

**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 2024/2025 HUD CoC Program Application Notice of Funding Opportunity (NOFO), the CoC will prioritize project applications based on the extent to which they advance these goals:

1. **End 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;
  - d. **partnerships with housing, health care and service agencies** to increase permanent housing options for unsheltered people with high rates of physical and mental illness and substance use disorders; and
  - e. Other CoC specific criteria outlined in the CoC's annual application scoring document(s).
  
2. **Use a Housing First Approach.** The CoC will prioritize projects that use a housing first approach, **do not have service participation requirements or preconditions**, and employ strong use of data and evidence, including cost-effectiveness and impact of homelessness programs on positive housing outcomes, recovery, self-sufficiency, and reducing homelessness. The CoC will evaluate projects using these measures:
  - a. Prioritizes rapid placement and stabilization in permanent housing,
  - b. Rates of positive housing outcomes,
  - c. Improvements in employment and income,
  - d. Improvements in overall well-being,
  - e. Engages landlords and property managers as partners in housing re-stabilization, and
  - f. promotes client-centered services.
  
3. **Reduces unsheltered homelessness.** The CoC will prioritize projects that can quickly move people from unsheltered living situations into stable housing. Projects will be evaluated using these measures including but not limited to:
  - a) acceptance of placements from coordinated entry,
  - b) average amount of time from coordinated entry referral to successful move in,
  - c) percentage of program placements coming directly from unsheltered situations,
  - d) percentage of placements with multiple service needs and/or co-occurring disabilities.
  
4. Create a systemic response to homelessness and **improve system performance.** Utilizing a combination of HMIS case notes and assessments, Coordinated Entry statistics, Annual Performance Reports, and other data, 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. Meets CoC System Performance Goals including length of stay, exits to permanent housing, increased income, and recidivism,
  - c. Participates in the CoC's Coordinated Entry process to promote participant choice, coordinate homeless assistance and ensure timely access to mainstream housing and services,
  - d. Use of mainstream and community-based resources,
  - e. Partnerships with other government, faith-based, and nonprofit resources specializing in areas such as treating mental

illness and substance abuse, job training, life skills, and similar activities that help CoC Program participants, whenever possible, reach recovery, self-sufficiency, and independence, f. Is cost effective and g looks to implement continuous quality improvement and other process improvement strategies.

5. ***Partnering with Housing, Health, and Service Agencies.*** The CoC will use cost performance and outcome data, as well as formal partnerships with mainstream resources to evaluate each applicant's: a. Cost effectiveness, b. Match and leveraging contributions, c. Project quality and performance, d. use of mainstream resources to meet client needs. Applicants will be evaluated on linkages with public and private healthcare organizations to assist program participants to receive primary care, and obtain medical insurance to address healthcare needs. Partnerships with landlords, CDC's and the Housing Authority to ensure housing stability. The use of other mainstream, faith and community-based resources specializing in areas such as treating mental illness and substance abuse, job training, life skills, and similar activities that held CoC participants achieve recovery, self-sufficiency, and independence.
6. Promote ***racial equity***: The CoC will consider at a minimum, each applicant's a. policies, procedures and processes for addressing racial disparities, b. organizational diversity, and c. intentional efforts to improve access by - and positive program outcomes for - Black, Indigenous, and other people of color (BIPOC).
7. ***Improving Assistance to LGBTQ+ Individuals:*** Project applicants will be evaluated on their policies and systems that ***address the needs of LGBTQ+ individuals*** and ensure their privacy, respect and safety. Additional weight will be given to applicants who have expertise serving or have partnerships in place with organizations with expertise in serving LGBTQ+ populations.
8. Authentic and continuous partnership with ***persons with lived experience***: The CoC will consider at a minimum, each applicant's a. inclusion of past and current participants in policy development and decision making; and b. hiring practices that seek opportunities to hire people with lived experience.
9. ***Building an Effective Workforce:*** The CoC recognizes that effective, well supported staff are essential to providing high quality and effective homeless assistance and will consider at a minimum staff retention, case/staff ratios, proposed staffing level, and partnerships that leverage/expand staff capacity and expertise.
10. ***Increasing Affordable Housing Supply:*** Prince George's County CoC recognizes that, like may other jurisdictions, the lack of affordable housing is a significant contributing factor to homelessness in the County. As such, we encourage our providers to attend and testify at local government meetings, engage with county officials and stakeholders, and participate in five year and annual housing action plans. The CoC actively engages with both the County's Housing Authority, private developers, and local CDC's to ***prioritize the development and preservation of housing units for extremely low-income and homeless individuals*** in the county. The CoC will prioritize applicants who actively work towards increasing the number of affordable housing units in the county as evidenced by a. the development of affordable housing units in the county, b. active participation in the collaborative process between the HA and the CoC to create annual action plans, and c. partnerships with developers, property managers, and CDC's to create or preserve affordable housing units in the County.

Prince George's County CoC (MD-600) is eligible to renew a total of 28 projects for the 2024/2025-HUD CoC Program Competition. Projects are eligible for renewal for FY 2024/2025 funds if they have an executed grant agreement by December 31, 2024 and have an expiration date that occurs in Calendar Year 2025 (the period between January 1, 2025 and December 31, 2025). 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 2024/2025 CoC Program Competition Estimated ARD Report” for the CoC reflects the opportunity for funding at the following levels: **\$11,287,526\*** for renewal/ reallocation/ consolidation/transition projects, **\$564,376\*** for the planning project, **\$1,354,503\*** for new projects under the permanent housing bonus, and **\$1,038,306\*** for new projects under the DV housing bonus. The application also includes **\$1,754,287\*** in YHDP renewal projects, which are scored but not ranked. *\*Final values per HUD's published CoC estimated annual renewal demand report for FY 2024 and FY 2025.*

All FY 2024/2025 CoC Program Competition applications, other than YHDP renewals and the CoC planning project, will be ranked in two tiers; Tier 1 is equal to **\$8,579,915\*** (90% of ARD less exempt projects) and Tier 2 is equal to **\$3,353,880\*** (10% of ARD less exempt projects *plus bonus funds*). Tier 1 ranked projects will be fully funded as long as the CoC's application meets all threshold and eligibility 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. HUD will select projects in order of point value until there are no more funds available. Projects placed in Tier 2 are at the highest risk of non-funding. *\*Final values per HUD's published CoC estimated annual renewal demand report for FY 2024 and FY 2025.*

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. Publicly 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.

Applicants may appeal any of the following decisions of the CoC PRC:

- Placement of a project in Tier 2
- Reduction of a renewal grant amount (i.e. renewal grant partially re- allocated to a new project).
- Reallocation 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 may request a debriefing but may not appeal the following decisions of the CoC PRC:

- Non selection of a project for inclusion in the CoC application.

Applicants placed in Tier 1 may not appeal their rank on the Project Priority Listing.

Any agency that wishes to appeal or request a debriefing must notify the CoC Planner in writing via email at [contessa.riggs@maryland.gov](mailto:contessa.riggs@maryland.gov) with a copy to [COC.princegeorges@maryland.gov](mailto:COC.princegeorges@maryland.gov) no later than two business days after the priority ranking has been communicated in writing.

An appeal and/or debriefing request must state the following:

Agency name

Project name

Reason for appeal / debriefing (no longer than two pages)

If an appeal is 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.

The PRC will review all appeals and will make recommendations to the HSP Executive Committee for final approval. All impacted applicants (if any) will be notified of the outcome within 3 days of receipt of their appeal.

If a debriefing is requested, the CoC Lead will schedule the meeting and provide comments to the applicant regarding their application submission and factors impacting non-selection. There is no impact on other applicants or the PRC related to this administrative review.

## Renewal Projects

**Federal Threshold Criteria:** Active SAM registration; Valid UEI number; Nonprofit documentation; Not disbarred and otherwise federally qualified; Financial capacity and sufficient financial management system; and Code of Conduct on file with HUD.

**CoC threshold criteria:** HMIS participation; Coordinated Entry participation; Qualified Housing type; Housing first; Documented minimum match; Race Equity and Anti-discrimination policy

### Program Effectiveness – 25 points maximum

Available Points	Description	Score
5	<b>Cost effectiveness:</b> RRH cost per positive exit is within 10% of CoC average; TH cost per positive exit is within 10% of CoC average PSH annual cost per household is within 10% of CoC average	
5	<b>Housing First:</b> Review and monitoring of project policies and procedures show fidelity to housing first principals	
5	<b>Program Services:</b> Review of case notes and assessments to ascertain that participants are being provided with (or linked to) needed services	
5	<b>Staff:</b> Staff retention, case/staff ratios, and staffing levels	
5	<b>Partnerships:</b> Documented partnerships with other service providers including behavioral health, employment, and in-home medical support	

### Past Performance Monitoring – 20 points maximum

Available Points	Description	Score
5	<b>Audits and monitoring.</b> No unresolved findings and clean monitoring reports	
5	<b>Expenditures.</b> Consistent drawdowns (at least quarterly) and expended all funds	
5	<b>Timely Submittal and acceptance of project APR in SAGE</b>	
5	<b>Data Quality:</b> Above 95% - 5 pts. 90% - 3 pts. Below 90% 0 pts.	

### Population Served – 15 points maximum

Available Points	Description	Score
5	<b>Chronically Homeless</b>	
5	<b>Targeted CoC Sub-population(s): Elderly/aging, unaccompanied youth, returning citizens, veterans, survivors, and/or persons who have severe somatic, developmental, and/or behavioral health barriers</b>	
5	<b>System involvement:</b> Percent of people with a history of victimization/abuse, criminal history, and/or foster care involvement RRH – 50%. PSH – 75%. TH – 50%. TH-RRH – 50%	

### Severity of Needs – 15 points maximum

Available Points	Description	Score
5	<b>Disability:</b> Percent of participants with more than one disability at entry RRH – 50%. PSH – 75%. TH – 50%. TH-RRH – 50%	
5	<b>Income:</b> Percent of participants with zero income at entry RRH – 25%. PSH – 80%. TH – 50%. TH-RRH – 50%	
5	<b>Prior habitation:</b> Participants entering the project from a place not meant for human habitation. RRH – 25%. PSH – 75%. TH – 25%. TH-RRH – 25%	

**Performance Measures– 50 points maximum**

Available Points	Description	Score
5	<b>Bed Utilization: Threshold 85%</b> Above 85% - 5 pts. 85% - 3 pts. Below 85% - 0 pts	
5	<b>Coordinated Entry referrals:</b> 100% of program entries are from CE and 90% of CE referrals enter program	
10	<b>Housing stability:</b> at a minimum 80% of participants remain housed in the program or exit the program to permanent housing 80-84% 1 pt. 85-90% 3 pts. 91-94% 5 pts. 95-97% 7 pts. 98% or greater 10 pts.	
10	<b>Returns to homelessness:</b> No more than 10% of exits return to homelessness within 24 months More than 10% 0 pts. 5-10% 5pts. Less than 5% 10 pts.	
10	<b>Income:</b> At least 50% of adults increased or maintained income	
5	<b>Benefits:</b> At least 50% of adults received non-cash benefits	
5	<b>Length of Time Homeless:</b> A minimum of 90% of referrals from coordinated entry move into housing within 30 days * <i>excluding referrals for project specific units provided through public housing and/or CoC Section 8 set asides.</i>	

**Equity Factors – 25 points maximum**

Available Points	Description	Score
5	Recipient has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions.	
5	Recipient’s Board of Directors includes representation from people with lived experience	
5	Recipient has mechanisms in place for receiving and incorporating feedback from people with lived experience	
5	Do program participants mirror the demographics of the County’s homeless population? If not have plans been made to address this discrepancy?	
5	Recipient has policies and partnerships that address the needs of LGBTQ+, BIPOC, and other priority CoC sub-population individuals	

**Total Points Available = 150 plus 5 bonus points if match exceeds the required 25%**

## New Projects - CoC Bonus

**Federal Threshold Criteria:** Active SAM registration; UEI number; Nonprofit documentation; Not disbarred and otherwise federally qualified; Financial capacity and sufficient financial management system; and Code of Conduct on file with HUD.

**CoC threshold criteria:** HMIS participation; Coordinated Entry participation; Qualified Housing type; Housing first; Documented minimum match; and Race Equity and Anti-discrimination policy.

**All new permanent housing projects (PSH, TH-RRH & RRH) must be able to meet at least 3 of the 4 following goals and provide information on how they will do so.**

Yes/no	Description
	The type of housing proposed, including the number and configuration of units, will fit the needs of program participants
	The supportive services offered will ensure successful retention in or help to obtain permanent housing.
	The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply (e.g., Medicare, Medicaid, SSI, Food Stamps, workforce training, early childhood education)
	Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing)

### Bonus Project Evaluation Criterion

#### Experience – 25 points maximum

Available Points	Description	Score
5	Experience of the applicant or sub-recipients in providing services including but not limited to housing support, behavioral health, case management, and employment to the proposed population.	
5	Experience of the applicant or sub-recipients in providing housing to the proposed population.	
10	Experience of the applicant or sub-recipients in applying a Housing First approach	
5	Experience effectively using federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.	

#### Financial – 30 points maximum

Available Points	Description	Score
15	Project is cost effective: Cost per household is within 10% of the CoC average cost per household for housing type	
5	No significant findings were identified in most recent annual audited statement. If the organization is not required to have an audit, then proof of timely filing of 990 and satisfactory description of organization's fiscal controls.	
10	Documented match exceeds required 25%. 26-30% - 2 pts. 31-40% - 5 pts. 41-50% - 8 pts. Above 51% - 10 pts.	



**Design of Housing and Supportive Services- 40 points maximum**

Available Points	Description	Score
5	Proposed project follows the tenants of housing first	
10	Proposed project will improve overall CoC System Performance (housing retention, reducing length of time homeless, reducing returns to homelessness, reducing unsheltered homelessness)	
5	Project can be implemented rapidly. Describe plan to have project open by July 1, 2025	
10	Describe the plan to assist clients in rapidly securing and maintaining permanent housing, and ensuring housing is appropriate to client household. Plan should address program location, housing type, landlord recruitment and retention, and services designed to assist households in understanding their rights and responsibilities as tenants.	
10	Describe the plan to provide supportive services to the proposed population including type and scale, assistance to obtain mainstream benefits and employment, community integration, connection to additional support services such as home health care and behavioral health, low barrier access, and person centered goal planning	

**Coordination with Housing and Health Care – 35 points maximum**

Available Points	Description	Score
15	Leveraging Housing Resources: At least 25% of total units are not funded by HUD CoC or ESG	
15 (20 with bonus)	Leveraging Health Care Resources: An amount that is equivalent to 25 percent of the funding being requested for the project will be covered by the healthcare organization (includes behavioral health) <i>Note:</i> 5 points will be added if the lead applicant is a validated Medicaid Billable Entity	

**Equity Factors – 20 points maximum**

Available Points	Description	Score
5	Recipient has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	
5	Recipient’s Board of Directors includes representation from people with lived experience	
5	Recipient has mechanisms in place for receiving and incorporating feedback from people with lived experience	
5	Recipient has policies and partnerships that address the needs of LGBTQIA+, BIPOC, and other priority CoC sub-population individuals	

**Total Points Available = 145 plus 5 bonus points if the prime applicant is Medicaid reimburseable**

## New Projects – DV Bonus

**Federal Threshold Criteria:** Active SAM registration; Valid EIN number; Nonprofit documentation; Not disbarred and otherwise federally qualified; Financial capacity and sufficient financial management system; and Code of Conduct on file with HUD.

**CoC threshold criteria:** HMIS participation; Coordinated Entry participation; Qualified Housing type; Housing first; Documented minimum match; and Race Equity and Anti-discrimination policy.

**All new permanent housing projects (PSH, TH-RRH & RRH) must be able to meet at least 3 of the 4 following goals and provide information on how they will do so.**

Yes/no	Description
	The type of housing proposed, including the number and configuration of units, will fit the needs of program participants
	The supportive services offered will ensure successful retention in or help to obtain permanent housing.
	The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply (e.g., Medicare, Medicaid, SSI, Food Stamps, workforce training, early childhood education)
	Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing)

### Bonus Project Evaluation Criterion

#### Experience – 25 points maximum

Available Points	Description	Score
5	Experience of the applicant or sub-recipients in providing services including but not limited to housing support, behavioral health, case management, and employment to the proposed population.	
5	Experience of the applicant or sub-recipients in providing housing to the proposed population.	
5	Experience of the applicant or sub-recipients in applying a Housing First approach	
5	Experience of the applicant or sub-recipients in providing services to survivors of domestic violence, dating violence, trafficking or stalking	
5	Experience effectively using federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.	

#### Financial – 30 points maximum

Available Points	Description	Score
15	Project is cost effective: Cost per household is within 10% of the CoC average cost per household for housing type	
5	No significant findings were identified in most recent annual audited statement. If the organization is not required to have an audit, then proof of timely filing of 990 and satisfactory description of organization's fiscal controls.	
10	Documented match exceeds required 25%. 26-30% - 2 pts. 31-40% - 5 pts. 41-50% - 8 pts. Above 51% - 10 pts.	

**Design of Housing and Supportive Services- 40 points maximum**

Available Points	Description	Score
5	Proposed project follows the tenants of housing first	
10	Proposed project will improve overall CoC System Performance (housing retention, reducing length of time homeless, reducing returns to homelessness, reducing unsheltered homelessness)	
5	Project can be implemented rapidly. Describe plan to have project open by July 1, 2025	
5	Proposed Project has a strong plan to provide trauma-informed, victim centered services.	
10	Describe the plan to assist clients in rapidly securing and maintaining permanent housing, and ensuring housing is appropriate to client household. Plan should address program location, housing type, landlord recruitment and retention, and services designed to assist households in understanding their rights and responsibilities as tenants. Plan should also include an immediate safety relocation policy.	
5	Describe the plan to provide supportive services to the proposed population including type and scale, assistance to obtain mainstream benefits and employment, community integration, connection to additional support services such as home health care and behavioral health, low barrier access, and person centered goal planning	

**Coordination with Housing, Health Care and CoC Participation – 30 points maximum**

Available Points	Description	Score
10	Leveraging Housing Resources: At least 25% of total units are not funded by HUD CoC or ESG	
10	Leveraging Health Care Resources: An amount that is equivalent to 25 percent of the funding being requested for the project will be covered by the healthcare organization (includes behavioral health)	
10	100% of referrals will come from the Coordinated Entry System	

**Equity Factors – 20 points maximum**

Available Points	Description	Score
5	Recipient has under-represented individuals (BIPOC, LGBTQ+, etc) in managerial and leadership positions	
5	Recipient’s Board of Directors includes representation from people with lived experience	
5	Recipient has mechanisms in place for receiving and incorporating feedback from people with lived experience	
5	Recipient has policies and partnerships that address the needs of LGBTQIA+, BIPOC, and other priority CoC sub-population individuals	

**Total Points Available = 145**