

Before Starting the CoC Application

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

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

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

1. The FY 2021 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2021 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2021 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

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

Attachments

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

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

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

1A. Continuum of Care (CoC) Identification

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1A-1. CoC Name and Number: AL-506 - Tuscaloosa City & County CoC

1A-2. Collaborative Applicant Name: Community Homeless Assessment Local Education and Networking Group

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Tuscaloosa

1B. Coordination and Engagement–Inclusive Structure and Participation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections VII.B.1.a.(1), VII.B.1.e., VII.B.1.n., and VII.B.1.p.	

In the chart below for the period from May 1, 2020 to April 30, 2021:

1.	select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC's coordinated entry system; or
2.	select Nonexistent if the organization does not exist in your CoC's geographic area:

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing of CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	Yes	Yes
2.	Agencies serving survivors of human trafficking	No	No	No
3.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
4.	CoC-Funded Victim Service Providers	Nonexistent	No	No
5.	CoC-Funded Youth Homeless Organizations	Nonexistent	No	No
6.	Disability Advocates	Yes	Yes	Yes
7.	Disability Service Organizations	Yes	Yes	Yes
8.	Domestic Violence Advocates	Yes	Yes	Yes
9.	EMS/Crisis Response Team(s)	Yes	No	No
10.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
11.	Hospital(s)	Yes	Yes	Yes
12.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	No	No	No
13.	Law Enforcement	Yes	Yes	Yes
14.	Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	No	No	No
15.	LGBT Service Organizations	No	No	No
16.	Local Government Staff/Officials	Yes	Yes	Yes
17.	Local Jail(s)	Yes	Yes	Yes
18.	Mental Health Service Organizations	Yes	Yes	Yes

19.	Mental Illness Advocates	Yes	Yes	Yes
20.	Non-CoC Funded Youth Homeless Organizations	No	No	No
21.	Non-CoC-Funded Victim Service Providers	Yes	Yes	Yes
22.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	No	No	No
23.	Organizations led by and serving LGBT persons	No	No	No
24.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
25.	Other homeless subpopulation advocates	Yes	Yes	Yes
26.	Public Housing Authorities	Yes	Yes	Yes
27.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
28.	Street Outreach Team(s)	Yes	Yes	Yes
29.	Substance Abuse Advocates	Yes	Yes	Yes
30.	Substance Abuse Service Organizations	Yes	Yes	Yes
31.	Youth Advocates	No	No	No
32.	Youth Service Providers	No	No	No
	Other:(limit 50 characters)			
33.				
34.				

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

1B-2.	Open Invitation for New Members.	
	NOFO Section VII.B.1.a.(2)	

	Describe in the field below how your CoC:
1.	communicated the invitation process annually to solicit new members to join the CoC;
2.	ensured effective communication with individuals with disabilities, including the availability of accessible electronic formats;
3.	conducted outreach to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join your CoC; and
4.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, persons with disabilities).

(limit 2,000 characters)

1. CHALENG membership is open to new members year round. We operate a year round each one invite one request for all board members and general population for each meeting.

2. To ensure effective communication with individuals with disabilities, including the availability of accessible electronic formats the Secretary maintains a database of all minutes, announcements, and supporting documents for distribution to the general body.

3. The month of April is the deemed the month of annual recruitment. At the April meeting, each member is asked to bring a new member. At this meeting, current members bring refreshments, prizes, and goody bags for new members.

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

(limit 2,000 characters)

1.To ensure that the COC is able to solicit and consider opinions from a broad array of organizations that have knowledge of homelessness, or an interest in preventing and ending homelessness are present at monthly meetings we petition local media outlets to post meeting announcements, using various websites made available for meeting announcements, maintaining a large email list of individuals who have attended meetings, and ask that agencies make a commitment to attend meetings, and using attendance as a criteria for the award of grant funds.

2.To ensure that we are able to communicate information during public meetings or other forums the COC Secretary circulate agendas, meeting minutes, and agency announcements before and after meetings to help participants come prepared for discussions or make additions to the agenda prior to meetings. Additionally, we follow the Robert's Rules of Order so that meetings are effective.

3.To ensure that all members are able to take into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness the floor is open for New Business during every Board and General population meeting held and minutes are kept by the secretary and circulated to the entire general body for consideration.

1B-4.	Public Notification for Proposals from Organizations Not Previously Funded.	
NOFO Section VII.B.1.a.(4)		
Describe in the field below how your CoC notified the public:		
1.	that your CoC's local competition was open and accepting project applications;	
2.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
3.	about how project applicants must submit their project applications;	
4.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
5.	how your CoC effectively communicated with individuals with disabilities, including making information accessible in electronic formats.	

(limit 2,000 characters)

1.CHALENG took the following actions to notify the public that it was accepting project application proposals and that it is open to and will consider applications

from organizations that have not previously received COC Program funding, as well as the method in which proposals should be submitted:

- August 16, 2021-The CoC emailed a request to have an invitation to apply for the FY 2021 CoC Program NOFA and application deadline posted on The City of Tuscaloosa website.
- August 18, 2021 – The CoC emailed the Board and General Body to alert all participating members of the FY2021 NOFA.
- September 20, 2021 – The CoC Project Applications deadline.

4.The process the COC uses to determine whether the project application will be included in the FY2021 COC Program Competition is as follows:

- The Board decides on a funding/ranking committee.
- The Committee reads the NOFA.
- The Committee reviews the previous ranking criteria.
- The Committee ranks the selects/rejects projects based on NOFA and selection criteria.
- The rankings are then communicated to the collaborative applicant.

5.To ensure effective communication with individuals with disabilities, including the availability of accessible electronic formats the Secretary maintains a database of all minutes, announcements, and supporting documents for distribution to the general body.

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section VII.B.1.b.	

In the chart below:

1.	select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or
2.	select Nonexistent if the organization does not exist within your CoC's geographic area.

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

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section VII.B.1.b.	

	Describe in the field below how your CoC:
1.	consulted with ESG Program recipients in planning and allocating ESG and ESG-CV funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions within your CoC's geographic area so it could be addressed in Consolidated Plan update.

(limit 2,000 characters)

The HMIS Lead serves as the primary contact for the planning and allocating of ESG funds on behalf of the CHALENG Continuum of Care Board of Directors. The Lead provides hands-on collaboration in the ESG application process by assisting in the completion of the ESG application B.1 Identification of Homeless Assistance Needs, B.2 Applicant's Strategy to Address Homeless Problems, B.3 Capacity and Coordination, B.4 Participation in a Continuum of Care, and providing a letter on behalf of the CoC regarding agencies' reporting in HMIS. The data captured in HMIS provides insights useful for identifying and addressing system level trends in the needs of the homeless population and gaps in services provided by agencies useful for planning and allocating ESG funds.

Additionally, to participate in evaluating and reporting the performance of ESG Program recipients, the CHALENG Continuum of Care Board of Directors authorizes the HMIS Lead to provide quantifiable data specific to the projects funded by ESG. The data provides an elaborate and detailed description of the performance of ESG funded projects. The data provided includes the Point In Time Count, the Housing Inventory Count, the report of Performance Measures, CAPER reports, and APR reports. The HMIS Lead helps to digest the data measures and other pertinent reports into goals, objectives, and outcomes suitable for ESG purposes.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes

4. Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5. Sought assistance from HUD by submitting AAQs or requesting technical assistance to resolve noncompliance of service providers.	Yes
6. Other. (limit 150 characters)	
The Salvation Army covers the training component of families separated and not separated. SA is funded through the AL-506 CoC.	Yes

1C-4. CoC Collaboration Related to Children and Youth–SEAs, LEAs, Local Liaisons & State Coordinators.	
NOFO Section VII.B.1.d.	

Describe in the field below:

1. how your CoC collaborates with youth education providers;
2. your CoC's formal partnerships with youth education providers;
3. how your CoC collaborates with State Education Agency (SEA) and Local Education Agency (LEA);
4. your CoC's formal partnerships with SEAs and LEAs;
5. how your CoC collaborates with school districts; and
6. your CoC's formal partnerships with school districts.

(limit 2,000 characters)

The Tuscaloosa City and County CoC has members on the board that are employed through the city and county school boards. They are available to discuss efforts to address and assist with the issues of homelessness and education. In addition to the ongoing relationship with members of the school system and McKinney-Vento liaisons, the CoC has a board member that attends State Education Agencies (SEA) and Local Education Agencies (LEA) trainings. Through the participation in state provided trainings and informational meetings, the CoC is granted technical assistance and guidance that helps impact decision making, policies, approach, and efforts that helps individuals and families with educational components, access, services, and support.

The CoC maintains seats on the board for members of the city and county school system's presence. The bylaws requires that positions be filled by school board members in the event of vacancy.

1C-4a. CoC Collaboration Related to Children and Youth–Educational Services–Informing Individuals and Families Experiencing Homelessness about Eligibility.	
NOFO Section VII.B.1.d.	

Describe in the field below written policies and procedures your CoC adopted to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,000 characters)

There are active members of the city and county school system in the Tuscaloosa City and County Continuum of Care. The members attend meetings and are well-informed of school matters that assist with identifying students and families that are experiencing homelessness or are in need of educational services. The active members of the staff then use their occupational duties and skill set provide or educational insight. This also ensures that information remains current.

Membership responsibilities are outlined in Article II- Mission and Purpose;
Section 2: Purpose in the WACH Bylaws:

To actively participate in advocacy and/or educational initiatives or services, while working collaboratively with the school systems through initiatives designed to address barriers related to the overall success of the homeless children and youth.

In accordance to the requirements of the U.S. Department of Education, a McKinney Vento liaison is housed on the board. The liaison's general duties are to:

- coordinate with the CoC that assists with ensuring school enrollment so they may have equal opportunity
- verify the eligibility for additional supportive services and provide a letter confirming eligibility
- informing parents/guardian or youth of eligible and appropriate services, including transportation and other educational needs
- review educational rights with parents of homeless student(s), assisting students in obtaining referrals to health care, dental, mental health, substance abuse, housing, and other services
- ensure access to academic tutoring and counseling services
- facilitate problem solving conversations to address disagreements and reach acceptable solutions
- make recommendations or referrals to and forming linkages to supportive services

1C-4b.	CoC Collaboration Related to Children and Youth–Educational Services–Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section VII.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

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

You must select a response for elements 1 through 9 in question 1C-4b.

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors--Annual Training--Best Practices.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

1.	Project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses safety and best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,000 characters)

The CHALENG Continuum of Care provides annual training to CoC projects and coordinated entry staff that address best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking during its October meeting. The training is planned and arranged by the local domestic violence service provider staff.

1C-5a.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors--Using De-identified Aggregate Data.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking survivors.

(limit 2,000 characters)

To assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking the CHALENG Continuum of Care uses the following data and resources:

- Open dialogue with The City of Tuscaloosa law enforcement officer responsible for crimes of domestic violence, dating violence, sexual assault, and stalking, Lieutenant Beam;
- Reports and predictions pertaining to crimes of domestic violence, dating violence, sexual assault, and stalking from the US Department of Justice;
- Reports of calls logged in to the 24-hour domestic violence crisis hotline serving the area;
- Reports from the local dv provider taken directly from the comparable data-base, Osnium (including the number of clients served, demographics, client outcomes, performance review, and perpetrator demographics) and;
- ESG planning, evaluation and application data.

1C-5b.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors--Coordinated Assessment--Safety, Planning, and Confidentiality Protocols.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC's coordinated entry system protocols incorporate trauma-informed, victim-centered approaches while maximizing client choice for housing and services that:

1.	prioritize safety;
2.	use emergency transfer plan; and
3.	ensure confidentiality.

(limit 2,000 characters)

The CHALENG Continuum of Care has protocol to address the unique needs of persons, and their families, fleeing domestic violence by prioritizing the safety and confidentiality of program participants. Once a victim of domestic violence accesses the central access point, intake personnel relies on previous training to decrease vulnerability and increase control over the intake and assessment process. The client can choose to accept safe transport to the local domestic violence service provider, transport to an alternate location out of the service area, or receive services at the location where they present. It is policy to recommend that victims access victim specific services because of the added security measures. Regardless of their choice, the coordinated entry plan ensures no family or individual is turned away based on their status as a family or individual fleeing domestic violence. The central access point is equipped to shelter and provide triage services while victims consider their desired course of action. The central access point has confidential space to meet with DV providers and law enforcement personnel. The facility has secure offices, locked file cabinets, and password protected computers to help ensure confidentiality. Case management and rapid rehousing services help survivors access the legal system and reclaim their independence from their abuser(s). The VI-SpDAT is administered by staff and all survivors receive prioritized services as individuals and households vulnerable to victimization, including physical assault or engaging in trafficking or sex work, the second priority for services in this continuum of care.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender–Anti-Discrimination Policy and Training.	
	NOFO Section VII.B.1.f.	

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBT individuals and families receive supportive services, shelter, and housing free from discrimination?	No
2.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	No
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

1C-7.	Public Housing Agencies within Your CoC's Geographic Area–New Admissions–General/Limited Preference–Moving On Strategy. You Must Upload an Attachment(s) to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.g.	

Enter information in the chart below for the two largest PHAs highlighted in gray on the CoC-PHA Crosswalk Report at <https://files.hudexchange.info/resources/documents/FY-2020-CoC-PHA-Crosswalk-Report.pdf> or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

	Enter the Percent of New Admissions into	Does the PHA have a	Does the PHA have a
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Public Housing Agency Name	Public Housing and Housing Choice Voucher Program During FY 2020 who were experiencing homelessness at entry	General or Limited Homeless Preference?	Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Tuscaloosa Housing Authority	89%	No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section VII.B.1.g.	

Describe in the field below:

1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.

(limit 2,000 characters)

The CoC has invited each PHA to participate in CoC Board level activities and opened CoC training opportunities to include the PHA staff. This is done in an effort to change the culture of the local PHA to one that supports the efforts of the CoC.

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

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

1C-7c.	Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
	NOFO Section VII.B.1.g.	

Does your CoC include PHA-funded units in the CoC's coordinated entry process?	No
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1C-7c.1.	Method for Including PHA-Funded Units in Your CoC's Coordinated Entry System.	
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NOFO Section VII.B.1.g.

If you selected yes in question 1C-7c., describe in the field below:

1. how your CoC includes the units in its Coordinated Entry process; and
2. whether your CoC's practices are formalized in written agreements with the PHA, e.g., MOUs.

(limit 2,000 characters)

N/A

1C-7d. Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.

NOFO Section VII.B.1.g.

Did your CoC coordinate with a PHA(s) to submit a joint application(s) for funding of projects serving families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other non-federal programs)?

No

1C-7d.1. CoC and PHA Joint Application—Experience—Benefits.

NOFO Section VII.B.1.g.

If you selected yes to question 1C-7d, describe in the field below:

1. the type of joint project applied for;
2. whether the application was approved; and
3. how your CoC and families experiencing homelessness benefited from the coordination.

(limit 2,000 characters)

N/A

1C-7e. Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including American Rescue Plan Vouchers.

NOFO Section VII.B.1.g.

Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?

No

1C-7e.1. Coordinating with PHA(s) to Administer Emergency Housing Voucher (EHV) Program—List of PHAs with MOUs.

Not Scored—For Information Only

Did your CoC enter into a Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?

No

If you select yes, you must use the list feature below to enter the name of every PHA your CoC has entered into a MOU with to administer the Emergency Housing Voucher Program.

PHA
This list contains no items

1C. Coordination and Engagement–Coordination with Federal, State, Local, Private, and Other Organiza

1C-8.	Discharge Planning Coordination.	
	NOFO Section VII.B.1.h.	

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

1. Foster Care	No
2. Health Care	No
3. Mental Health Care	No
4. Correctional Facilities	No

1C-9.	Housing First–Lowering Barriers to Entry.	
	NOFO Section VII.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition.	4
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects your CoC is applying for in FY 2021 CoC Program Competition that have adopted the Housing First approach.	0
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2021 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	0%

1C-9a.	Housing First–Project Evaluation.	
	NOFO Section VII.B.1.i.	

Describe in the field below how your CoC regularly evaluates projects to ensure those that commit to using a Housing First approach are prioritizing rapid placement and stabilization in permanent housing and are not requiring service participation or preconditions of program participants.

(limit 2,000 characters)

The CoC uses the client-centered case management approach.
 1st: We identify our clients need(s).
 2nd: We build their strength and goals.
 3rd: We partnership with our clients to motivate them, enhance their skills, and

find resources to assist with the process and for them to meet their short and long term goals.

Depending on the need and ability to meet the qualifications decipheres the priority. Allocation of resources will be prioritized based on their status chronically homeless and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

1C-9b.	Housing First–Veterans.	
	Not Scored–For Information Only	

Does your CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?	Yes
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1C-10.	Street Outreach–Scope.	
	NOFO Section VII.B.1.j.	

	Describe in the field below:
1.	your CoC’s street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,000 characters)

1. Salvation Army uses ESG funds to conduct street outreach activities that include meeting homeless where they are with resources, inviting them into shelter, and assisting them with accessing mainstream benefits, local charities, and basic necessities.

2. There are no areas excluded from outreach within the Tuscaloosa City and County area, but efforts are focused on places where homeless are known to camp or visit.

3. There is a part-time staff member who plans 20 hours a week of outreach activity and conducts monthly community-wide events.

4. It is a combined effort by all servicing agencies to identify homeless and locate them through an precise communication tree. We provide updates in real time by telephone and email and the outreach services for the Salvation Army, local VA, and other agencies meet the homeless in their space to offer services.

1C-11.	Criminalization of Homelessness.	
	NOFO Section VII.B.1.k.	

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

1.	Engaged/educated local policymakers	Yes
2.	Engaged/educated law enforcement	Yes
3.	Engaged/educated local business leaders	Yes
4.	Implemented communitywide plans	No
5.	Other:(limit 500 characters)	
		No

1C-12.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC).	
	NOFO Section VII.B.1.l.	

	2020	2021
Enter the total number of RRH beds available to serve all populations as reported in the HIC—only enter bed data for projects that have an inventory type of “Current.”	0	0

1C-13.	Mainstream Benefits and Other Assistance–Healthcare–Enrollment/Effective Utilization.	
	NOFO Section VII.B.1.m.	

Indicate in the chart below whether your CoC assists persons experiencing homelessness with enrolling in health insurance and effectively using Medicaid and other benefits.

	Type of Health Care	Assist with Enrollment?	Assist with Utilization of Benefits?
1.	Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	No
2.	Private Insurers	Yes	Yes
3.	Nonprofit, Philanthropic	Yes	Yes
4.	Other (limit 150 characters)		

1C-13a.	Mainstream Benefits and Other Assistance–Information and Training.	
	NOFO Section VII.B.1.m	

Describe in the field below how your CoC provides information and training to CoC Program-funded projects by:

1.	systemically providing up to date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within your CoC's geographic area;
2.	communicating information about available mainstream resources and other assistance and how often your CoC communicates this information;
3.	working with projects to collaborate with healthcare organizations to assist program participants with enrolling in health insurance; and
4.	providing assistance with the effective use of Medicaid and other benefits.

(limit 2,000 characters)

1. The local Department of Human Resources sends a representative to the CoC meetings to make announcements and share information.
2. We rely on members who attend meetings to make sure announcements and meeting minutes are available for their agencies.
3. For many of our providers it is a regularly assigned duty that is included in the job description and annual reports.
4. None

1C-14.	Centralized or Coordinated Entry System–Assessment Tool. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC's coordinated entry system:

1.	covers 100 percent of your CoC's geographic area;
2.	reaches people who are least likely to apply for homeless assistance in the absence of special outreach;
3.	prioritizes people most in need of assistance; and
4.	ensures people most in need of assistance receive assistance in a timely manner.

(limit 2,000 characters)

To demonstrate the coordinated entry system covers the entire CoC geographic region, the following quote is found on page 3 of the coordinated entry plan: "CHALENG serves the entire geographic region of Tuscaloosa County within the State of Alabama (Appendix B)."

To demonstrate the coordinated entry system reaches people who are least likely to apply for homeless assistance in the absence of special outreach the COC has implemented and promotes the central access point, The Salvation Army, as a one-stop for connection to all social service needs. We have three 24-hour call centers that are equipped to connect residents with access to homelessness services. Our location is close to the county's only Greyhound bus station. The central access point is located next to a stop for the Tuscaloosa Trolley; the county's only mass transit service. We maintain a close relationship with the county and city school district's homeless liaisons, food banks, thrift stores, local institutions of higher education, landlords, and city and county elected officials.

The CoC voted to rank vulnerability of homeless populations as follows:

vulnerability to illness or death; vulnerability to victimization, including physical assault or engaging in trafficking or sex work; significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing; high utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet

basic needs; the extent to which people, especially youth and children, are unsheltered; and the risk of continued or homelessness. These priorities are assigned in addition to a VI-SPDAT score to drive decisions to allocate resources

1C-15.	Promoting Racial Equity in Homelessness–Assessing Racial Disparities.	
	NOFO Section VII.B.1.o.	

Did your CoC conduct an assessment of whether disparities in the provision or outcome of homeless assistance exists within the last 3 years?	No
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1C-15a.	Racial Disparities Assessment Results.	
	NOFO Section VII.B.1.o.	

Select yes or no in the chart below to indicate the findings from your CoC's most recent racial disparities assessment.

1.	People of different races or ethnicities are more likely to receive homeless assistance.	No
2.	People of different races or ethnicities are less likely to receive homeless assistance.	No
3.	People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	No
4.	People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	No
5.	There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	No
6.	The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	No

1C-15b.	Strategies to Address Racial Disparities.	
	NOFO Section VII.B.1.o.	

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	No
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	No
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	No
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	No
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	No

7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	No
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	No
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	No
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	No
	Other:(limit 500 characters)	
12.		

1C-15c.	Promoting Racial Equity in Homelessness Beyond Areas Identified in Racial Disparity Assessment.	
	NOFO Section VII.B.1.o.	

Describe in the field below the steps your CoC and homeless providers have taken to improve racial equity in the provision and outcomes of assistance beyond just those areas identified in the racial disparity assessment.

(limit 2,000 characters)

The CoC did not perform a racial disparity assessment, however, the Tuscaloosa City and County Continuum of Care is open to identifying racial equity and improving equity of services.

1C-16.	Persons with Lived Experience–Active CoC Participation.	
	NOFO Section VII.B.1.p.	

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the five categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included and provide input that is incorporated in the local planning process.	0	0
2.	Review and recommend revisions to local policies addressing homelessness related to coordinated entry, services, and housing.	0	0
3.	Participate on CoC committees, subcommittees, or workgroups.	0	0
4.	Included in the decisionmaking processes related to addressing homelessness.	0	0
5.	Included in the development or revision of your CoC's local competition rating factors.	0	0

1C-17.	Promoting Volunteerism and Community Service.	
	NOFO Section VII.B.1.r.	

Select yes or no in the chart below to indicate steps your CoC has taken to promote and support community engagement among people experiencing homelessness in the CoC's geographic area:

1.	The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	Yes
2.	The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery, data entry).	Yes
3.	The CoC works with organizations to create volunteer opportunities for program participants.	Yes
4.	The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	Yes
5.	Provider organizations within the CoC have incentives for employment and/or volunteerism.	Yes
6.	Other:(limit 500 characters)	

1D. Addressing COVID-19 in the CoC's Geographic Area

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1D-1.	Safety Protocols Implemented to Address Immediate Needs of People Experiencing Unsheltered, Congregate Emergency Shelter, Transitional Housing Homelessness.	
NOFO Section VII.B.1.q.		
Describe in the field below protocols your CoC implemented during the COVID-19 pandemic to address immediate safety needs for individuals and families living in:		
1.	unsheltered situations;	
2.	congregate emergency shelters; and	
3.	transitional housing.	

(limit 2,000 characters)

The CoC had case managers on site to discuss the implementation of safety measures. The facilities provided regulations on the implementation of physical safety. The shelters required distancing beds to be at least six feet apart, updating bed capacity, identifying a space or room where participants could temporarily isolate or quarantine as needed. There was an implementation of rules for instructions on the importance of wearing masks, cleanliness, and social distancing. The CoC addressed barriers in communication and disability associated with communicating COVID-19 information with those experiencing homelessness. The intake process for intake were modified; There were COVID screening questions conducted, COVID tests were available, and temperatures were checked at the door upon entry. CoC service providers' conducted health screenings for COVID-19 symptoms to identify any best accommodate sick individuals. Food distribution practices were reinvented to continue to serve those experiencing the risk of hunger. One of our local agencies sought to provide additional hygiene/sanitation supplies, but installation has been delayed due to backorder. Washing and disinfecting clothes in appropriate temperature water as well adhering to proper hygiene can prevent the spread of COVID-19 by lowering the risk of indirect transmission.

The CoC also ensure that sufficient resources and education were made available to agencies, along with homeless patrons. Funds provided assistance to immediately address safety needs. These funds paid for PPE, cleaning supplies, and for staff's hazard pay. Our CoC delivered PPE directly to providers for unsheltered persons, ES, and TH.

1D-2.	Improving Readiness for Future Public Health Emergencies.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC improved readiness for future public health emergencies.

(limit 2,000 characters)

The COVID-19 pandemic taught our CoC the importance of having strengthened partnerships and improve readiness for future public health emergencies. The CoC has a running list of resources that is available. The guide covers food assistance, utility assistance, clothing/household items, shelters, housing, health care/mental services, dental assistance, legal services, geriatric services, employment assistance, education programs, child services, and veteran services. The list houses updated contact information and provides a list of partner agencies in the community that can provide support in general needs and in emergency response. In the event of COVID-19, the CoC and local agencies and community partners have had to lean on each other heavily, which has strengthen our relationships and have helped us gain more understanding in each other's purpose and the resources or services that each entity provides.

The continuum worked with agencies to develop infectious disease policies to incorporate in the operational policies and procedures to ensure readiness for future public health emergencies.

All members of the CoC have learned the preventative measures that are necessary in reducing the effects of a disaster along with the importance of providing a speedy response. Our goal is to actively stay prepared, so we can brace the impact when a crisis occurs.

1D-3.	CoC Coordination to Distribute ESG Cares Act (ESG-CV) Funds.	
	NOFO Section VII.B.1.q	

Describe in the field below how your CoC coordinated with ESG-CV recipients to distribute funds to address:

1.	safety measures;
2.	housing assistance;
3.	eviction prevention;
4.	healthcare supplies; and
5.	sanitary supplies.

(limit 2,000 characters)

The Tuscaloosa City and County CoC worked with the ESG-CV recipients to synchronize the utilization of ESG-CV funds to address and prevent homelessness in response to the COVID-19 pandemic. Collaborative entities came together to maximize available resources. ESG-CV funding was used to provide homelessness prevention, rapid re-housing, emergency shelter, street outreach, and other expenditures. These items include: eviction prevention assistance to pay for rental arrears and/or past due utility bills, operations, hand washing station/portable bathrooms, administration costs, shelter costs, and

other needs. There were updates provided on the utilization of the ESG-CV funding and its benefits to the CoC quarterly.

To prepare for and respond to COVID-19 PPE equipment, food, medical services, employment, etc. were provided to help prevent infection.

1D-4.	CoC Coordination with Mainstream Health.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC coordinated with mainstream health (e.g., local and state health agencies, hospitals) during the COVID-19 pandemic to:

1.	decrease the spread of COVID-19; and
2.	ensure safety measures were implemented (e.g., social distancing, hand washing/sanitizing, masks).

(limit 2,000 characters)

The Tuscaloosa City and County CoC maintained regular communication with the City of Tuscaloosa and Alabama Department of Public Health to convey information to patrons that was relevant to COVID-19. To ensure that persons who have been exposed or are suspected or confirmed to be COVID-19 positive, patrons were provided with necessary precautions. Isolation sites were provided for those confirmed to be positive for COVID-19. Quarantine sites were provide for those that were awaiting results or had been exposed. Behavioral health support was offered to individuals and families at shelter as well.

The CoC and mainstream health agencies worked close with providing guidelines and best safety practices to encourage the continuation of services that were provided to the homeless daily despite the spread of COVID.

1D-5.	Communicating Information to Homeless Service Providers.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC communicated information to homeless service providers during the COVID-19 pandemic on:

1.	safety measures;
2.	changing local restrictions; and
3.	vaccine implementation.

(limit 2,000 characters)

To ensure safety and to minimize the exposure to COVID, the CoC focused on email-based communication where additional safety measures, local restrictions, up-to-date information, and announcements were further detailed. Video conferencing via Zoom and Microsoft Teams were another success when meetings were conducted to provide the most current and relevant information, along with the traditional phone to provide guidance to providers on an as needed basis. Case managers provided a presence when street outreach was performed. They assisted heavily in best implementation of safety measures. The continuum utilized it's Facebook page to provided updates of safety measures, City of Tuscaloosa updates on restrictions, and vaccine implementation.

1D-6.	Identifying Eligible Persons Experiencing Homelessness for COVID-19 Vaccination.	
	NOFO Section VII.B.1.q.	

Describe in the field below how your CoC identified eligible individuals and families experiencing homelessness for COVID-19 vaccination based on local protocol.

(limit 2,000 characters)

While in attendance of the emergency shelters, individuals and families were educated about the safety and effectiveness of vaccinations. Vaccinations were recommended to maintain a healthy environment and operations, to lower the risk of spread, prepare those that were sick or affected with COVID-19, and to support coping and resilience. All shelters were in compliance of the Centers for Disease Control and Prevention (CDC).

Other participating agencies providing street outreach related services communicated the aforementioned information to their clients as well.

1D-7.	Addressing Possible Increases in Domestic Violence.	
	NOFO Section VII.B.1.e.	

Describe in the field below how your CoC addressed possible increases in domestic violence calls for assistance due to requirements to stay at home, increased unemployment, etc. during the COVID-19 pandemic.

(limit 2,000 characters)

Resources were made available for victims who were experiencing domestic violence during the COVID-19 pandemic. The CoC was able to recommend Turning Point to all victims of abuse- men, women, and children. Turning Point now has a nine-county coverage area, serving Bibb, Fayette, Greene, Hale, Lamar, Marengo, Pickens, Sumter, and Tuscaloosa counties in West Alabama. Victims were also encouraged to contact our local police departments and seek help from task forces and hotlines, such as the Domestic Violence Task Force of Tuscaloosa County and the National Domestic Violence hotline, whom does offer services via online chat, email, phone, or texting, making it easier for victims to seek out help while at home.

1D-8.	Adjusting Centralized or Coordinated Entry System.	
	NOFO Section VII.B.1.n.	

Describe in the field below how your CoC adjusted its coordinated entry system to account for rapid changes related to the onset and continuation of the COVID-19 pandemic.

(limit 2,000 characters)

The CoC actively evaluates and adjusts its coordinated entry policy due to evolving information and circumstances of the COVID-19 pandemic. Our coordinated entry systems were used to review intake, assessment, and service approaches that impacted patrons access to services and housing. The enhancements made gave the CoC the ability to evaluate, update, and implement changes faster. During the pandemic new, urgent needs shifted the priority of needs in the community. New resources were granted and expanded as well. It was vital to make changes to the coordinated entry prioritization to support and respond to COVID-19.

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

1E-1.	Announcement of 30-Day Local Competition Deadline–Advance Public Notice of How Your CoC Would Review, Rank, and Select Projects. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.a. and 2.g.	

1.	Enter the date your CoC published the 30-day submission deadline for project applications for your CoC's local competition.	08/30/2021
2.	Enter the date your CoC publicly posted its local scoring and rating criteria, including point values, in advance of the local review and ranking process.	10/06/2021

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. You Must Upload an Attachment to the 4B. Attachments Screen. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria listed below.	
	NOFO Section VII.B.2.a., 2.b., 2.c., and 2.d.	

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

1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Used data from a comparable database to score projects submitted by victim service providers.	Yes
5.	Used objective criteria to evaluate how projects submitted by victim service providers improved safety for the population they serve.	Yes
6.	Used a specific method for evaluating projects based on the CoC's analysis of rapid returns to permanent housing.	Yes

1E-2a.	Project Review and Ranking Process–Addressing Severity of Needs and Vulnerabilities.	
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NOFO Section VII.B.2.d.

Describe in the field below how your CoC reviewed, scored, and selected projects based on:

1.	the specific severity of needs and vulnerabilities your CoC considered when ranking and selecting projects; and
2.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,000 characters)

1. Based on the data collected in the annual PIT, it is fitting this continuum consider increasing funding to projects equipped to provide substance abuse services and people who have successfully fled domestic violence.

2. The ranking committee is provided detailed account of the sub-populations of homeless reported during the annual PIT and feedback from service providers. They have discretion and an expectation to propose changes in ranking criteria based on the current trends in the needs and circumstances of the homeless.

1E-3.	Promoting Racial Equity in the Local Review and Ranking Process.	
	NOFO Section VII.B.2.e.	

Describe in the field below how your CoC:

1.	obtained input and included persons of different races, particularly those over-represented in the local homelessness population, when determining the rating factors used to review project applications;
2.	included persons of different races, particularly those over-represented in the local homelessness population, in the review, selection, and ranking process;
3.	rated and ranked projects based on the degree to which their program participants mirror the homeless population demographics (e.g., considers how a project promotes racial equity where individuals and families of different races are over-represented).

(limit 2,000 characters)

The CoC's funding program committee is comprised of three, diverse board members that have general knowledge of racial equity and serve in capacities where they consult or advise patrons to promote equitable outcomes through strategy. The members take performance metrics into consideration that evaluates differences between access and outcomes for the different races and ethnicities into consideration while performing the review and ranking process. The committee also establishes and oversees the process used to evaluate the performance of CoC agencies.

The members are diverse, but they also serve the over-represented population in our community.

1E-4.	Reallocation—Reviewing Performance of Existing Projects. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Describe in the field below:

1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any projects through this process during your local competition this year;

3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year;
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable; and
5.	how your CoC communicated the reallocation process to project applicants.

(limit 2,000 characters)

Reallocation is triggered if a project is consistently under performing throughout the program year.

Under performing is defined as: large amount of funds being recaptured, low spending expenditures, clients not accessing services, and/or inadequate project reporting. When this happens, remediation is triggered. Essentially, remediation is the first approach. The CoC Board will meet with the leadership of the agency to address any deficiencies. The Board will conduct a review of under performing projects and determine whether there is an operational issue within the agency causing a barrier to obtain services or if the demand for the particular project has decreased in the community.

Based on the determination: If the problem is operational, the CoC board will attempt to go through remediation to relieve the issues. If the board is unable to alleviate the issue(s) and the agency is not willing to come to agreement, reallocation will be considered.

If funds are reallocated because of an organization's deficiency, the CoC will send out a notice to solicit for another agency to carry out the project. However, if the issue is because our community no longer has need or demand of services, the CoC will create a Community Needs Assessment. Based on the findings of the assessment, the CoC will release a reallocation notice to the continuum of the availability of funds, along with priority projects in accordance with CoC funding requirements and the NOFO.

We did not identify any projects through this process that were at risk for reallocation. Therefore, it was unnecessary to communicate the reallocation process to project applicants.

1E-4a.	Reallocation Between FY 2016 and FY 2021. We use the response to this question as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criterion below.	
	NOFO Section VII.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2016 and FY 2021?	No
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1E-5.	Projects Rejected/Reduced—Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen if You Select Yes.	
	NOFO Section VII.B.2.g.	

1.	Did your CoC reject or reduce any project application(s)?	No
2.	If you selected yes, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps.	

1E-5a.	Projects Accepted–Public Posting. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps.	10/06/2021
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1E-6.	Web Posting of CoC-Approved Consolidated Application. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.2.g.	

Enter the date your CoC's Consolidated Application was posted on the CoC's website or affiliate's website—which included: 1. the CoC Application; 2. Priority Listings; and 3. all projects accepted, ranked where required, or rejected.	11/14/2021
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2A. Homeless Management Information System (HMIS) Implementation

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

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

Enter the date your CoC submitted its 2021 HIC data into HDX.	05/17/2021
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2A-4.	HMIS Implementation—Comparable Database for DV.	
	NOFO Section VII.B.3.b.	

Describe in the field below actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC:

1.	have a comparable database that collects the same data elements required in the HUD-published 2020 HMIS Data Standards; and
2.	submit de-identified aggregated system performance measures data for each project in the comparable database to your CoC and HMIS lead.

(limit 2,000 characters)

The CoC works closely with our DV provider to ensure that they are implementing data collection in a comparable database. The local DV provider is currently utilizing Osnium, which is a database that has been verified by the HMIS Lead of the CoC to provide the necessary collection of data to provide the required reports for HUD and other funding agencies. The HMIS Lead annually reviews reporting from this system to include reporting generated for the CAPER. In addition, Osnium regularly updates its software to adhere to HUD updates.

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

Enter 2021 HIC and HMIS data in the chart below by project type:

Project Type	Total Beds 2021 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
1. Emergency Shelter (ES) beds	91	16	75	100.00%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	8	0	8	100.00%
4. Rapid Re-Housing (RRH) beds	0	0	0	
5. Permanent Supportive Housing	285	0	285	100.00%
6. Other Permanent Housing (OPH)	0	0	0	

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

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

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

(limit 2,000 characters)

N/A

2A-5b.	Bed Coverage Rate in Comparable Databases.	
	NOFO Section VII.B.3.c.	

Enter the percentage of beds covered in comparable databases in your CoC's geographic area.	100.00%
---	---------

2A-5b.1.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Question 2A-5b.	
	NOFO Section VII.B.3.c.	

If the bed coverage rate entered in question 2A-5b. is 84.99 percent or less, describe in the field below:

1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent; and
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,000 characters)

N/A

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section VII.B.3.d.	

Did your CoC submit LSA data to HUD in HDX 2.0 by January 15, 2021, 8 p.m. EST?	Yes
---	-----

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

2B-1.	Sheltered and Unsheltered PIT Count—Commitment for Calendar Year 2022	
	NOFO Section VII.B.4.b.	

Does your CoC commit to conducting a sheltered and unsheltered PIT count in Calendar Year 2022?	Yes
---	-----

2B-2.	Unsheltered Youth PIT Count—Commitment for Calendar Year 2022.	
	NOFO Section VII.B.4.b.	

Does your CoC commit to implementing an unsheltered youth PIT count in Calendar Year 2022 that includes consultation and participation from youth serving organizations and youth with lived experience?	Yes
--	-----

2C. System Performance

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
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- 24 CFR part 578

2C-1.	Reduction in the Number of First Time Homeless—Risk Factors.	
	NOFO Section VII.B.5.b.	

Describe in the field below:

1.	how your CoC determined which risk factors your CoC uses to identify persons becoming homeless for the first time;
2.	how your CoC addresses individuals and families at risk of becoming homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time or to end homelessness for individuals and families.

(limit 2,000 characters)

We used data and informed opinions from qualified staff collected from agencies within the coordinated entry system and CoC membership to determine which risk factors contribute to individuals and families becoming homeless for the first time.

Our goal is to provide families receiving homelessness prevention funds with more assistance over time, allowing assistance to taper rather than end abruptly. Also, we are leveraging the area's financial literacy resources to provide greater support to families that need coaching. Also, we have made application to local officials to provide funds for identified gaps in services for ESG over income families.

The CoC Board President is responsible for the effort.

2C-2.	Length of Time Homeless—Strategy to Reduce.	
	NOFO Section VII.B.5.c.	

Describe in the field below:

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

(limit 2,000 characters)

1. To reduce the length of time persons remain homeless: participate in affordable housing development by lobbying for preference to chronically homeless; leveraging resources to more intensely address barriers to housing, prioritizing chronically homeless in the area's vulnerability index; and building better relationships with landlords to overcome reluctance to rent to families with poor rental histories and criminal records.

2. HMIS is the key factor to identify individuals and families with the longest lengths of time homeless. We are able to see the history of services provided by HMIS participating agencies.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing.	
	NOFO Section VII.B.5.d.	

Describe in the field below how your CoC will increase the rate that individuals and persons in families residing in:

1.	emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations; and
2.	permanent housing projects retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

The CoC's strategy to increase exits to permanent housing (PH) from emergency shelters, transitional housing and rapid re-housing include using a Housing First approach. With our Housing First approach we:

- Develop a housing plan
- Provide housing services
- Address the identified barriers
- Acquiring all necessary documentation needed to fulfill the process.

To reduce the length of time persons remain homeless there is a participation in affordable housing development by lobbying for preference to chronically homeless. Resources are leveraged to more intensely address barriers to housing. Prioritization of the chronically homeless in the area's vulnerability index is a factor. Relationships with landlords were built and strengthened to overcome reluctance to rent to families with poor rental histories and criminal records.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section VII.B.5.e.	

Describe in the field below:

1.	how your CoC identifies individuals and families who return to homelessness;
2.	your CoC's strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,000 characters)

1.) The CoC conducts a standardized assessment of all homeless individuals who enter the system of care. This helps to document an individual's or family's

strengths and weaknesses.

2.) Our strategy to reduce the rate of additional returns is to provide intensive follow-up services, linkage to mainstream resources, and monitor the families placement over a 6-12 month period.

3. The Social Services Director of the Central Access Point; the Salvation Army.

2C-5.	Increasing Employment Cash Income-Strategy.	
	NOFO Section VII.B.5.f.	

Describe in the field below:

1.	your CoC's strategy to increase employment income;
2.	how your CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase income from employment.

(limit 2,000 characters)

1. We provide linkage to mainstream services and try to remove any barriers like transportation, telephone, or child care issues from the clients who need services or work availability.

2. The CoC coordinates job fairs and placement services for the clients of agencies that participate in the CoC.

3. The Alabama State employment is an active participant with the CoC and are the leaders in networking with service providers to improve the CoC's strategy to increase jobs and income from employment.

2C-5a.	Increasing Employment Cash Income–Workforce Development–Education–Training.	
	NOFO Section VII.B.5.f.	

Describe in the field below how your CoC:

1.	promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2.	is working with public and private organizations to provide meaningful education and training, on-the-job training, internships, and employment opportunities for program participants.

(limit 2,000 characters)

1. We provide linkage to mainstream services and try to remove any barriers like transportation, telephone, or child care issues from the clients who need services or work availability.

2. The CoC coordinates job fairs and placement services for the clients of agencies that participate in the CoC.

3. The Alabama State employment is an active participant with the COC and are the leaders in networking with service providers to improve the CoC's strategy to increase jobs and income from employment.

2C-5b.	Increasing Non-employment Cash Income.	
	NOFO Section VII.B.5.f.	

	Describe in the field below:
1.	your CoC's strategy to increase non-employment cash income;
2.	your CoC's strategy to increase access to non-employment cash sources; and
3.	provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.

(limit 2,000 characters)

1. We provide linkage to mainstream services and try to remove any barriers like transportation, telephone, or child care issues from the clients who need services.
2. We identify vulnerabilities through the coordinated assessment and match the vulnerabilities with community, state and Federal resources.
3. The Central Access point is the Salvation Army and they are a main provider of linkage services.

3A. Coordination with Housing and Healthcare Bonus Points

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3A-1.	New PH-PSH/PH-RRH Project—Leveraging Housing Resources.	
	NOFO Section VII.B.6.a.	

Is your CoC applying for a new PSH or RRH project(s) that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
---	----

3A-1a.	New PH-PSH/PH-RRH Project—Leveraging Housing Commitment. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.a.	

Select yes or no in the chart below to indicate the organization(s) that provided the subsidies or subsidized housing units for the proposed new PH-PSH or PH-RRH project(s).

1.	Private organizations	No
2.	State or local government	No
3.	Public Housing Agencies, including use of a set aside or limited preference	No
4.	Faith-based organizations	No
5.	Federal programs other than the CoC or ESG Programs	No

3A-2.	New PSH/RRH Project—Leveraging Healthcare Resources.	
	NOFO Section VII.B.6.b.	

Is your CoC applying for a new PSH or RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	No
--	----

3A-2a.	Formal Written Agreements–Value of Commitment–Project Restrictions. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.B.6.b.	

1.	Did your CoC obtain a formal written agreement that includes: (a) the project name; (b) value of the commitment; and (c) specific dates that healthcare resources will be provided (e.g., 1-year, term of grant, etc.)?	No
2.	Is project eligibility for program participants in the new PH-PSH or PH-RRH project based on CoC Program fair housing requirements and not restricted by the health care service provider?	No

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

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

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

3B. New Projects With Rehabilitation/New Construction Costs

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

3B-1.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.r.	

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

3B-2.	Rehabilitation/New Construction Costs—New Projects.	
	NOFO Section VII.B.1.s.	

	If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:
1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD's implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,000 characters)

N/A

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

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

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

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

3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. You Must Upload an Attachment to the 4B. Attachments Screen.	
	NOFO Section VII.C.	

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

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

(limit 2,000 characters)

N/A

4A. DV Bonus Application

To help you complete the CoC Application, HUD published resources at https://www.hud.gov/program_offices/comm_planning/coc/competition, including:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2021 Continuum of Care Program Competition
- FY 2021 CoC Application Detailed Instructions—essential in helping you maximize your CoC Application score by giving specific guidance on how to respond to many questions and providing specific information about attachments you must upload
- 24 CFR part 578

4A-1.	New DV Bonus Project Applications.	
	NOFO Section II.B.11.e.	

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

4B. Attachments Screen For All Application Questions

We prefer that you use PDF files, though other file types are supported. Please only use zip files if necessary.

Attachments must match the questions they are associated with.

Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.

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

Document Type	Required?	Document Description	Date Attached
1C-14. CE Assessment Tool	Yes	Coordinated Asses...	11/09/2021
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No	FY2021 Crosswalk	11/16/2021
1E-1. Local Competition Announcement	Yes	Local Competition...	11/16/2021
1E-2. Project Review and Selection Process	Yes	Review and Select...	11/09/2021
1E-5. Public Posting—Projects Rejected-Reduced	Yes	Projects Rejected...	11/16/2021
1E-5a. Public Posting—Projects Accepted	Yes	Public Posting—Pr...	11/16/2021
1E-6. Web Posting—CoC-Approved Consolidated Application	Yes		
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No		
3C-2. Project List for Other Federal Statutes	No		

Attachment Details

Document Description: Coordinated Assessment Policies and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: FY2021 Crosswalk

Attachment Details

Document Description: Local Competition Announcement

Attachment Details

Document Description: Review and Selection Process

Attachment Details

Document Description: Projects Rejected-Reduced

Attachment Details

Document Description: Public Posting–Projects Accepted

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	10/29/2021
1B. Inclusive Structure	11/15/2021
1C. Coordination	Please Complete
1C. Coordination continued	11/16/2021
1D. Addressing COVID-19	11/16/2021
1E. Project Review/Ranking	11/16/2021
2A. HMIS Implementation	11/16/2021
2B. Point-in-Time (PIT) Count	11/09/2021
2C. System Performance	11/16/2021
3A. Housing/Healthcare Bonus Points	11/09/2021
3B. Rehabilitation/New Construction Costs	11/09/2021

FY2021 CoC Application	Page 48	11/16/2021
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3C. Serving Homeless Under Other Federal Statutes	11/09/2021
4A. DV Bonus Application	11/09/2021
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

The City of Tuscaloosa

Coordinated Assessment Policies and Procedures



2201 University Blvd.
Tuscaloosa, AL, 35401
205-248-5080

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Overview

Authority

The U.S. Department of Housing and Urban Development (HUD) published a [Notice Establishing Additional Requirements for a Continuum of Care \(COC\) Centralized or Coordinated Assessment System](#) (Appendix A) regarding the development and implementation of a coordinated entry system. It requires that the Community Homeless Assessment, Local Educators and Networking Groups (CHALENG) establish and operate a coordinated entry (CE) process – and that recipients of the Continuum of Care Program and Emergency Solutions Grants (ESG) program funding within the CHALENG’s coverage area must use that coordinated entry process to administer services to individuals and families experiencing homelessness or at risk of becoming homeless.

Revision to Coordinated Entry in Response to COVID-19

Coordinated entry is an “essential service” during the COVID-19 pandemic; therefore, services will continue to be provided to homeless individuals/households. The city of Tuscaloosa Coordinated Entry system will remain open to the public as it provides access to housing and other community services in our jurisdiction. During this time of uncertainty, the CDC’s social distancing recommendations has applied changes to make sure that staff are limiting their contact with clients during the CE process. These revisions have been created with direction by the U.S. Department of Housing & Urban Development (HUD) and the Center of Disease Control & Prevention (CDC).

The policies and procedures regarding COVID-19 are subject to change as updates are received by HUD and the CDC.

Temporary Modifications to Coordinated Entry Procedures Due to COVID-19 Pandemic

If a client reported symptoms of fever, shortness of breath, cough, headache, or any symptom established by the CDC, enters Coordinated Entry service area, they are required to contact one of the following agencies/providers for direction on COVID-19 testing & healthcare services:

1. Their local health care provider
2. Tuscaloosa County Health Department, 205-562-6900
3. Alabama Department of Public Health, 800-270-7268

Time-limited policies and procedures have been added to the Coordinated Entry Policies and Procedures document to respond to the COVID-19 pandemic accordingly. The Office of Community and Neighborhood Service believes that it is necessary to inform the community of the ways to access the City of Tuscaloosa’s Continuum of Care homeless service. The CoC will aid staff in knowledgeably directing and serving clients, in regards to their COVID-19 status.

Coordinated entry staff will be required to maintain contact with clients at least once a week. Face-to-face contact will be limited; therefore, clients will be contacted virtually or by phone. The Director’s approval will be needed to schedule in-person meeting with clients.

Purpose of Coordinated Entry Process

The coordinated entry process provides a person-focused system for allocating the CoC's resources to individuals and families experiencing homelessness and at risk of becoming homeless. It guides this CoC's efforts to integrate its housing crisis response system. Through the coordinated entry system, the Continuum prioritizes the highest need and most vulnerable households for services and efficient and effective use of the housing and supportive services in the system.

Additionally, the coordinated entry process:

- Creates easier access to services;
- Allows providers to quickly match households to needed services for which they are eligible;
- Improves referrals to resources outside the housing crisis response system;
- Prevents duplication of efforts; and
- Reduces time in system and returns to homelessness thereby reducing burden on system.

Coverage and Participation

CHALENG serves the entire geographic region of Tuscaloosa County within the State of Alabama (Appendix B). The agencies that receive Continuum of Care Program and Emergency Solutions Grant funds are listed on (Appendix C).

Marketing Plan

To ensure access points, physical locations are accessible to individuals with disabilities and are wheelchair bound. The CoC will assess each newly added physical access point for accessibility by conducting a monitoring according to the latest edition of the [ADA Checklist for Existing Facilities](#) (Appendix D).

To ensure access to people who are less likely to access homeless assistance, the CoC will conduct quarterly outreach events, maintain relationship with agencies (that are likely to encounter people, yet unlikely to access homeless assistance), and review our Annual Outreach Plan (Appendix E).

To ensure effective communication with individuals with disabilities, the CoC will provide agencies with a list of agencies that are equipped to assist in communication to individuals with disabilities. Service providers will be responsible for ensuring their agencies have secured the appropriate auxiliary aids and services necessary. Recipients of federal and/or CoC funds will be asked to self-disclose their capacity to effectively communicate with individuals with disabilities annually.

The CoC will make a reasonable effort to offer coordinated entry materials and participant instructions in multiple languages to meet the needs of minority, ethnic, and groups with limited English proficiency (LEP) by securing volunteers and technology to provide a variety of translation services at access points.

Nondiscrimination and Equal Opportunity

All participating agencies projects must comply with the nondiscrimination and equal opportunity provisions of federal civil rights laws, including the following:

- The Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status.
- Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance.
- Title VI of the Civil Rights Act Prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving Federal financial assistance.
- Title II of the Americans with Disabilities Act prohibits public entities, which includes State and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing related services such as housing search and referral assistance.
- Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

Additionally, all agencies participating in the coordinated entry process will make known that all persons have a right to equal access to services and information about the coordinated entry process, financial assistance, and services provided by all participating agencies.

Domestic Violence Policy

No family or individual will be refused shelter or services due to their status as fleeing or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or as a victim of trafficking.

Individuals or families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, or victims of trafficking; who are seeking shelter or services from non-victim specific providers will be offered safe and confidential access to the coordinated entry process. If a family consents, a referral to domestic violence shelter, victim service providers, or immediate access to emergency services will be provided.

If the referral is refused or the domestic violence victim service provider is unable to serve the family or individual, services will be provided by non-victim specific providers according to non-victim specific provider rules and regulations.

The Process:

- When a family enters the coordinated entry process, they are screened using the diversion script.
- If the family/individual indicates that they are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, or are victims of trafficking then the client will be offered access to local domestic violence provider and shelter provided by the network of providers for this special population.

- If the family/individual consents, a local domestic violence provider will meet the family/individual at the coordinated entry access point to begin case management services.
- If the family/individual declines, services will be provided according to non-victim specific provider rules and regulations.

Amendment to Domestic Violence Policy in Response to COVID-19

There will be no refusal of services for any individual/family fleeing/attempting to flee, domestic violence, dating violence, sexual assault, stalking, or as a victim of trafficking.

To encourage social distancing, individuals/families who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or victims of trafficking will have safe and confidential access to the entry process. With the victim's consent, there will be a virtual process/phones available to collect data and provide referrals to emergency services, victim services providers, domestic violence services, and safe centers. COVID-19 rules and regulations of these services and providers must be followed.

If the referral is refused or the service provider is unable to serve the family or individual, services will be provided by non-victim specific providers per the COVID-19 rules and regulations.

Temporary Provisions to the Process:

- If a family/individual needs access to the coordinated entry process, including those who are fleeing, or attempting to flee domestic violence, dating violence, sexual assault, trafficking, or stalking, there will be a virtual process and/or phones available in a private physical space for victims to disclose confidential information about the violence.
- When the family/individual enters this coordinated entry process, there will be a collection of data and referrals provided.
- If a family/individual discloses information of experiences with violence, then clients will be referred (with consent) and/or offered access to the local domestic provider, Turning Point, their rules and regulations in response to COVID-19 must be followed.
- Under the family/individual consent, local domestic providers will use COVID-19 safety precautions to meet the family/individual at the Coordinated Entry access point to begin case management services.
- If the referral is refused or the domestic violence service provider is unable to serve the family/individual, services will be provided by the non-victim specific provider rules and regulations, in regards to COVID-19.

Guidance for Evaluating Individuals' and Families' Eligibility for Assistance

The CE process provides for uniform assessment of people who are experiencing homelessness and people at risk of homelessness, including

- Individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking;
- People who are losing their housing in 14 days and lacks support networks or resources to obtain housing;

- People who have moved from place to place and may continue to do so because of disability or other barriers; and
- Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes, who do not otherwise qualify as homeless under this definition.

Families who are ineligible for services will be provided appropriate referrals to mainstream community resources.

Guidance for Determining and Prioritizing Which Eligible Individual and Families Will Receive Rapid Rehousing Assistance

To determine eligibility for rapid re-housing assistance an individual or family must:

- Have a completed prescreening and comprehensive assessment.
- Be factually homeless and live in Tuscaloosa County.
- Participate in an assessment interview. During this time a case manager will properly document the status of homelessness, verify income, and complete a SP-DAT assessment of needs.

Assessments will be prioritized based on their status of literally homeless and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

Guidance for Determining and Prioritizing Which Eligible Individuals and Families Will Receive Homeless Prevention Assistance

To determine eligibility for homelessness prevention assistance an individual or family must have completed a prescreening.

The family must be at risk of homelessness, including:

- Individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking;
- Individuals and families who are losing their housing in 14 days and lack support networks or resources to obtain housing;
- People who have moved from place to place and are likely to continue to do so because of disability or other barriers; and

The individual or family must participate in an assessment interview. During this time a case manager will properly document the status of at risk of homelessness, verify income, and complete a SP-DAT assessment of needs.

Assessments will be prioritized based on their status of at risk for homelessness, income eligibility and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

Guidance for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance

To determine eligibility for homelessness prevention assistance an individual or family must have completed a prescreening.

The family must be at risk of homelessness, including

- Individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking;
- Individuals and families who are losing their housing in 14 days and lack support networks or resources to obtain housing;
- People who have moved from place to place and are likely to continue to do so because of disability or other barriers; and
- Unaccompanied youth and families with children and youth who are defined as homeless under other Federal statutes, who do not otherwise qualify as homeless under this definition.

The individual or family must participate in an assessment interview. During this time a case manager will properly document the status of at risk of homelessness, verify income, and complete a SP-DAT assessment of needs.

Assessments will be prioritized based on their status of at risk for homelessness, income eligibility and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs

- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

Guidance for determining and prioritizing which eligible individuals and families will receive transitional housing assistance

To determine eligibility for transitional housing assistance an individual or family must have completed a prescreening.

The individual or family must be at risk of homelessness, including:

- Individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking;
- Individuals and families who are losing their housing in 14 days and lack support networks or resources to obtain housing;
- People who have moved from place to place and are likely to continue to do so because of disability or other barriers; and
- Unaccompanied youth and families with children and youth who are defined as homeless under other Federal statutes, who do not otherwise qualify as homeless under this definition.

The individual or family must participate in an assessment interview. During this time a case manager will properly document the status of at risk of homelessness, verify income, and complete a SP-DAT assessment of needs.

Assessments will be prioritized based on their status of at risk for homelessness, income eligibility and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

Guidance for determining and prioritizing what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance

When rental assistance is provided to allow individuals and families to remain in their existing rental units or to help them obtain and remain in rental units they select, program participants will pay a minimum of thirty percent (30%) of the participant's monthly household income to the rent payment.

Coordinated Entry Process Components

ACCESS

Telephone Access

Residents may access the Coordinated Entry System by dialing 205-632-3691. When no answer or during hours not scheduled for normal intake, please dial extension 106.

If fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, and victims of trafficking, please call 205-758-0808. The local Domestic Violence Provider, Turning Point, will arrange transportation to shelter from an arranged safe location for individuals and families.

To access rapid rehousing or homelessness prevention services, clients or referring agencies may call 205-632-3691 or visit the Salvation Army to request an appointment. Rapid Rehousing and Homelessness Prevention hours are Monday-Friday from 8- Noon and 1PM – 3PM.

Amendment to Telephone Access in Response to COVID-19

To protect staff within the workplace, all person(s) working with the coordinated entry phone line will rotate working in the office and from home. Clients can access the coordinated entry system by dialing 205-632-3691. This number is also for individuals that need access to rapid rehousing or homeless prevention services—or individuals can take COVID-19 safety precautions and visit the Salvation Army to request an appointment. RRH and HP hours are Monday-Friday from 8-Noon and 1PM-3PM.

The phone lines will be connected to the office and staff's home office from 8am-5pm. Hours will be extended for clients to leave voicemails between 5pm-7pm. Clients will be followed up with the next business day. Clients will still have the opportunity to be screened for shelter referrals, housing, and other safety resources as needed.

If clients are victims of domestic violence, this includes fleeing, attempting to flee, dating violence, sexual assault, stalking, and victims of trafficking, please call 205-758-0808. The local Domestic Violence Provider, Turning Point, will use their rules and regulations regarding COVID-19 to arrange transportation to shelter from an arranged safe location for individuals and families.

Walk-in Access

The Salvation Army provides walk-in client intake services for the coordinated entry system Sunday– Saturday from 3PM– 6PM.

Salvation Army
1035 9th Street
Tuscaloosa, AL 35401

Provision to Walk-in Access

Salvation Army will still be able to provide walk-in intake services for the coordinated entry system. With the guidance from HUD and CDC, COVID-19 safety procedures will still apply. Sunday- Saturday from 3PM – 6PM

Salvation Army
1035 9th Street
Tuscaloosa, AL, 35401

Telephone Linkage to Central Access Point

- *The United Way Hotline 2-1-1* answers calls 24 hours/7 days a week and can provide information on how to access the coordinated entry system by telephone.
- *City of Tuscaloosa Non-Emergency Call Center 3-1-1* answers calls 7am – 7pm Monday through Friday and can provide information on how to access the coordinated entry system by telephone.

Transportation to Central Access Point

The City of Tuscaloosa Transit Greensboro Route provides drop-off and pick-up at the Center of Hope stop on 26th Street 7 minutes passed the hour every hour from Monday - Friday 5 AM – 6PM. Bus fare is \$1. Half-price fare of \$0.50 for 60 years or older, military/veteran, or if you are on Medicare and can present a Medicare card.

The Salvation Army staff will arrange transportation for individuals and families seeking emergency shelter by dialing 205-632-3691 ext. 106. If fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, and victims of trafficking, the local Domestic Violence Provider, Turning Point, will arrange transportation from an arranged safe location for individuals and families by dialing 205-758-0808.

Intake

Intake services are provided at the central access point, Salvation Army. Intake is the process by which a family's likelihood of eligibility for services within the coordinated entry plan is assessed. A family or individual will answer questions to determine their eligibility for housing counseling, homelessness prevention services, emergency shelter, or rapid re-housing. If they are likely to qualify for services, a client/household record is created in Service Point.

When a record is created in Service Point, a case manager to obtain the HUD universal elements resulting in a Homeless Management Information System (HMIS) identification number being assigned to the household or family.

If a family is **“Seeking a Change in Current Housing Situation”** but, determined to have a safe and decent place to stay in the community for at least two days, then they are eligible for a referral to housing counseling services. Housing counseling services assist with locating financial, utility, and/or rental assistance outside of the coordinated entry system; short-term case management; conflict mediation; connection to mainstream services (services that come from agencies outside

of the homeless assistance system, such as welfare agencies) and/or benefits; and a housing search.

If a family is determined to be **“At Imminent Risk of Losing Housing”**, the family is eligible for a referral to homelessness prevention program services. Homelessness Prevention services provide case management for standardized and comprehensive assessment of needs and barriers to permanent housing, rental assistance, mediation, housing stabilization services, rental arrears, moving costs, and legal services.

If a family is determined to be **“Homeless”**, the family will be admitted into shelter and referred to case management for standardized and comprehensive assessment of needs and barriers to permanent housing, rental assistance, mediation, housing stabilization services, rental arrears, moving costs, and legal services.

Consumer’s Housing Situation	Intervention Used	Services Provided (In All Interventions)
At Imminent Risk of Losing Housing (precariously housed and not yet homeless)	Prevention	<ul style="list-style-type: none"> • Housing Search • Rental Subsidy • Utility Assistance • Case Management • Mediation • Connection to Mainstream Resources • Legal Services
Seeking A Change in Current Housing Situation	Housing Counseling	
Homeless (homeless/in the homeless assistance system)	Emergency Shelter and Rapid RE-HOUSING	

Triage

Once a client/household completes the intake process and is permitted to enter the homeless care system, immediate attention is given to meeting the most pressing needs for the client. The central access point, The Salvation Army, is equipped to meet a variety of needs of families by providing safe shelter; hot meals and snacks; access to restrooms, showers and toiletries; laundry facilities; and population-specific recreation areas.

If the prescreening tool indicates a family fits into the category of fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, or victims of trafficking, the local domestic violence service provider will meet with the consumer to begin case management services with the family or individual.

Comprehensive and Standardized Assessment

The Vulnerability Index-Service Prioritization Decision Assistance Tool (VI_SPDAT) and Vulnerability Index – Service Prioritization Decision Assistance Tool for Families (VI_FSPDAT) are the standardized assessment tools used in the Coordinated Entry System to plan and help to prioritize the delivery of services to individuals and families. **(See Appendix F)**

The VI-SPDAT and VI-F-SPDAT are triage tools that are designed to be used by all providers within the Coordinated Entry Plan to quickly assess the health and social needs of people experiencing homelessness and match them with the most appropriate support and housing interventions that are available.

Case managers will provide in-depth assessment with-in 48 hours of a person being admitted to shelter or within the first 2 appointments for homeless prevention case management appointments.

Assessments are administered at agencies accepting referrals to determine which priority applies to the household, so that a funding determination can be made in keeping with the established priorities of CHALENG.

Prioritization

Allocation of resources will be prioritized based on their status chronically homeless and;

- Vulnerability to illness or death
- Vulnerability to victimization, including physical assault or engaging in trafficking or sex work
- Significant health or behavioral challenges or functional impairments which require a significant level of support in order to maintain permanent housing
- High utilization of crisis or emergency services, including emergency rooms, jail, and psychiatric facilities, to meet basic needs
- The extent to which people, especially youth and children, are unsheltered
- Risk of continued or homelessness

Prioritization Amendment in Response to COVID-19

Due to the public health crisis, coordinated entry has modified its prioritization to minimize the spread and impact of COVID-19. The Centers for Disease Control and Prevention (CDC) have identified the groups of individuals that are at a higher risk of contracting or developing complications due to COVID-19. Due to these recommendations and HUD's guidance, the city of Tuscaloosa will implement the following provisional policy:

- First Priority Group: Individuals/households that are 60 years of age or older who has one or more of the underlying medical conditions established by the CDC.
- Second Priority Group: Individuals/households that contain a person 60 years of age or older or a person(s) that have one or more of the underlying medical conditions established by the CDC.
- Racial Equity: There will be a review of data to ensure that Black people, Indigenous people, people of color are adequately assessed, prioritized, and served at a rate that is proportionate to their makeup of homeless households in the city of Tuscaloosa. Adjustments will be made to this prioritization proposal as needed to make certain that it is racial equitable.

Reasonable accommodations will be provided for those with disabilities. There will be designated accessible units for individuals with mobility or sensory imparities who will need accessibility features of these units.

Referrals

A client who receives a referral has been assigned an HMIS number and has completed an assessment for referral purposes. The agency accepting the referral will provide case management services according to their program's policies and procedures.

Exits

Clients who exit the system by loss of contact for 30 days or who transition to permanent housing will be formally exited from the coordinated assessment system in the HMIS system.

Clients who are referred to outside agencies for case management, but who do not achieve housing stability or self-sufficiency, will be exited out of the HMIS system.

Data Management

CHALENG participates in HMIS to collect, use, store, share and report participant data associated with the coordinated entry process. Additionally, the CoC Board of Directors has adopted the CHALENG HMIS Policies and Procedures (Appendix G). These policies are updated annually to ensure the following:

- The data system used in the CE plan will provide adequate privacy protection of all participant information per the HMIS Data and Technical Standards at 24 CFR 578.1(a) (8).
- Protocols for obtaining participant consent to share and store participant information for purposes of assessing and referring participants through the coordinated entry process.

- CE service providers are prohibited from denying services to participants if the participant refuses to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participants' personally identifiable information (PII) as a condition of program participation.
- CE service providers who use coordinated entry functions ensure all users of HMIS are informed and understand the privacy rules associated with collection, management, and reporting of client data.
- CE service providers only share participant information and documents when the participant has provided written consent.

Evaluation

The CoC will review the performance and effectiveness of the Coordinated Entry plan, annually. Each year the plan will be announced at the January general CoC meeting. The team will be staffed by volunteers in the community and directed by a board member. The plan will include each of the following elements:

- A consultation with each participating project and project participants to evaluate the intake, assessment, and referral processes associated with the coordinated entry.
- A review of system performance measures.
- An assessment of client's experience.
- A privacy plan for the information collected during the assessment of the coordinated entry plan.

Declined Referrals and Grievance Procedures

There may be rare instances where program staff do not accept a referral from the coordinated assessment process. Refusal are acceptable only in certain situations, including:

- Person does not meet the program's eligibility criteria.
- Person would be a danger to others or themselves if allowed to stay at a particular program.
- Person has previously caused serious conflicts within a program and was banned.

If program staff determines a consumer is not eligible for their program after they have received the referral from coordinated assessment:

- The consumer should be sent back to their initial assessment point for assessment staff to determine a place for them to sleep that night (if they do not already have one).
- If assessment hours are over for the day, the consumer should be referred to population appropriate emergency shelter.
- Within 48 hours of their re-entry into shelter, a representative from the program that refused them, the assessment staff member, and the person experience homelessness must meet to determine the best next step for the consumer. A representative from the program that refused them, should update the HMIS referral explain the refusal to accept and contact the WACH COC Coordinator Assessment committee chair.
- Cases that are unable to be resolved to the consumer's satisfaction will be referred to the Coordination of Services Committee to be addressed as soon as possible.

- If a program is consistently refusing referrals (more than 3 out of every 4) they will meet with the Coordinated Assessment Committee to discuss the issue that is causing the refusals.
- Population appropriate means that there is a match between gender, family composition or other identifying characteristics of the consumer seeking services and the eligibility criteria of the program served.

Consumer Declines Referral

Assessment staff, through the administration of the assessment tools and the assessment process (which includes consumer input), will attempt to do what they can to meet each consumers needs while also respecting community wide prioritization standards. The CoC has the right to limit the number of program refusals(s) any consumer can make per episode of homelessness. If a consumer exceeds the number of refusals he forfeits his/her right to be served by the homelessness assistance system.

Provider Grievances

Providers should bring any concerns about the coordinated assessment to the Coordinated Assessment Committee, unless they believe a consumer is in immediate or life-threatening danger, in which case they should deal with the situation immediately. A summary of concerns should be provided via email to the chair of the Coordinated Assessment Committee. The chair should then schedule for that provider's representative to come to the next available Coordinated Assessment Committee so the issues can be resolved. If the issues need more immediate resolution, the chair will be in charge of determining the best course of action to resolve the issues.

Consumer Grievances

The assessment staff member or the assessment staff supervisors should address any complaints by consumers as best as they can in the moment. Complaints that should be addressed directly by the assessment staff member or assessment staff supervisor include complaints about how they were treated by assessment staff, assessment center conditions, or violation of data agreements. Any other complaints should be referred to the chair of the Coordinated Assessment Committee for resolution as above. Any complaints filed by a consumer should note their name and contact information so the chair can contact them and offer them a chance to appear before the committee to discuss them.

GOVERNANCE

Roles and Responsibilities

The coordinated assessment is governed by the Coordinated Assessment Committee.

This group will be responsible for the following:

- Providing general oversight and management of coordinated assessment.
- Delivery of program funds to cases presented by ESG providers

- Investigating and resolving consumer and provider complaints or concerns about the process, other than declined referral.
- Providing information and feedback to the CoC general meetings, CoC Board and the community at-large about coordinated assessment.
- Evaluating the efficiency and effectiveness of the coordinated assessment process.
- Reviewing performance data from the coordinated assessment process.
- Providing recommendation of improvements of the coordinated assessment process.
- Utilizing performance data received to implement improvements of the coordinated assessment process.

Committee Composition

The Coordinated Assessment committee will include the following seats:

- Center of Hope emergency shelter representative
- Turning Point Domestic Violent staff representative
- Veteran Administration Medical Center staff representative
- City of Tuscaloosa representative
- Housing Authority staff representative
- Indian River Mental Health agency representative
- West Alabama Aids Outreach staff representative

Other seats that may be included in future iteration of the committee are faith-based organization, area police departments, substance-abuse service providers, and school system representatives.

Committee Chair

The Committee will have a chair. The chair will be responsible for the following:

- Putting together an agenda for each meeting, based on communications or agenda items submitted by providers or consumers.
- Serving as the point of contact for anyone seeking more information or having concerns about the coordinated assessment process.
- Ensuring minutes are taken at each meeting of the committee.
- The CoC Board will elect the chair from within the Coordinated Assessment Committee, or, if the Board is not yet in place, a majority vote among committee members.
- Each chair will hold the position for one year at a time.

Meeting Schedule and Agenda

- The committee will meet weekly in person or via telephone conference or Sky Chat each Monday morning.
- Certain items should be on the agenda on a regular basis, including the evaluation items listed in the Evaluation section below and relevant notes from the weekly coordinated assessment staff meetings.

Voting Procedures

- Decisions in the Coordinated Assessment Committee will be made based on a majority vote of Committee members.
- Any decisions that would lead to a modification of the coordinated assessment process, including changes to the assessment tool or policies and procedures, must be approved by majority vote of the Coordinated Assessment Committee AND approved by the CoC Board.

Conflicts of Interest

If at any point a provider or consumer wishes to address a complaint or grievance with a provider or agency that has a representative on the Coordinated Assessment Committee, that particular member must recuse him/herself from participating in those proceedings or voting on the outcome of that particular issue.

Review of Coordinated Assessment Committee Policies and Procedures

The policies and procedures governing the Coordinated Assessment Committee will be separated into a bylaw document that must be approved by the CoC Board. The CoC Board should review these bylaws bi-annually or at the request of the Coordinated Assessment Committee. A majority vote of the CoC Board is needed to modify the bylaws.

EVALUATION

The coordinated assessment process will be evaluated on a regular basis to ensure that it is operating at maximum efficiency. Evaluation will be carried out primarily through the Coordinated Assessment Committee and any consultants or third parties they engage to help them. Evaluation mechanisms will include the following:

- A monthly review of metrics from the coordinated assessment process. The data to be review, and the thresholds that should be met, will developed based on the document in a quarter.
- A quarterly forum with people experiencing homelessness who have been through the coordinated assessment process.
- A report issued to the community every six months on coordinated assessment and homelessness assistance system outcomes.
- This report will include trends from the month-to-month analysis of coordinated assessment data, as well as the total number of assessments and referrals made, successes to be shared, and a note from the Coordinated Assessment Committee Chair on process's progress. A member of the Coordinated Assessment Committee will present major findings from this report at the CoC meetings the month it is released.
- Committee members may ask for City or County staff assistance in writing and producing this report.
- An annual report on the homelessness assistance system with a section devoted to coordinated assessment.
- A member of the Coordinated Assessment Committee will present major findings from this report at the CoC general meetings.



2020 CoC-PHA Crosswalk

Important Notes About This Data: The report shows PHAs operating Housing Choice Voucher (HCV) units or Public Housing (PH) units within each CoC. The list of PHAs are ordered in descending order by total number of ACC Units (HCV + PH Units). The top two PHA records with the largest number of total units are highlighted for each CoC. PHA unit information is extracted from HUD's Inventory Management System (IMS) / Public and Indian Housing (PIH) Information Center (PIC) and is current as of December 2020. Approximately 1% of the total ACC Unit counts for the nation are excluded from this report, either because the units fall outside of 2020 CoC coverage geography or the PIH / PIC address data were insufficient to generate an accurate geographic placement for the crosswalk.

Alabama

AL-504 Montgomery City & County CoC

PHA Name	PHA Code	HCV Units	% HCV	PH Units	% PH	Total ACC Units	Small PHA?*
Housing Authority of the City of Montgomery	AL006	3,019	65.20%	1,613	34.80%	4,632	
South Central Alabama Regional HA	AL192	653	100.00%	0	0.00%	653	
Housing Authority of the City of Prattville, AL	AL131	104	49.50%	106	50.50%	210	
HA TALLASSEE	AL172	27	21.30%	100	78.70%	127	

AL-506 Tuscaloosa City & County CoC

PHA Name	PHA Code	HCV Units	% HCV	PH Units	% PH	Total ACC Units	Small PHA?*
HA TUSCALOOSA	AL077	1,354	52.60%	1,221	47.40%	2,575	
HA NORTHPORT	AL152	404	51.90%	375	48.10%	779	

AL-507 Alabama Balance of State CoC

PHA Name	PHA Code	HCV Units	% HCV	PH Units	% PH	Total ACC Units	Small PHA?*
Housing Authority of the City of Dothan	AL007	1,058	76.20%	331	23.80%	1,389	
Selma Housing Authority	AL008	710	55.00%	581	45.00%	1,291	
Housing Authority of the City of Alexander City	AL174	261	35.40%	477	64.60%	738	
HOUSING AUTHORITY OF THE CITY OF OZARK	AL073	319	44.40%	399	55.60%	718	

*Small PHAs meet HUD's definition of "small rural PHAs" with 550 or less total units, operating predominantly in rural areas, see:

<https://www.govinfo.gov/content/pkg/FR-2020-02-27/pdf/2020-04004.pdf>

The West Alabama Coalition for the Homeless (WACH) announces the 2020 competition for the Continuum of Care Program funds. Eligible projects are as follows:

1. Permanent Housing
2. Transitional Housing
3. Supportive Services Only; and
4. HMIS.

The deadline to apply is Monday, September 20, 2021 at 4 P.M. Please review the mentioned NOFA. To apply or ask questions, please email the WACH President, Karen Thompson-Jackson at thinkhill@aol.com.

The Homeless Management Information System (HMIS) is an electronic database used to hold information on characteristics and needs of homeless individuals and families. Utilization of the system gives a snapshot of Tuscaloosa's homeless population, information about services currently used, and the potential for additional services that may still be needed. HMIS also helps track chronically homeless clients and those placed in supportive housing.

- Oversees agencies within the Continuum of Care that utilize HMIS in order to receive funds from the Department of Housing and Urban Development (HUD)
- Connects individuals or families that experience homelessness or are at risk for homelessness with available resources to obtain or maintain housing

FY2019

The Results of the FY2019 COC funding competition are as follows:

No New Project Applications

The following Renewal Applications were accepted and ranked:

1. City of Tuscaloosa – HMIS Renewal
2. Salvation Army – Transitional Housing
3. Tuscaloosa Housing Authority – Permanent Supportive Housing
4. Tuscaloosa Housing Authority – Permanent Supportive Housing

FY 2019 COC Grant Competition Awards | FY 2019 Collaborative Application for AL 506 Tuscaloosa City and County

FY2021

The FY2021 CoC Competition is underway.

The following Renewal Applications were accepted and ranked:

1. City of Tuscaloosa – HMIS Renewal
2. Tuscaloosa Housing Authority – Permanent Supportive Housing
3. Tuscaloosa Housing Authority – Permanent Supportive Housing
4. Salvation Army- Veterans Transitional Living

Competition updates:

FY 2021 NOFO Announcement

FY 2021 Project Application Announcement

FY 2021 CoC Competition Timeline

Demitria Lewis

From: Demitria Lewis
Sent: Tuesday, September 7, 2021 10:03 AM
To: Karen Thompson-Jackson; Susan Kasteler; aellis@tusc.k12.al.us; idavisc6@charter.net; rwilliams@fivehorizons.org; Kenneth.Turner3@va.gov; atgravestwo2@gmail.com; mindchangers1@gmail.com; Kathyhofstadter@gmail.com; skimrn11@bellsouth.net; cjones@tuscaloosahousing.org; peltgi1@gmail.com; jfranks@whatleyhealth.org; Heather Hill; sosaj363@gmail.com; Margaret Desjarlais; kimsmithrn@currently.com; cristina.rice@va.gov; belinda@turningpointsservices.org; iedwards@tusc.k12.al.us; wmjones@alps.org; cjones@tuscaloosahousing.com; ghurst@tccs.net; slafon@tuscaloosahousing.org; Office of Community and Neighborhood Services
Subject: FY2021 CoC Competition Timeline--- RESULTS!
Attachments: FY2021 COCC Timeline.pdf

Hi All,

Our FY2021 CoC Competition Timeline was APPROVED and has been published on the City's website!

Please keep all upcoming dates in mind. At this time, all funded project applications must be submitted in E-Snaps by 4PM on Monday, September 20th. On September 21st, our review and rank team will begin their process.

Thank you for your participation!

Demi Lewis

Community Development Program Manager
Office of Community and Neighborhood Services
City of Tuscaloosa
Phone: (205) 248-5080
Website: www.tuscaloosa.com

The opinions expressed therein are my own and do not necessarily represent those of the City of Tuscaloosa. This message may contain confidential and/or proprietary information and is intended for the person/entity to whom it was originally addressed. Any use by others is strictly prohibited.

From: [Demitria Lewis](#)
Sent: Thursday, September 2, 2021 1:20 PM
To: [Karen Thompson-Jackson](#); [Susan Kasteler](#); aellis@tusc.k12.al.us; idavisc6@charter.net; rwilliams@fivehorizons.org; Kenneth.Turner3@va.gov; atgravestwo2@gmail.com; mindchangers1@gmail.com; Kathyhofstadter@gmail.com; skimrn11@bellsouth.net; cjones@tuscaloosahousing.org; peltgi1@gmail.com; jfranks@whatleyhealth.org; [Heather Hill](#); sosaj363@gmail.com; [Margaret Desjarlais](#); kimsmithrn@currently.com; cristina.rice@va.gov; belinda@turningpointsservices.org; iedwards@tusc.k12.al.us; wmjones@alps.org; cjones@tuscaloosahousing.com; ghurst@tccs.net; slafon@tuscaloosahousing.org; [Office of Community and Neighborhood Services](#)
Subject: Re: FY2021 CoC Competition Timeline--- VOTE!

Hi All,

Tomorrow is the last day to vote on the FY2021 CoC Competition Timeline; it closes at 5PM. Please go vote if you have not.

Thank you!

Demi Lewis

Community Development Program Manager
Office of Community and Neighborhood Services
City of Tuscaloosa
Phone: [\(205\) 248-5080](tel:(205)248-5080)
Website: www.tuscaloosa.com

On Aug 30, 2021, at 11:31 AM, Demitria Lewis <dlewis@tuscaloosa.com> wrote:

Hi All,

To assist with project management, we have created a timeline for the FY2021 CoC Competition (modified* attached) that illustrates deadlines and other significant dates and events over the competition's duration. We are requesting each of your participation.

Please complete the survey (<https://www.surveymonkey.com/r/K6VGFGD>) by **THIS FRIDAY at 5PM:**

The survey includes:

1. Your name for the voting count.
2. Approval or Disapproval of the timeline.

Thank you!

Demi Lewis

Community Development Program Manager
Office of Community and Neighborhood Services
City of Tuscaloosa
Phone: (205) 248-5080
Website: www.tuscaloosa.com

The opinions expressed therein are my own and do not necessarily represent those of the City of Tuscaloosa. This message may contain confidential and/or proprietary information and is intended for the person/entity to whom it was originally addressed. Any use by others is strictly prohibited.

<FY2021 COCC Timeline.pdf>

From: [Demitria Lewis](#)
To: [Chris Hall](#)
Cc: osouthall@tuscaloosahousing.org
Subject: FY2021 PROJECT APPLICATION SUBMISSIONS DUE MONDAY!
Date: Thursday, September 16, 2021 2:31:00 PM
Attachments: [fy-2021-renewal-project-application-detailed-instruc.pdf](#)
[Tuscaloosa City and County Timeline.pdf](#)

Hi,

This email serves as a reminder for the FY2021 CoC Competition HUD Project Application submission. **The funded project applications must be submitted in E-Snaps by 4PM on Monday, September 20th**. I have attached instructions on how to in case assistance is needed. In addition, I have provided the timeline so you can stay abreast of what's to come. Immediately after submissions, we will begin the review and rank process on the 21st so it is vital to get your information in on time.

Here are a few FAQs to assist as well: https://www.hud.gov/sites/dfiles/CPD/documents/FY-2021-Project-Application-FAQs_9.2.2021.pdf.

If you have any additional questions or concerns, please let me know.

Thank you!

Demi Lewis

Community Development Program Manager
Office of Community and Neighborhood Services
City of Tuscaloosa
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The opinions expressed therein are my own and do not necessarily represent those of the City of Tuscaloosa. This message may contain confidential and/or proprietary information and is intended for the person/entity to whom it was originally addressed. Any use by others is strictly prohibited.

West Alabama Coalition for the Homeless Ranking and Selection Process for Continuum of Care Project Applications



WEST ALABAMA COALITION FOR THE HOMELESS

RANKING AND SELECTION PROCESS FOR CONTINUUM OF CARE PROJECT APPLICATIONS

Tuscaloosa's Continuum of Care, the West Alabama Coalition for the Homeless (WACH) will use the following process to rank project applications for the Continuum of Care Competition.

Selection Process

A. HMIS Renewals

- HMIS Renewals will be assessed for performance and spending in alignment with HUD requirements and the CoC's monitoring committee.
- Confirmation of intent to participate will be through the Grant Inventory Worksheet (GIW) confirmation process.

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, enacted into law on May 20, 2009, requires that all communities have an HMIS with the capacity to collect required data concerning individuals and families experiencing homelessness. The Act also codifies into law certain data collection requirements integral to HMIS. With enactment of the HEARTH Act, HMIS participation became a statutory requirement for recipients and subrecipients of the CoC Program and Emergency Solutions Grant (ESG) funds.

HUD expects the CoCs to use HMIS data to track their progress in meeting CoC and project-specific performance goals, support community-wide planning, and to identify how best to direct resources to prevent and end homelessness. CoCs need high-quality HMIS data to complete the homelessness components of the Consolidated Plan and to meet HUD reporting requirements, such as the required Annual Performance Report (APR), and Annual Homeless Assessment Report (AHAR). Finally, HMIS data are essential to documenting a CoC's qualifications as a high-performing community.

As HMIS is a HUD mandated requirement in order to receive Continuum of Care funding, it is strongly recommended as one of the top priorities in Tier 1 in order to secure the funding for this authorized activity.

B. Permanent Housing

- Will be assessed for performance and spending in alignment with HUD requirements.
- Confirmation of agency intent to participate will be through the Grant Inventory Worksheet (GIW) confirmation process.

Because HUD continues to prioritize permanent supportive housing, the CoC Board is recommending the Permanent Housing renewals to be placed in Tier 1. Permanent Housing renewal projects must meet HUD's renewal threshold eligibility and performance measures.

C. Transitional Housing

- Transitional Housing renewal projects will continue with the Letter of Intent (LOI) process.
- Only those verified on HUD's Grant Inventory Worksheet will be eligible.

- In alignment with HUD's priorities and performance measures, the LOI is mainly performance based, but conditional on established HUD performance measures.
- Applications must meet baseline HUD thresholds and will be reviewed and conditionally accepted on the following criteria:
 - Complete and timely submission of required application and associated documents.
 - Successful and timely completion of e-snaps application.
 - Success in meeting performance standards as determined locally by the CoC's monitoring committee and by HUD.

New Projects

Due to funding limitations, HUD will not consider requests for new funding outside the reallocation process, CoC planning, and United Funding Agency costs.

HUD will assess all new projects for the following minimum project eligibility, capacity, timeliness and performance standards:

- Project applicants and potential sub-recipients must have satisfactory capacity, drawdowns, and performance for existing grants as evidenced by timely reimbursements of sub-recipients, regular drawdowns, and timely resolution of any monitor findings;
- For expansion projects, project applicants must clearly articulate the part of the project being expanded. Additionally, the project applicants must clearly demonstrate that they are not replacing other funding sources;
- Project applicants demonstrate that they will be able to meet all timeliness standards. Project applicants with existing projects must demonstrate that they have met all project renewal threshold requirements of the NOFA. HUD reserves the right to deny the funding request for a new project, if the request is made by an existing recipient that is found to have significant issues related to capacity, performance, or unresolved audit/monitoring finding related to one or more existing grants. Additionally, HUD reserves the right to withdraw funds if no APR is submitted on the prior grant.
- New project applicants must demonstrate their ability to provide required matching/leveraging funds as required by the NOFA.
- New applicants must be a participating member of the CoC for one year prior to making application for funding.

Reallocation

The CoC will allow agencies to reallocate funds to new projects if they are ready and if the reallocation is eligible (see attached Reallocation Guidelines). New Projects created through reallocation will be reviewed in e-snaps for HUD eligibility and threshold criteria.

HUD will review new projects created through reallocation to determine if they meet the following project quality threshold requirements with clear and convincing evidence. The housing and services proposed must be appropriate to the needs of the program participants and the community.

New Criteria for 2016

Per HUD guidelines, to be considered as meeting project quality threshold, new projects created through reallocation must receive at least 5 points from HUD based on criteria below. New project applications created through reallocation that do not receive at least 5 points will be

rejected by HUD. As part of the local review, applicants choosing to reallocate must describe and certify to the CoC that they will meet these criteria.

- Whether the type, scale, and location fit the needs of the program participants (1 point);
- Whether the type, scale, and location of the supportive services, and the mode of transportation to those services fit the needs of the program participants (1 point);
- Whether the specific plan for ensuring program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs for which they are eligible to apply meets the needs of the program participants (1 point);
- Whether program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (1 point);
- Whether program participants are assisted to both increase their incomes and live independently using mainstream housing and service programs in a manner that fits their needs (1 point);
- Whether 75% of the proposed program participants come from the street or other locations not meant for human habitation, emergency shelter, or safe havens (1 point); and
- Whether amenities (e.g. grocery stores, pharmacies, etc.) are accessible in the community (1 point)

FY 2016 HUD Priorities

- 1.) Create a systemic response to homelessness as evidenced by system performance measures, a coordinated entry process, promotion of participant choice, and a model that promotes an open, inclusive, and transparent delivery of homeless assistance;
2. Strategically allocating resources by comprehensively reviewing project quality, performance, and cost effectiveness, maximizing the use of mainstream and other community-based resources, and reviewing transitional housing projects for cost-effectiveness, performance, and the number and type of eligibility criteria to determine whether it should be reallocated to RRH or another model;
- 3.) Ending chronic homelessness by 2017;
- 4.) Ending family homelessness;
- 5.) Ending youth homelessness;
- 6.) Ending veteran homelessness;
- 7.) And Using a Housing First approach that uses data to quickly and stably house homeless persons, engaging landlords and property owners, removing barriers to entry, and adopting client-centered service methods.

Tier and Ranking

The CoC must assign a unique rank to each project that it intends to submit to HUD for funding. HUD strongly advises CoCs to rank higher those project applications that the CoC determines are high priority, high performing, and meet the needs and gaps as identified in the CoC.

Tiers

To ensure that CoCs have the opportunity to prioritize their projects locally in the event that HUD is not able to fund all renewals, HUD requires that CoCs rank projects in 2 tiers. The tiers are financial thresholds. (Per the FY2016 NOFA, Tier 1 is equal to 93 percent of the CoC's ARD amount approved on the final HUD-approved GIW and projects in this tier. See page 13, Section II B.16.)

Consistent with the HUD CoC Program Competition NOFA, projects will be ranked as follows:

Tier 1:

- 1.) Renewal HMIS, permanent housing projects, PSH that serves a priority population, RRH, or transitional housing that exclusively serves homeless youth;
 - 2.) New PSH projects created through reallocation for 100 percent chronically homeless, especially chronically homeless families with children and youth;
 - 3.) New rapid re-housing projects created through reallocation for homeless households with children and youth;
 - 4.) Renewal transitional housing;
 - 5.) CoC planning costs;
 - 6.) UFA costs; and
 - 7.) Any project application submitted by the CoC that was not included in the HUD approved GIW.
- **HMIS renewals will be placed in Tier 1 due to the requirement of HMIS reporting.**

Tier 2:

- 1.) Renewal and new PSH, RRH, or transitional housing that exclusively serves homeless youth;
 - 2.) Renewal transitional housing, except those transitional housing projects that exclusively serve homeless youth;
 - 3.) CoC planning costs;
 - 4.) UFA costs;
 - 5.) SSO projects for centralized or coordinated assessment;
 - 10.) Any project application submitted by the CoC that was not included in the HUD approved GIW.
- **CoC planning grant is placed in Tier 2**

Ranking Criteria Process

The ranking process used locally will align with HUD's process as described in the 2016 NOFA. Points will be assigned to projects in accordance to corresponding criteria. Renewal Project Applications will be assigned a numeric value of up to 70 points for the purpose of aligning with HUD's ranking process and point criteria as provided in the table on the following page. New PSH or RRH projects created through reallocation will be ranked based on the performance of the renewal application which is being reallocated. Projects will be ranked in HUD priority order by project type (e.g. PH, TH, SSO, etc.) applying the methodology described above. Any remaining projects not fitting in the amount allocated for Tier 1 are placed in Tier 2. The following is a matrix of ranking criteria and points.

2016 Ranking Criteria

Program Type and Population Served	Up to 25 points
Renewal HMIS or New HMIS projects for a centralized or coordinated assessment system	12
PSH or TH serving a priority population (Defined in Policy Priorities of FY2016 NOFA)	2
PSH Serving 100% chronically homeless or TH serving 100% homeless youth	4
PSH or TH serving homeless households with children and/or youth	4
PSH or TH project has adopted a Housing First Model	2
PSH or TH project has adopted an extremely low barrier approach, with less than 2 qualifiers for program entry	1
Employment and Income	Up to 4 points
20% of program participants obtained employment income	2
20% of program participants obtained other income	2
Access to Mainstream Resources	Up to 5 points
55% of participants obtained mainstream benefits at program exit	3
20% of participants obtained mainstream benefits at program exit	2
Percentage of participants obtaining mainstream benefits at exit increased from the previous year.	2
Transitional to Permanent Housing (for TH only)	Up to 7 points
80% of transitional housing participants moved to permanent housing	5
65% of transitional housing participants moved to permanent housing	2
Percentage of participants moving from TH to PH increased from previous year	2
OR	
Participants remaining in Permanent Housing (For PH only)	Up to 7 points
80% of permanent housing participants remained in permanent housing for 6 months or longer	5
65% of permanent housing participants remained in permanent housing for 6 months or longer	2
Percentage of participants remaining in PH increased from previous year	2
Match/Leveraging	Up to 3 points
Project application demonstrates 51%-100% in leveraging or match	3
Project application demonstrates 25%-50% in leveraging or match	2
Spending	2 points
100% of project funding was expended in the last grant term	2
HMIS	Up to 15 points
Bed utilization project demonstrates 86% or higher bed coverage rate on 2016 HIC	5
Project has below 10% null or missing values (Based on Entry/Exit data from most recent grant year)	5
Project has below 10% of refused or unknown records (Based on Entry/Exit data from most recent grant year)	5
Point in Time Count	1 point
Participated in 2016 PIT	1
Housing Inventory	2 points
Project submitted 2016 Housing Inventory to the CoC Lead/City of Tuscaloosa by deadline	2
Total Points Possible	70

Appeals Process

The Appeals Committee represented by 3-5 non-conflicted CoC members and the CoC Board will review all appeals and make recommendations and make a final determination regarding the appeal. The Appeals Committee will be selected by the CoC Board of Governance or its designees. These individuals will have no conflict of interest in serving, as defined by the conflict of interest policy.

Applicants may appeal any of the following decisions of the CoC Board of Governance:

- Placement of a project in Tier 2.
- Reduction of a renewal grant amount (i.e. renewal grant partially reallocated to a new project).
- Reduction of a renewal grant (i.e. entire grant reallocated to a new project) if not previously notified that the grant was to be reallocated as a result of low performance.

Applicants placed in Tier 1 may not appeal their rank on the Project Priority Listing. All renewal applicants will receive notification of their submission status and ranking at least 15 days prior to the NOFA submission deadline.

Any agency that wishes to appeal must notify the CoC Board of Governance in writing no later than at least 3 business days after the priority ranking has been communicated in writing. An appeal must be in written form on agency letterhead and submitted to the CoC Secretary (who will immediately distribute to the Ranking Committee. The letter may be in written or electronic format and must include:

- a) The agency name
- b) Project Name
- c) Reason for appeal (maximum of 2 pages)
- d) Documentation to support the appeal
- e) Signature by the project's program manager and the agency's executive director

Applicants will be notified of the outcome within 5 business days. If an appeal will be filed, other agencies whose rank may be affected will be notified as a courtesy. Such agencies will not be able to file an appeal until after the appeals process is complete.



MEMORANDUM

To Whom It May Concern,

All FY2021 CoC Project Applications had a submission deadline of Monday, September 20, 2021 at 4PM. We received 4 (four) applications. All applications were reviewed and ranked by the CoC Funding Program Committee. No applications were appealed nor rejected.

Thank you,

Karen Thompson- Jackson
Board President
AL-506 Tuscaloosa City and County Continuum of Care



MEMORANDUM

To: City of Tuscaloosa

On behalf of the West Alabama Coalition of the Homeless and Continuum of Care, your FY2021 CoC Project Application was received. Each project will be reviewed and ranked by the CoC Funding Program Committee.

Thank you,

A handwritten signature in black ink, appearing to read "K. Thompson-Jackson", written over a horizontal line.

Karen Thompson-Jackson
Chair, West Alabama Coalition for the Homeless (WACH)



MEMORANDUM

To: Salvation Army

On behalf of the West Alabama Coalition of the Homeless and Continuum of Care, your FY2021 CoC Project Application was received. Each project will be reviewed and ranked by the CoC Funding Program Committee.

Thank you,

Karen Thompson-Jackson
Chair, West Alabama Coalition for the Homeless (WACH)



MEMORANDUM

To: Tuscaloosa Housing Authority

On behalf of the West Alabama Coalition of the Homeless and Continuum of Care, your FY2021 CoC Project Application was received. Each project will be reviewed and ranked by the CoC Funding Program Committee.

Thank you,

Karen Thompson-Jackson
Chair, West Alabama Coalition for the Homeless (WACH)