent the CoC quantified the need for the project in its portfolio, the extent of the need and how the project will fill the gap.
  - *Demonstration of Plan to Include Survivors with Lived Experience*: Up to 15 points based on project ability to demonstrate plan to involve survivors in policy and program development

BALANCE OF STATE APPLICATION PROCESS

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

WHO WE ARE   WHAT WE DO   OUR PROGRESS

2024 Continuum of Care Funding Competition

The Maryland Balance of State Continuum of Care has selected the Maryland Department of Housing and Community Development (DHCD) to serve as the community's Collaborative Applicant for HUD's 2024 Continuum of Care Program Competition. As the Collaborative Applicant, DHCD issues funding notices, grant application materials, facilitates the project selection process, and develops the CoC's overall application to HUD.

This webpage will serve as the official repository of information about the local application process and competition. Information is available on the HUD website about the Continuum of Care Program. Applicants and potential applicants for new or renewal funding are strongly encouraged to register for email updates on funding opportunities.

Competition Documents

Competition Timeline & Events

Current as of: August 5, 2024

Timeline / Competition Timeline   ...

Item	Date ↑	Time	Meeting Link	Attachment/Document	Type
CoC Application Due & Competition Closes	October 30, 2024	–	–		Deadline
Renewal Projects: CoC APR Refresher Training	August 15, 2024	1:00 - 2:00 PM	https://register.gotowebin...		Training Opportunity
FY2024 CoC Funding Competition Information Session	August 14, 2024	2:30 - 3:30 PM	https://us06web.zoom.us/j...		Training Opportunity
BoS Issues FY2024 CoC Program Competition Timeline	August 5, 2024	–	–		General
BoS Issues FY2024 CoC Competition Policies	August 5, 2024	–	–	📄	General
HUD Issues FY2024 CoC Program NOFO	July 31, 2024	–	–	📄	General
CoC Board of Directors Approve FFY2024 CoC Competition ...	July 18, 2024	–	–		General
CoC Registration for the FY2024 CoC Funding Competition	March 7, 2024	–	–	📄	Deadline

56

Other Competition Notification Channels

BoS Local Competition Components

Renewal Projects
- Performance Score Card: 75%
- RFP Response: 25%
- eSNAPS
- Any Required Documentation

First Time Renewal Projects
- RFP Response: 100%
- eSNAPS
- Any Required Documentation

New Projects
- RFP Responses: 100%
- eSNAPS
- Any Required Documentation

Project Review Committee
- Renewal projects initially ranked based on score
- Adjustments made per CoC Ranking Policy
- RFP responses scored by committee and ranked based on the CoC Ranking Policy
- Submit Final Project Ranking Recommendations to CoC Leadership for review
- CoC will inform all applicants of their status and publish final ranking, scoring and funding amounts

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

BoS Local Application Process

Renewal Projects will receive a Performance Scorecard for each eligible renewal project

- Projects were notified of the process on August 7, 2024

- The APR data used in the scorecard is run for the July 1, 2023 – June 30, 2024 timeframe

- **Applicants should attend the APR Refresher Training on Thursday, August 15th at 1:00 for help with data corrections Click Here to Register**

- Applicants have until Friday, August 16th to make data corrections in HMIS

- The BoS will pull final APRs on Monday, August 19th to populate scorecards

- Renewing agencies will receive their scorecard the week of August 26th and will have until Friday, September 6th to provide feedback

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

BoS Local Application Process

All Projects must respond to the BoS RFP

- **NEW PROCESS in 2024!** the RFP application and submission will be online
  - *No emailing multiple forms and attachments!*
- The form will automatically display questions that correspond to the application type
  - Ex: Renewal projects will see different prompts than New Projects; DV Bonus projects have additional questions required by HUD
- Each individual project must have its own RFP submission
  - All renewals
  - All new – including any expansion grants
- RFP expected to be released this week
- RFP submissions will be due by September 6, 2024

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

60

e-SNAPS Info

- eSNAPS is **now open** for project applications
  - Returning project applicants can choose to import project application responses from prior years
    - Applicants must **carefully review imported responses** to ensure accuracy and true representation of project activities
  - All projects should review the HUD Detailed Instructions that correspond with the project type
    - Renewal Project Applications
    - New Project Applications
  - BoS will review and request edits and corrections as needed

- eSNAPS Toolkits are available for technical assistance

- **DHCD Staff is UNABLE to assist with e-snaps technical issues** (passwords, user accounts, etc). Users must submit requests to HUD via email: e-snaps@HUD.gov

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Guidance & Resources

- Regularly check the BoS Funding Opportunities page for updates and information

- Review the BoS CoC Competition Policy

- Sign up for the newsletter & make sure to regularly check your spam folder so you don't miss competition related communications

- NEW: Submit all questions through the Help Desk

- Read the FY2024 NOFO: Competition Closes October 30th

- Review the HUD CoC Competition page

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Technical Assistance

Optional TA to review local RFP Process & e-snaps

- Details will be made available soon
  - Date: Throughout Competition
  - Appointment Slots link to Be Provided on BoS Funding Webpage

MARYLAND
BALANCE OF STATE
CONTINUUM OF CARE

Q&A