

Prince George's County Continuum of Care
CoC Program - Ranking and Selection Process

Each year the U.S. Department of Housing and Urban Development (HUD) allocates funding for homeless assistance programs through the Continuum of Care (CoC) competition process. In order to receive funding, each Continuum of Care must submit a consolidated application for funding that describes how local activities meet or exceed HUD requirements and are aligned with community needs. The CoC is required to rank in order of priority funding requests from all eligible providers for inclusion in the Consolidated Application. In accordance with HUD's Homeless Policy and Program Priorities (as stated in the 2017 HUD CoC Program Application Notice of Funding Availability (NOFA)), the CoC will prioritize project applications based on the extent to which they advance these goals:

1. Ending homelessness for all persons. The CoC will consider at a minimum, each applicant's: a. performance against system outcomes including the average length of homeless episodes, rates of return to homelessness, and other factors to determine whether the applicant is effectively serving people experiencing homelessness; b. outreach strategies to identify and continuously engage unsheltered individuals and families; c. Serve individuals and families identified by the CoC as having the highest needs and longest experiences of homelessness; and d. Other CoC specific criteria outlined in the CoC's annual application scoring document(s).
2. Create a systemic response to homelessness. The CoC will consider at a minimum, a. how effectively each applicant's project ensures that homeless assistance is well coordinated, well managed, inclusive, transparent, and achieves positive outcomes, b. Participates in the CoC's Coordinated Entry process to promote participant choice, coordinate homeless assistance and ensure timely access to mainstream housing and services.
3. Strategically allocate and use resources. The CoC will consider at a minimum, each applicant's: a. Cost effectiveness, b. Match and leveraging contributions, c. Project quality and performance, and d. Use of mainstream and community-based resources.
4. Use a Housing First approach. The CoC will consider at a minimum, the extent to which each applicant's project: a. Prioritizes rapid placement and stabilization in permanent housing, b. Imposes service participation requirements or preconditions, c. Engages landlords and property managers as partners in housing re-stabilization, and d. promotes client-centered services.

Prince George's County CoC (MD-600) is eligible to renew a total of 21 projects for the 2017 HUD CoC Program Competition. Projects are eligible for renewal for FY 2017 funds if they have an executed grant agreement by December 31, 2017 and have an expiration date that occurs in Calendar Year 2018 (the period between January 1, 2018 and December 31, 2018). These projects are renewable under the CoC Program Competition as set forth in 24 CFR 578.33 to continue ongoing leasing, operating, supportive services, rental assistance, HMIS, and project administration costs. "The FY 2017 CoC Program Competition Estimated ARD Report" for the CoC reflects the opportunity for funding at the following levels: \$4,759,953 for renewal/reallocation projects, \$154,289 for the planning project and \$308,578 for new projects under the permanent housing bonus.

All applications will be ranked in two tiers; Tier 1 is equal to \$4,474,356 (94% of the ARD) and Tier 2 is equal to \$594,175 (6% of the ARD plus the permanent housing bonus). Tier 1 ranked projects will be fully funded as long as the CoC's application meets all threshold requirements and the Federal government provides sufficient funding. Tier 2 projects will be evaluated based on a combination of the CoC application score, ranking order, and adoption of Housing First tenets and will be assigned eligible points based on their ranking by the CoC in Tier 2. Project applications placed in Tier 2 are at the highest risk of non-funding.

The Homeless Services Partnership (HSP) is the CoC operating body in Prince George's County, and as such is responsible for the creation, implementation and monitoring of the County's 10-Year Plan to prevent and end homelessness. In order to ensure a fair and transparent ranking process for the Continuum of Care competition, the process will be:

1. Publically announced by the CoC;
2. Described and distributed in writing to the entire CoC;
3. Reviewed by the entire membership of the CoC during a designated meeting;
4. Recorded in the minutes of the designated meeting including all decisions made concerning the review and ranking; and
5. Minutes distributed to the entire CoC.

As part of the process, the Executive Committee of the HSP (CoC Board) reviews HUD requirements and priorities, reviews local data to determine CoC housing needs and priorities including the use of the reallocation process to create new projects that improve overall CoC performance and better responds to the needs of the County's homeless, and develops ranking criteria for all projects seeking funding through the Continuum of Care Competition.

The HSP ratifies these criteria and creates an ad-hoc Project Review Committee (PRC) that includes public and private representatives of the HSP who are not employees, board members or volunteers of a project applicant that is requesting new or renewal funding. The PRC is responsible for reviewing and ranking project applications, and recommending projects for inclusion in the application submitted to HUD.

The Prince George's County Department of Social Services (PGCDSS), acting as the Collaborative Applicant for the Prince George's County MD Continuum of Care, supports the PRC but is not a voting member -- their role is to coordinate the ranking process and provide necessary data to the PRC including analysis of CoC housing needs and program performance reports. PGCDSS identifies HUD requirements and priorities for funding, compiles materials for each renewal project, announces funding availability to agencies interested in submitting new projects, develops an evaluation tool used to rate projects, schedules committee meetings to conduct the review process, and provides technical assistance to applicants.

Members of the committee review information related to the needs of the CoC such as the most recent housing inventory chart, Point-in-Time data, federal priorities & identified service gaps. Committee members review renewal projects based on utilization, outcome performance, cost effectiveness, Continuum of Care priority needs, alignment with HUD priorities, and compliance with HUD funding requirements. New bonus project applications will be reviewed for project quality in alignment of HUD priorities and priority to the Prince George's County Continuum of Care.

Each Project Application is scored individually with ranking priority determined by committee consensus. All applicants will be notified directly regarding the recommendations of the committee. If a project is not recommended for funding, the committee will notify the project applicant, in writing, of this decision. Once the PRC has concluded its review and ranking, the committee's recommendations will be presented to the entire HSP for discussion and ratification. At this time there will be an opportunity for any person or organization disagreeing with the ranking order to provide argument for an alternative ranking. Final ratification will be determined by majority vote of all HSP members present, with each organization or agency in good standing receiving a single vote.

2017 Prince George's County Continuum of Care Renewal Project Application Scoring Criteria

	Pts	Criterion	Description	Points	score
1	5	Housing Type	PSH, RRH, THP that serve youth	5	
			THP serving a CoC priority sub-population	3	
			All other THP	1	
2	5	Exclusively serves a sub-population	Behavioral Health and/or Chronically Homeless (these populations are harder to serve so additional points are assigned because outcomes may not be as high)	5	
3	5	HUD Priorities	PSH - 100% Chronic homeless in Housing First model or RRH – Families	5	
			PSH that commits to fill 85% of turnover with CH	2	
			Does not provide RRH to families or PSH prioritized CH	0	
4	10	Housing 1 st / Low Barrier	Does not have entrance requirements such as income & sobriety. Does not require program participation	10	
5	10	Spending	Made timely withdraws from LOCCS (min. quarterly) and had no unexpended funds in last grant year	10	
			Did not make timely withdraws from LOCCS, but had no unexpended funds	7	
			Made timely withdraws from LOCCS (min. quarterly) and 1 st time returning funds in any program (last 3 years)	5	
			Did not make timely withdraws from LOCCS (min. quarterly) and 1 st time returning funds in last 3 years)	2	
			Returned funds in multiple programs and/or multiple times (last 3 years)	0	
6	10	Data quality	HMIS data report card - 12 Month avg: A = 5, B = 4, etc	5	
			HMIS quality and outcome measures: A=5, B=4, etc	5	
7	10	Utilization	Program average at 98% or above capacity	10	
			Program average at 90% or above capacity	8	
			Program average at 75% or above capacity	5	
8	5	Leverage	Project Leverages more than 150% of HUD budget	5	
			Leverages 100 – 149%	3	
			Leverages 75 – 100%	1	
9	10	Income	75% or more of leavers and stayers increased income during year	10	
			Deduct 1 point for every 5% under 75%		
10	10	Mainstream Resources	90% of consumers in program or who exited during the program year receive at least one mainstream benefit (Medicaid, TANF, SSI/SSDI, foodstamps, etc)	10	
			Deduct 1 point for every 5% under 90%		
11	10	Housing Stability	PSH & RRH - 80% of stayers are housed 6 months or longer and/or 80% of exits are to Permanent Housing	10	
			TH - 80% of TH residents exit to Permanent Housing		
			Deduct 1 point for every 5% under 80%		
12	10	CoC Participation	Attends a minimum of 90% of HSP meetings.	5	
			Actively Participates in a HSP committee	5	
SUBTOTAL				100	
0 monitoring findings in the most recent program year				+5	
Failure to submit required documents on time.				-10	
Less than 5% of program exits have returned to homelessness in the last two years				+3	
TOTAL					

2017 Prince George's County CoC New Project Applications: Qualifying Criteria

Eligible Applicant	Nonprofit organization	
	Current DUNS number	
	HSP Attendance	
	Registered with SAM	
Eligible Population: Meets both HUD and CoC requirements	PSH – serves Chronically homeless only or DedicatedPLUS RRH – serves families and singles (with priority to families) who are coming from the streets or emergency shelter only TH-RRH serves families or UHY	
Eligible Service Model	Program follows the tenets of Housing First: Does not have entrance requirements or require participation in supportive services.	
Financial Capacity	Has operating reserves (or line of credit) to sufficiently cover a minimum of 6 months of program operating expenses	
	Most recent annual audited statement and management letter is provided and no significant findings are identified	
	Meets Match requirement of 25% of Operating, Supportive Services and Admin budget.	
Organization Capacity	Organization has a mission/purpose statement and bylaws to govern operations	
	Organization has an active governing board that includes one member who is homeless or formerly homeless, or a formal plan to immediately recruit someone.	
	Organization has clear policies and procedures to address potential conflicts of interest	
HMIS and Coordinated Entry	Project has the capacity and an acceptable plan to participate fully in HMIS and the CoC's Coordinated Entry System	
Submission Deadline	Application and all required documents are submitted to CoC planner by deadlines	

2017 Prince George's CoC New Project Application: Scoring Criteria

	Criterion	Description	Points	Score
1	Expertise* serving an identified sub-population	Mentally ill/substance abusing, Unaccompanied Homeless Youth, Domestic Violence, Returning Citizens, Veterans	5	
2	Serving Identified CoC Needs	PSH – CH singles (SMI, dual diagnosis and/or criminal history) PSH Dedicated Plus – CH singles and unaccompanied youth. RRH – very low and low income families, unaccompanied youth, and or DV/Trafficking Joint TH / PH-RRH – Same as RRH	5	
3	Applicant experience for proposed activities	Relevant experience and good outcomes	5	
		Limited relevant experience and good outcomes	3	
		No experience or poor outcomes	0	
4	Innovation and Effectiveness	Clear description of evidence-based practices and demonstrated experience	5	
		Clear description of evidence-based practices but little or no experience	3	
		Weak description of evidence-based practices but demonstrated experience	1	
		No description of evidence-based practices	0	
5	Performance Measures	Detailed plans for successfully achieving CoC performance measures and partnerships clearly identified and verified	10	
		Basic plan for successfully achieving performance measures and partnerships clearly identified and verified	6	
		Detailed plan for successfully achieving performance measures but limited or no partnerships clearly identified or verified	3	
		Basic or no plan for achieving performance measures and no partnerships identified	0	
5	Cost Effectiveness CoC Average for PSH is \$19,456; RRH is \$5,978	Average annual per unit/slot is 10% or more below system average	10	
		Average annual per unit/slot is at system average	5	
		Average annual per unit/slot is higher than system average	0	
		Average annual per unit/slot is more than 10% below system average – BONUS POINTS (add +3)		
5	Financial Capacity	Has successfully managed Federal grants	5	
		Has not managed a Federal grant but has successfully managed a State or Local government grant of equivalent size	4	
		Has managed Federal grants that resulted in the recapture of funds but agency has no unresolved monitoring or audit findings	2	
		Has never managed a government grant Or has managed Federal grants that resulted in the recapture of funds and has unresolved monitoring or audit findings	0	
8	Leverage	Project Leverages more than 150% of HUD budget	5	
		Leverages 100 – 149%	3	
		Leverages 75 – 100%	1	
		Leverages less than 75%	0	
12	CoC Participation	Attends a minimum of 90% of HSP meetings.	5	
		Actively Participates in a HSP committee	5	
Sub-total			60	
Experience working with High System Utilizers			+5	
TOTAL				

*Expertise can be documented through staff credentials and/or significant program experience working with the identified population