

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 2024 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2024 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 2024 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

HUD publishes resources on the HUD.gov website at [CoC Program Competition](#) to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MS-501 - Mississippi Balance of State CoC

1A-2. Collaborative Applicant Name: Mississippi United to End Homelessness

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Mississippi United to End Homelessness

1B. Coordination and Engagement—Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at [CoC Program Competition](#) to assist you in completing the CoC Application. Resources include:

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1B-1.	Inclusive Structure and Participation—Participation in Coordinated Entry. NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
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In the chart below for the period from May 1, 2023 to April 30, 2024:	
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 CoC Board Members	Participated in CoC's Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	No	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	No	Yes
4.	Disability Service Organizations	Yes	Yes	Yes
5.	EMS/Crisis Response Team(s)	Yes	No	Yes
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	Yes	Yes	Yes
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	No	Yes
9.	Law Enforcement	Yes	No	Yes
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	Yes	Yes
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	Yes	Yes
16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes

17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	No	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	No	No	Yes
29.	State Domestic Violence Coalition	Yes	No	Yes
30.	State Sexual Assault Coalition	Yes	No	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

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

1B-1a.	Experience Promoting Racial Equity.	
	NOFO Section III.B.3.c.	

Describe in the field below your CoC's experience in effectively addressing the needs of underserved communities, particularly Black and Brown communities, who are substantially overrepresented in the homeless population.

(limit 2,500 characters)

The MS BOS CoC has continually striven to ensure racial equity in its effort to end homelessness. This started with the use of the Racial Equity Analysis Tool (REAT) in 2019. Our current CoC Director, a woman of color, led the effort to review all CoC, ESG, and SSVF, funded agencies. The tool has been utilized consistently since the start, with areas of concern identified and addressed by CoC leadership. Our current CoC Director's work in this area was so pronounced that she was asked to participate in the NAEH's Racial Equity Network in 2019.

The tool, although useful in measuring racial equity, was not sufficient to ensure that the valued perspectives of underserved communities (particularly BIPOC communities) truly influenced CoC strategy and program designs. The CoC Governing Council (GC) understood, with a large percentage of BIPOC members (currently at 30% of the GC), that continued attention and effort would be needed and that members of the underrepresented communities needed influence. This led to the establishment of the Consumer Advisory Group (CAG) that convenes quarterly and is a cross section of the homeless population, and that group consists of more than 50% of underserved communities. The reports from the CAG are communicated to CoC and agency leadership, so that true analysis and recommendations are implemented.

These efforts are bolstered by the CoC staff coming from underserved communities. The current CoC Director and many other staffers facilitating this work also belong to those communities. Time and again, the perspective/life experiences of that team inform the work of the GC, and that GC depends heavily on its BIPOC members, staff, and voices from the CAG.

Our focus does not end with just designing the strategy and oversight bodies to ensure the promotion of racial equity, the most meaningful impact is the continued focus on all populations in the work of the CoC. An example: when our REAT revealed that Black participants were less likely to opt into transitional housing, CoC leadership took the data and brought it to the stakeholders to understand this trend. This involved an honest discussion of what dynamics contributed to the issue. It was determined that the trend was caused by a lack of TH in the areas where Black participants were located. This led the CoC to focus TH-funding to underserved areas and to confirm that those units were implemented in a methodology consistent with the needs of the population.

1B-2.	<p>Open Invitation for New Members.</p> <p>NOFO Section V.B.1.a.(2)</p>
Describe in the field below how your CoC:	
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
3.	invited organizations serving culturally specific communities experiencing homelessness in your CoC's geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).

(limit 2,500 characters)

1. The CoC has an open invitation process, meeting calendars, as well as information about membership and the purpose of the CoC available at all times on the CoC website -www.msbos.org. There is an invitation for membership at the Annual CoC Membership Meeting. Membership is not required for meeting attendance. The CoC employs a CoC Director who, as part of her job description, targets outreach to regional non-profits, state and local government agencies, business owners, and individuals, including homeless and formerly homeless individuals to solicit new members.
2. The CoC strives to ensure that its membership includes representatives of all community resources to prevent and end homelessness. Area homeless service providers are encouraged to bring persons receiving services to the region's monthly, semi-monthly, and annual meetings of regional groups and the CoC. Area members are asked to invite other parties interested in preventing and ending homelessness to attend meetings. An email blast is sent out before any meeting, informing 200 email recipients of meeting times and locations. The CoC has been interviewed in print, television, and radio regarding homelessness within Mississippi. Communication is available in print, audio, and visual formats that consider the needs of persons with disabilities. Meetings are held in locations that are accessible to persons with special mobility needs. The employed CoC Director confirms needed accommodations are available to make all CoC meetings open and inclusive. Meetings are held in person and via video conferencing to provide accessibility to as many people as possible regardless of limitations to in-person attendance, such as mobility issues.
3. In addition, the CoC Director ensures that outreach is conducted with organizations whose focus is providing services to marginalized groups, which may be reluctant to seek out involvement without such outreach, including Black, Latino, Indigenous, LGBTQ+, and persons with disabilities. Individuals with lived experiences are invited to participate with the CoC Outreach Workers who routinely provide assistance to street homeless and persons residing in encampments and offer, among other services, information about the CoC and its meetings. Agencies that provide supportive services to indigenous people have a seat at the table, and the CoC Director has ensured they are educated on inclusion processes, and grant opportunities.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.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;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. The MS-501 CoC works with several service providers, organizations, and individuals to prevent and end homelessness within the geographic area. The CoC is always soliciting new agencies, organizations, and individuals to become a part of furthering the federal strategic plan to prevent and end homelessness. The CoC hosts listening sessions during the CoC annual meeting, regional meetings and also solicits anonymous feedback from stakeholders through an online submission portal.
2. The CoC has monthly regional meetings where area service providers share what is working in their community to prevent and end homelessness. Meetings are used to train and educate fellow service providers on area resources. The CoC and member agency staff, including the lead agency, attend regional public hearings held by the state to update the area's consolidated plan. In addition, focus groups of persons experiencing homelessness (consumer advisory group - CAG) currently occur quarterly to discuss CoC program policies and their impact. First Place for Youth maintains a youth advisory council that provides necessary feedback given the unique perspective of youth experiencing homelessness and meets regularly and reports to the CoC GC to give needed action items.
3. Public meetings and forums are held in locations that are accessible to persons with special mobility needs. The employed CoC Director confirms needed accommodations are available to make all CoC meetings open and inclusive. Meetings are held in person and via video conferencing to provide accessibility regardless of limitations to in-person attendance, such as mobility issues or quarantine due to contagious illnesses. The CoC has a partnership with a professional ASL interpreter for CoC meetings. Information is distributed to member agencies and the public through email blasts, distribution of pamphlets and flyers by outreach teams. The CoC values the knowledge of its service providers and the community and has ensured there are accessible electronic formats such as the CoC website, including the ability to leave replies and contact CoC staff directly.
4. Updates to the CoC strategic plans, CoC Governance Charter and Written Standards are based on the feedback received. Feedback from the CAG resulted in changes to Written Shelter Standards, which now include an expanded policy regarding equal access and improved case management best practices for shelter providers.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	

Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;
2.	about how project applicants must submit their project applications—the process;
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and

4. ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.

(limit 2,500 characters)

1. The CoC notified the public of the funding competition on Friday, August 23, 2024 via the landing page of its website in both English and Spanish. The notification stated that the CoC was accepting renewal applications and new applications from agencies that had not previously been funded- from the date of public notice to the submission deadline of Wednesday, September 25, 2024. In addition, information on the funding opportunity was distributed through an email listserv to over 200 recipients and through the member agency rosters of the Mississippi Alliance of Nonprofits and Philanthropy, United Ways of Northeast and Southeast Mississippi, and the MS Press Assoc (representing all MS newspapers). The CoC also made announcements at its regional meetings across the state and ensured access to electronic formats.
2. Project applications are submitted to the CoC via eSNAPS. Multiple CoC Application Office Hours were held via Zoom with agencies interested in applying this year but have not previously applied to ensure their education on eSNAPS and HUD threshold requirements and the CoCs ranking process. The CoC staff targeted agencies that had not previously sought funding throughout the year to encourage them to apply. Eight new agencies submitted letters of intent this year. Interested new agencies were given additional TA by CoC staff, including navigating eSNAPS and understanding project structures during the application process. TA was available to all applying applicants on technical matters related to eSNAPS. TA was accessible for newly applying applicants from 8am until 8pm daily. The CoC aims to assist new applicants, especially those who bridge gaps in area services, to create sound projects that help to further the CoC goals of preventing and ending homelessness for all people.
3. The CoC communicated in its public notices that an unbiased committee would select projects during the rank and review process for inclusion in the MS-501 CoC application to HUD. The CoC also communicated via public notice that the rank and review process includes an agency threshold review, a rating procedure using agency performance measure and utilization, and consideration of the needs and priorities of the CoC.
4. The CoC ensured that all communication was accessible by those with disabilities. In-person meetings were held in ADA-accessible locations and virtual formats that were accessible to anyone with physical, visual, or hearing impairment.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.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 the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
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)	Yes
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
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)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	
18.		

1C-2.	CoC Consultation with ESG Program Recipients. NOFO Section V.B.1.b.	
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In the chart below select yes or no to indicate whether your CoC:

1.	Consulted with ESG Program recipients in planning and allocating ESG Program funds?	Yes
2.	Provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?	Yes
3.	Ensured local homelessness information is communicated and addressed in the Consolidated Plan updates?	Yes
4.	Coordinated with ESG recipients in evaluating and reporting performance of ESG Program recipients and subrecipients?	Yes

1C-3.	Ensuring Families are not Separated. NOFO Section V.B.1.c.	
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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 sexual orientation and gender identity:

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 family members are not separated?	No
3.	Worked with CoC and 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 questions or requesting technical assistance to resolve noncompliance by service providers?	No

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts. NOFO Section V.B.1.d.	
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Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts. NOFO Section V.B.1.d.	
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Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

The CoC focuses on connecting clients to education services from early childhood to college and trade schools. The CoC has an MOU with the Excel by 5 Early Childhood Coalition to train CoC member agencies on connecting clients to early childhood resources in their communities. The CoC works with education agencies (SEAs and LEAs) at a regional and state level to ensure connections of member agencies with public schools within their service area. Not only are education providers active members of the CoC, but they also meaningfully participate in regional coalition meetings and the CES. CoC member agencies serving school-age children throughout the state have MOUs with local public schools and McKinney-Vento liaisons that clearly describe referral processes. The CoC also maintains MOU agreements with Head Start programs across the coverage area (included in attachments). The CoC and lead agency staff have presented information on homeless service availability and operations at the county and municipal McKinney-Vento statewide conferences and routinely distribute information on accessing help to SEAs and LEAs. The CoC works with the Mississippi Department of Education and routinely participates in McKinney-Vento-related planning efforts. This has led to direct referral systems both to and from CoC programs and school districts throughout the CoC coverage area.

Further, the CoC has formalized education provider partnership requirements in the CoC's Policies and Procedures. In the CoC Written Standards, service providers are required to designate a staff person as an education liaison to ensure children are enrolled in school and connected to appropriate services in the community. The CoC Governance Charter provides a seat on the Governing Council and all other committees to education representatives such as school districts and community colleges and universities. Currently, an administrator at a community college and advocate for education is a member of the CoC Governing Council and has an MOU with the CoC to help provide guidance on navigating the higher education system.

1C-4b.	Informing Individuals and Families Who Have Recently Begun Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who have recently begun experiencing homelessness of their eligibility for educational services.

(limit 2,500 characters)

The CoC recognizes that individuals and families experiencing homelessness face barriers to education and job readiness. To address these needs, our adult educational services are designed to provide essential support and resources to those who have recently begun experiencing homelessness. The CoC has Written Standards regarding informing individuals and families, who become homeless, of their eligibility for educational services. The policies and procedures (and accompanying educational service provider list) are publicly accessible on the CoC website. Written Standards are also provided to all member agencies, and compliance is reviewed through on-site monitoring visits. **PROGRAM REQUIREMENTS FOR ALL PROGRAMS** include: Programs must have written policies and procedures and consistently apply them to all participants. Programs that serve households with children must have a staff person designated as the educational liaison that will ensure that children are enrolled in school and connected to appropriate services in the community (including early childhood programs such as Head Start, Part C of the Individuals with Disabilities Education Act, and the McKinney Vento education services).

Our outreach teams focus on informing individuals and families about their eligibility for various educational programs. We collaborate with local shelters, community organizations, and service providers to disseminate information about available resources, including adult basic education, GED preparation, vocational training, and higher education opportunities.

CoC outreach and case management staff are trained to emphasize the importance of education as a pathway to stability and self-sufficiency, highlighting the various funding options and scholarships available specifically for individuals facing homelessness.

Additionally, agency staff provide one-on-one discussions to assess individual needs, provide guidance on enrollment processes, and connect participants with relevant educational institutions. The CoC aims to empower individuals and families to pursue their educational goals, ultimately leading to improved life outcomes and a greater sense of hope for the future.

Through these efforts, the CoC strives to break down barriers and provide homeless individuals and families with the tools and resources they need to rebuild their lives through education.

1C-4c. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	NOFO Section V.B.1.d.
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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	No
2. Child Care and Development Fund		No	No
3. Early Childhood Providers		No	No

4.	Early Head Start	Yes	No
5.	Federal Home Visiting Program—(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	Yes
6.	Head Start	Yes	No
7.	Healthy Start	No	Yes
8.	Public Pre-K	No	No
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking—Collaboration with Federally Funded Programs and Victim Service Providers.
	NOFO Section V.B.1.e.

In the chart below select yes or no for the organizations your CoC collaborates with:

	Organizations	
1.	State Domestic Violence Coalitions	Yes
2.	State Sexual Assault Coalitions	No
3.	Anti-trafficking Service Providers	Yes
	Other Organizations that Help this Population (limit 500 characters)	
4.		

1C-5a.	Collaborating with Federally Funded Programs and Victim Service Providers to Address Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.
	NOFO Section V.B.1.e.

Describe in the field below how your CoC regularly collaborates with organizations that you selected yes to in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1. The MS Balance of State CoC collaborates with all eight domestic violence shelters within our service area. Collaboration with the Mississippi Coalition Against Domestic Violence (MCADV) also ensures that the voices of domestic violence survivors and service organizations are ever present in the CoC's planning efforts. According to our partners, MCADV, Mississippi stands out as having robust laws protecting domestic violence victims. This is primarily attributed to the efforts of the MCADV. Collaborating with Victim service providers is an integral part of updating CoC-wide policies. Staff from VAWA-funded agencies participate in the CoC at all levels of planning. DV providers are also available for consultation in the ranking and review committee and to inform agencies to ensure safe projects are created as part of the CoC funding process. Moving forward, DV service providers will be included in the monitoring of non-DV agencies to ensure that policies and procedures address the needs of persons who may be fleeing abuse. Site visits to funded and non-funded agencies and a review of agency policies are both in place to ensure they include an emergency transfer policy. Furthermore, policies that address situations where persons are being abused by other household members (while enrolled in the program) are reviewed to ensure that all housing first and victim safety measures are followed.
2. The CoC's funded and non-funded domestic violence and human trafficking providers annually present trauma-informed educational information to the CoC member agencies. To ensure accessibility and coverage of said training, both regional and statewide membership meetings are utilized to provide agencies with the trauma-informed practices to ensure the safety of persons fleeing domestic violence, dating violence, sexual assault, and stalking (see attached MOU with MCADV). The CoC also hosts an annual training focused on appropriately serving DV victims and survivors through the CoC's CES. The last annual training was held in September 2023. The CoC also hosts regional trainings on DV resources within each region, so CoC agencies can offer immediate (trauma-informed) assistance to clients when abuse is detected.

1C-5b.	<p>Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.</p> <p>NOFO Section V.B.1.e.</p>	
<p>Describe in the field below how your CoC's coordinated entry addresses the needs of DV survivors by including:</p> <p>1. safety planning protocols; and</p> <p>2. confidentiality protocols.</p>		

(limit 2,500 characters)

Appointing DV provider staff on all planning committees, including the CES committee, helps ensure that safety and protection are considered when developing policy. This input was also instrumental in developing procedures governing the CoC-wide CES policies. Safety and confidentiality are at the forefront of all CE policies as a result. Policies are in place bar any information of persons fleeing violence from the HMIS, by-name list, and the mainstream CES. DV service providers maintain a completely separate CES but have access to the mainstream service providers for prioritization. DV provider staff or dedicated members of the CE staff serve as contact points for these placements.

1. Safety Planning Protocols: The ESG and CoC program rules provide several safeguards and exceptions to using the CES for domestic violence, dating violence, sexual assault, and stalking victims. Safeguards include but are not limited to trauma informed practices in assessments, households control the referral process and addressing safety standards in CE. ESG nor CoC rules require victim service providers to use the CoC's CES process but allows them to do so. These providers can use an alternative CE for victim services in the area that meets HUD's minimum CES requirements. The CoC ensures that protected programs have a comparable means to divert domestic violence victims. All persons accessing the CES are asked via the pre-screening questions if they are fleeing or attempting to flee DV. If a person or persons are identified as fleeing or attempting to flee DV, the provider – including non-victim service providers – must provide an immediate referral to and assistance accessing emergency services, such as domestic violence hotlines and/or shelters. The person or persons have the right to decline any referrals to or assistance with access to emergency services. Declining referrals or assistance with access will not negatively impact the person's access to the CES.
2. Confidentiality Protocols: All providers – including non-victim service providers – must provide safe and confidential access to the CES for all people, including those who are fleeing or attempting to flee domestic violence (including dating violence, sexual assault, or stalking). It is not required that individuals fleeing or attempting to flee domestic violence be entered onto the by name list; however, an appropriate referral must be made.

1C-5c.	Coordinated Annual Training on Best Practices to Address the Needs of Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. NOFO Section V.B.1.e.	
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In the chart below, indicate how your CoC facilitates training for project staff and coordinated entry staff that addresses best practices on safety planning and confidentiality protocols:

	Project Staff	Coordinated Entry Staff
1. Training Occurs at least annually?	Yes	Yes
2. Incorporates Trauma Informed best practices?	Yes	Yes
3. Incorporates Survivor-Centered best practices?	Yes	Yes
4. Identifies and assesses survivors' individual safety needs?	Yes	Yes
5. Enhances and supports collaboration with DV organizations?	Yes	Yes

6.	Ensures survivors' rights, voices, and perspectives are incorporated?	Yes	Yes
Other? (limit 500 characters)			
7.			

1C-5d.	Implemented VAWA-Required Written Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
NOFO Section V.B.1.e.		

Describe in the field below:	
1.	whether your CoC's written policies and procedures include an emergency transfer plan;
2.	how your CoC informs all households seeking or receiving CoC Program assistance about their rights to an emergency transfer;
3.	what your CoC requires households to do to request emergency transfers; and
4.	what your CoC does in response to households requesting emergency transfers.

(limit 2,500 characters)

1. The Emergency Transfer Plan Policies and Procedures for DV, Dating Violence, Sexual Assault, and Stalking Survivors were adopted by the CoC Governing Council as a section of the CoC's Written Standards in 2022.
2. CoC-funded agencies must communicate an emergency transfer policy to persons and families at entry into the project. Proof of such communication is maintained in the individual, or family receiving services, chart. Part of any CoC on-site monitoring visit includes verifying the existence of and retaining evidence of communication of all transfer policies. The CoC works with member agencies to ensure that transfer policies follow HUD regulations and are comprehensive and victim-centered. Non-funded CoC members are also educated on transfer policies and encouraged to adopt them within their organizations. Education on resources to support victims fleeing domestic violence is provided to all member agencies. Funded and non-funded agencies are encouraged to work together to ensure the availability of transfer units when the need arises to help the victim maintain permanent housing.
3. The CoC keeps the requirements of requesting emergency transfers as simple as communicating with the program staff. This allows for a level of responsiveness that is proportionate to the threat of harm to the individual or household. Therefore, for a program participant to request an emergency transfer, they only need to communicate with a staff person that they trust. CoC programs then quickly pivot to ensure that the household is safely moved into a new unit.
4. CoC program staff are trained to treat every request for emergency transfer with intense care. In a victim-centered, trauma-informed approach, CoC program staff are trained to place the client's safety as the first and only priority. Program compliance is only satisfied when the client is quickly and safely transferred to a unit where they are (and where they feel) safe. The client works with the staff person of their choice in the process, and only directors are included to confirm that the transfer was completed and the client is secure. The client and their preferred staff work together to determine the best location and unit where the client should be transferred, and program staff work to secure the unit in a time that ensures the client's safety (this applies whether it is an internal and/or external transfer).

1C-5e.	Facilitating Safe Access to Housing and Services for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures households experiencing trauma or a lack of safety related to fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within your CoC's geographic area.

(limit 2,500 characters)

Through the inclusion of DV providers (and those with lived experience) on CoC leadership/committees, the training of CoC member agencies, and the systematic processes put in place, the CoC ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have access to all housing and services available in the CoC geographic area. Through its regional meetings, the CoC ensures that all eight domestic violence shelters across the CoC are informed of other available resources and how to refer survivors to housing and supportive services. In addition, DV agency staff members sit on the CES committee, and provide all CE staff with training in victim services, trauma-informed care, and the use of culturally-relevant assessments and screening tools. Priority is given to persons and families who are fleeing abuse, so that they are provided with the necessary services to address the physical/emotional, safety, privacy, and confidentiality needs, they may present with. Additionally, the CoC works with all funded and non-funded agencies to help remove barriers to housing services. All funded agencies follow a housing-first approach. Non-funded agencies are educated in low-barrier housing first, and many have also adopted the practice especially when regarding those fleeing abuse.

1C-5f.	Identifying and Removing Barriers for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC ensures survivors receive safe housing and services by:

1. identifying barriers specific to survivors; and
2. working to remove those barriers.

(limit 2,500 characters)

1. The CoC proactively identifies and mitigates systemic housing barriers for those fleeing or attempting to flee abuse through:
 - a. The inclusion of DV providers (and those with lived experience) in CoC leadership
 - b. The specialized training provided by DV service providers
 - c. The ongoing review and assessment by CoC leadership as guided by DV service providers

Given this valuable input from stakeholders in DV services, the CoC's CE program maintains policies that protect, support, prioritize, and include all persons fleeing violence. As a result, domestic violence providers across the CoC service area maintain a CE process that prioritizes the placement of people fleeing domestic violence outside the mainstream CES. Including DV provider staff on the mainstream CE committee and their presence at all regional CE meetings equips the CoC with the necessary capacity to identify barriers that are specific to survivors and take the necessary steps to remove them.

2. Through the ongoing feedback from the previously mentioned stakeholders, the CoC continually works to remove the barriers identified for survivors accessing safe housing. For example, when presenting a survivor for prioritization, DV shelter staff are permitted to bypass the by-name list and mainstream CES in its entirety. This practice helps ensure access to all services available through CE without risking the safety of a person fleeing violence. Another example is that of legal services for victims/survivors. After hearing from participants, the CoC recognized that those fleeing (often with children) can be further traumatized (and housing efforts significantly hampered) by issues arising through the court system. Therefore, the CoC collaborative applicant has begun offering legal services to CoC member agencies to ensure that legal issues do not keep survivors from receiving safe housing. The services include: orders of protection, filing of fault divorces (which are complex in our state), and child custody issues. This allows the survivor the security of knowing that their abuser cannot wield the court system to do further harm, and it gives the survivor the safe space needed to focus on their goals of housing, employment, education, and therapy as they desire. The CoC keeps its finger on the pulse of the survivor experience to ensure that access to safe housing is continually available in our coverage area.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+—Anti-Discrimination Policy and Equal Access Trainings.	
	NOFO Section V.B.1.f.	

1.	Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
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)?	Yes
3.	Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy—Updating Policies—Assisting Providers—Evaluating Compliance—Addressing Noncompliance. NOFO Section V.B.1.f.	
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Describe in the field below:	
1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC's process for evaluating compliance with your CoC's anti-discrimination policies; and
4.	your CoC's process for addressing noncompliance with your CoC's anti-discrimination policies.

(limit 2,500 characters)

1. The CoC maintains updated anti-discrimination policies that consider the rights of the LGBTQ+ population. All CoC policies follow the guidelines in the equal access final rule, fair housing regulations, and the gender identity final rule. In addition, the CoC engages members of the LGBTQ+ community when adjusting its anti-discrimination policies to ensure that they are free from language that might further impede access for members of the LGBTQ+ community. Finally, the CoC will update policies on an ongoing basis based on federal policy changes or due to community feedback from the LGBTQ+ community and its allies.
2. When adjusted, updated policies are shared with the CoC member agencies to ensure they are implemented system-wide. In addition, CoC member agencies are also offered support and feedback when creating their anti-discrimination policies.
3. The CoC staff reviews funded agency anti-discrimination policies during site visits. Agencies are required to submit to the CoC any changes made to policies after review. The CoC has an open process for the public to report grievances, including reporting on service organizations within its area.
4. Any agency found to be discriminating against anyone for any reason, including being a member of the LGBTQ+ community, is excluded from funding opportunities available through the CoC. Additional actions can include informing other area HUD funding providers and removal from membership to the CoC.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area—New Admissions—General/Limited Preference—Moving On Strategy. NOFO Section V.B.1.g.	
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You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report 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:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing or Housing Choice Voucher Program During FY 2023 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Tennessee Valley Regional Housing Authority	4%	Yes-Both	No
MS Regional Housing Authority V		No	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs. NOFO Section V.B.1.g.	
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	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 2,500 characters)

1. The CoC has ongoing partnerships with 10 PHAs throughout the state to gain inclusion in HMIS and to develop preferences for the homeless and persons housed in CoC PSH programs. Tennessee Valley Regional Housing Authority, the largest PHA in the CoC geographical area, has a number of preferences that include the homeless population. Such as: The Emergency Housing Preference connects those experiencing literal homelessness to TVRHA's Emergency Housing Vouchers (EHV). Including an MOU with the CoC to execute 56 EHV. The Domestic Violence Preference connects victims of domestic violence within HUD's category 4 of the homeless definition to housing vouchers. The Foster Youth to Independence Preference connects homeless youths to the Foster Youth to Independence Vouchers, including an MOU with the MS Department of Child Protective Services, Youth Advocates, Youth Service Providers, and the CoC. The CoC has worked with PHA's to apply for (and receive) mainstream vouchers, and has utilized that initiative to increase referrals of households experiencing homelessness into the PHA. Additionally, the CoC worked with the same PHA to apply for the FUP program, but efforts were hindered by the lack of available, affordable housing. The CHOICE Preference connects homeless and at-risk individuals with a serious mental illness to Section 8 housing and mental health treatment. PHAs in the area, including 10 MS Regional Housing Authorities, make referrals into the CES. The CoC has worked with area PHAs to accept homeless clients referred to their services, with CoC agencies providing security deposits in certain cases. Additionally, CoC-funded PSH programs routinely refer persons for PHA assistance and have successfully secured Section 8 housing for PSH clients in recent years. The CoC is focusing on working with the PHAs to improve how PHA case managers collect data and eventually allow the CoC to collect the data on behalf of the PHA. In addition, through the necessity of PHAs to work more closely with CoCs, the CoC has built better working relations with PHAs while administering EHV, FYI, and HCV projects. As a result, the CoC now has on its governing council two executive directors from area PHAs. Mr. Ailrick Young, Executive Director of the Housing Authority of the City of Laurel, and Mr. Jason Spencer, Executive Director of Tennessee Valley Regional Housing Authority, joined the governing council in October 2021.

2. N/A

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	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
Other (limit 150 characters)		
5.		

1C-7c.	<p>Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.</p> <p>NOFO Section V.B.1.g.</p>	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	No
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	No
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	

1C-7d.	<p>Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.</p> <p>NOFO Section V.B.1.g.</p>	
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1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	FUP

1C-7e.	<p>Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).</p> <p>NOFO Section V.B.1.g.</p>	
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	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?	Yes
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1D. Coordination and Engagement Cont'd

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Preventing People Transitioning from Public Systems from Experiencing Homelessness.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the public systems 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.	Prisons/Jails?	Yes
2.	Health Care Facilities?	Yes
3.	Residential Care Facilities?	Yes
4.	Foster Care?	Yes

1D-2.	Housing First–Lowering Barriers to Entry.	
	NOFO Section V.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 2024 CoC Program Competition.	14
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 2024 CoC Program Competition that have adopted the Housing First approach.	14
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2024 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

Describe in the field below:

1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation;
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach; and
4.	what your CoC has done to improve fidelity to Housing First.

(limit 2,500 characters)

1. The CoC regularly monitors projects in their adherence to Housing First (HF). CoC leadership utilizes HMIS data and CE participation data in this effort. In reviewing project applicant's fidelity to HF, each agency was given a HF assessment that was evaluated by the CoC staff afterward. The CoC staff gave the agency feedback and a suggested plan of action based on the evaluation.

2. Primary Program Factors:

- Length of Time Enrollment to Housing
- Requirements to Access/Retain Unit
- Program Action When Participants Lose Housing
- Services Offered to Maintain Housing
- Requirement for Clients with Subst. Abuse/Mental Health
- Criminal Background

3. The CoC annually evaluates funded agencies' implementation of HF outside of the local funding competition. Using:

- HF Self-Evaluation Completed by Agency
- HF Assessment Questionnaire Completed by Agency
- CoC Review of Agency's HF Policies
- CoC Review of Agency's Self-Evaluation and Assessment Questionnaire
- CoC Complete the HUD HF Assessment Tool
- A meeting between CoC and Agency to review
- Review Summary and Corrective Action Plan (as needed) sent to the Agency

4. The CoC's ongoing evaluation of HF, involves HMIS data, CES data, and feedback from outreach teams. First, the CoC monitors the number of persons a project admits from the CES, focusing those most challenging to house, including chronically homeless. By then reviewing those that were denied housing (or went unhoused) after being referred by CES, the CoC is given a clear picture on whether HF was utilized by the referral agency. The CES also distributes Monthly Metric Analysis (MMA's) to communicate intakes from CES (outreach) to actual housing. MMA's are distributed to CoC agencies with an accompanying grade for their CES usage and implementation of HF. The data-driven approach has been very useful in evaluating HF, but the CoC went further by receiving feedback from outreach teams on which agencies actually house those experiencing homelessness and which rarely/never house. Also, the CoC began utilizing the first-hand perspectives from our Consumer Advisory Group (CAG). The voices from that group have strengthened the resolve of agencies to HF by both showing its compassion and effectiveness in ending homelessness. With the formal documents, candid feedback of outreach teams, input from the CAG, and the accompanying data and reporting, the CoC closely monitors fidelity to HF.

1D-3. Street Outreach—Data—Reaching People Least Likely to Request Assistance.	NOFO Section V.B.1.j.
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Describe in the field below how your CoC tailored its street outreach to people experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

Outreach is fundamental to the CoC's efforts in addressing homelessness. Our success relies on consistent, thorough, and effective outreach, led by individuals with lived experience. Many Outreach Coordinators (OCs) bring their personal insights to this work, training others on how to effectively engage with communities across the CoC.

Effective outreach must be relational, trust-building, and person-centered. Many individuals reluctant to seek help have previously had negative experiences with outreach, often feeling it was intrusive. Our approach prioritizes building genuine relationships, treating individuals in encampments with respect and as guests in their living spaces.

To enhance our outreach efforts, we collaborate with a diverse network of partners, including faith-based organizations, public library staff, sanitation and public works departments, hospitals, healthcare workers, landlords, Tribes and Tribally Designated Housing Entities, and first responders. These collaborations help us reach vulnerable populations and create a comprehensive support system.

As trust develops, OCs introduce housing and service options, ensuring potential clients understand what is available. However, many will only engage in this conversation once they feel secure in their relationship with the OC. OCs are well-versed in available resources, guiding clients through the Coordinated Entry System (CES) and making warm handoffs to Case Managers and Housing Specialists.

Our approach combines data and mapping with lived experience, consistent effort, resource knowledge, and relationship building, effectively reaching those least likely to seek assistance in every region of the CoC.

1D-4. Strategies to Prevent Criminalization of Homelessness.	NOFO Section V.B.1.k.
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Select yes or no in the chart below to indicate your CoC's strategies to prevent the criminalization of homelessness in your CoC's geographic area:

Your CoC's Strategies	Engaged/Educated Legislators and Policymakers	Implemented Laws/Policies/Practices that Prevent Criminalization of Homelessness
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1. Increase utilization of co-responder responses or social services-led responses over law enforcement responses to people experiencing homelessness?	Yes	Yes
2. Minimize use of law enforcement to enforce bans on public sleeping, public camping, or carrying out basic life functions in public places?	Yes	Yes
3. Avoid imposing criminal sanctions, including fines, fees, and incarceration for public sleeping, public camping, and carrying out basic life functions in public places?	Yes	Yes
4. Other:(limit 500 characters)		

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
NOFO Section V.B.1.l.		

	HIC Longitudinal HMIS Data	2023	2024	
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	554	516

1D-6. Mainstream Benefits–CoC Annual Training of Project Staff.	
NOFO Section V.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1. Food Stamps		Yes
2. SSI–Supplemental Security Income		Yes
3. SSDI–Social Security Disability Insurance		Yes
4. TANF–Temporary Assistance for Needy Families		Yes
5. Substance Use Disorder Programs		Yes
6. Employment Assistance Programs		Yes
7. Other (limit 150 characters)		

1D-6a. Information and Training on Mainstream Benefits and Other Assistance.	
NOFO Section V.B.1.m	

	Describe in the field below how your CoC:
1.	works with projects to collaborate with healthcare organizations, including those that provide substance use disorder treatment and mental health treatment, to assist program participants with receiving healthcare services, including Medicaid; and

2. promotes SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.
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(limit 2,500 characters)

1. The CoC actively collaborates with project staff and healthcare organizations, including substance abuse treatment centers and health providers, to address the diverse needs of individuals and families experiencing homelessness. Healthcare Navigators not only participate in street outreach efforts but also play a crucial role in creating pathways for both preventative care and limited medical treatment. This integrated approach ensures that individuals have access to comprehensive healthcare services in a timely manner.

To enhance community engagement and awareness, the CoC organizes annual regional service provider fairs. These events are designed to inform service providers and the public about all available agencies connecting individuals to mainstream benefits, which facilitates a collaborative environment for service delivery. Furthermore, the CoC maintains a continually updated list of resources that is shared with member agencies. This resource directory empowers agency staff to make informed referrals for clients and assist individuals who reach out seeking specific services, ensuring that no one falls through the cracks.

2. The CoC lead agency and several member organizations employ staff and case managers trained in the SOAR (SSI/SSDI Outreach, Access, and Recovery) model. These dedicated professionals assist homeless individuals—especially those lacking transportation or facing challenges related to mental health and substance use disorders—by facilitating their access to critical appointments with disability doctors and state determination officials. This proactive support not only helps individuals navigate these complex systems but also significantly increases their chances of obtaining necessary benefits that promote stability and recovery.

Through these collaborative efforts, the CoC is committed to creating a holistic support network that addresses both immediate and long-term needs of the homeless population, ultimately paving the way for improved health outcomes and greater self-sufficiency.

ID-7.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent the Spread of Infectious Diseases.	
	NOFO Section V.B.1.n.	

	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to develop CoC-wide policies and procedures that:
1.	respond to infectious disease outbreaks; and
2.	prevent infectious disease outbreaks among people experiencing homelessness.

(limit 2,500 characters)

1. The CoC has partnered with the MS Department of Health to develop comprehensive policies aimed at preventing and mitigating infectious disease outbreaks. These policies are designed for rapid implementation, ensuring enhanced protection for both agency staff and the homeless population during critical times. As an example of their effectiveness, these guidelines have been adopted by both funded and non-funded member agencies across the CoC, creating a statewide response.

Through strengthened relationships with local clinics, outreach teams have gained improved access to vital resources that address the general medical needs of individuals experiencing homelessness. This collaboration enhances the ability of outreach staff to connect clients with necessary healthcare services, providing a more responsive and supportive environment.

2. To prevent infectious disease outbreaks among the homeless population, CoC agencies and outreach teams play a crucial role in educating individuals about the spread of infectious diseases. They provide information on available testing, quarantine measures (and plans), and treatment options, ensuring that those in need are informed and prepared. Additionally, healthcare providers participate in outreach efforts, enabling them to evaluate risks at encampment sites and directly connect individuals to preventative treatments and necessary supplies.

By facilitating these collaborative relationships and maintaining a proactive approach, the CoC is committed to safeguarding the health of the homeless community. This holistic strategy not only addresses immediate health concerns but also contributes to long-term wellness, stability, and resilience among some of the most vulnerable populations in our CoC.

ID-7a.	Collaboration With Public Health Agencies on Infectious Diseases. NOFO Section V.B.1.n.	
Describe in the field below how your CoC:		
1.	effectively shared information related to public health measures and homelessness; and	
2.	facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1. The CoC effectively disseminates information about infectious diseases through email blasts, regional coalition meetings, the CoC Annual Meeting, and training opportunities. This includes guidance from the CDC, FEMA, MEMA, and the MS Department of Health. During the COVID-19 pandemic, updates from HUD and the CDC were shared widely.

Regional meetings cover current restrictions, regulations, and community resources. Testing and vaccination drives organized with the MS Department of Health are promoted, ensuring homeless individuals have access to these vital services. Information on PPE and other precautionary items is also regularly shared.

2. To strengthen communication between public health agencies and homeless service providers, the CoC has recruited local health departments as members. Their participation in outreach and the Coordinated Entry System (CES) enhances collaboration. Health department staff work alongside CoC-funded agencies to identify health concerns among unsheltered individuals and provide low-intensity treatments like blood pressure checks, referring individuals for more intensive care when needed.

Housing providers and local health departments coordinate to prevent infectious disease outbreaks among participants. Case management staff conduct trainings on infectious disease risks and prevention, using materials from local healthcare partners. For instance, a local housing provider recently offered flu prevention training and connected clients to flu shots at a nearby clinic.

Through these collaborative efforts, the CoC promotes health and safety among vulnerable populations, ensuring they receive the necessary information and resources.

1D-8. Coordinated Entry Standard Processes.	
NOFO Section V.B.1.o.	
Describe in the field below how your CoC's coordinated entry system:	
1. can serve everybody regardless of where they are located within your CoC's geographic area;	
2. uses a standardized assessment process to achieve fair, equitable, and equal access to housing and services within your CoC;	
3. collects personal information in a trauma-informed way; and	
4. is updated at least annually using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

1. The CoC has implemented policies to ensure the CES is utilized across its entire service area, covering 100% of the geographical region. The CoC Director oversees CE and outreach workers (OW), who go into the field daily to use assessment tools for entering individuals into the CES. OWs employ GIS mapping for comprehensive area coverage, and drones are used to identify and engage homeless individuals in wooded areas. This dual approach has been in place for five years, particularly in large rural areas, to reach those less likely to seek assistance on their own.

The CoC holds monthly regional meetings and conducts field outreach immediately after each meeting to market available housing and services. The CoC also utilizes a web portal that screens potential referrals, documenting eligibility and offering real-time referrals. For those without internet access or individuals with disabilities, the CoC provides 24/7 phone access to the CES, ensuring that everyone can access services throughout the coverage area.

2. The CoC has created a by-name list (BNL) pulling from HMIS/DV databases specific to each region. Assessment data is a core component of program admission and case conferencing meetings. Online training videos and on-site training sessions are provided statewide to help staff equitably utilize the CES. Policies prioritize the most vulnerable individuals for the first available permanent housing option, using the prioritization tool. Agencies are monitored for admissions from CES, to certify CoC assessment achieves equitable outcomes and provides equal access to housing.

3. The CES employs a trauma-informed approach to data collection, ensuring participants understand the process and how their data will be used. Agencies receive training in trauma-informed care, emphasizing empathy, active listening, and validation of experiences, which helps build trust and rapport. The data collection process is structured to minimize stress, allowing individuals to share only what they feel comfortable with, and they have the option to decline to answer any questions. By focusing on individual goals and preferences, the CES empowers participants, giving them agency and a sense of control over their circumstances.

4. The CE Committee and BNL workgroups including a myriad of service providers, including individuals with lived experience, provide feedback on the successes and challenges of the CES, offering valuable guidance for ongoing improvements.

	<p>1D-8a. Coordinated Entry—Program Participant-Centered Approach.</p> <p>NOFO Section V.B.1.o.</p> <p>Describe in the field below how your CoC's coordinated entry system:</p>	
	<p>1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;</p>	
	<p>2. prioritizes people most in need of assistance;</p>	
	<p>3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their needs and preferences; and</p>	

	4. takes steps to reduce burdens on people seeking assistance.
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(limit 2,500 characters)

1. The CoC and member agencies employ outreach workers(OW) (many with lived experience “LE”) who ensure coverage of the entire CoC area. Since much of MS is rural, the outreach teams have access to drones and use GIS to ensure full, consistent coverage of the CoC. The LE of OW’s is vital in building trust with those least likely to apply, and w/ consistent visits, a person-centered approach, relationship-based, and data tracking to ensure coverage, the CoC continually reaches those least likely to apply.
2. Once engaged, persons are entered into the CES and offered housing opportunities within the CES prioritization process. The prioritization process assesses the client to determine a vulnerability score and then places them on a BNL in a numerical system based on their score. Providers then house off the BNL with those at the top being prioritized. This process is fundamental to CES, so this is an absolute rule with no exceptions provided.
3. For those most in need of assistance, a timely response is crucial to our work. Many times, OW’s have labored to guide a client into choosing housing, so we must act quickly to serve them. Responsiveness is achieved through real-time HMIS data entry while in the homeless settings with the client. Daily review of new BNL additions by CES navigators (CN) where they can immediately refer/admit into program. OWs are also adept in making rapid connections with resources - they help in the moment vs. going to get help. CN’s can fast-track admissions into services that are consistent w/ the client’s needs/preferences. The CoC monitors timeliness through monthly reporting given to agencies and the CoC Gov Council. OW’s also give feedback on whether agencies respond in a timely manner, and the CoC gives great weight to their eval.
4. To remove barriers the CoC focuses on accessibility, responsiveness, de-stigmatization through no judgment and trustbuilding, trauma-informed processes, and more practical measures like providing transportation and obtaining ID’s. Access is provided in person, internet, phone, or through a friend, so clients can choose their path into CES. OW’s attempt to expedite the process for the client, so they don’t have to wait for slow bureaucracy. Every person is treated in a trauma-informed manner, without judgment and a focus on the client’s goals to build trust. Seeing clients where they are, transporting them as needed, and obtaining IDs,also removes common barriers to seeking assistance.

1D-8b.	Coordinated Entry–Informing Program Participants about Their Rights and Remedies–Reporting Violations.	
	NOFO Section V.B.1.o.	

Describe in the field below how your CoC through its coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and

3. reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1. Through the CoC's compliance with 24 CFR § 578.93 Fair Housing (FH) and Equal Opportunity regulation, CoC Outreach and Housing Providers market housing and supportive services within the CoC's geographical area to all eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability. These marketing strategies implement outreach programming targeted towards those who are least likely to apply through a "meet you where you are" outreach motto. The CoC is dedicated to boots-on-the-ground outreach connecting with the most vulnerable persons within the homeless population. The CoC essentially works as a "tip line" for local municipalities, businesses, and concerned citizens. If the CoC outreach teams receive a tip that there is a homeless individual in the area, they will immediately find that individual and engage them for services. To provide as broad of a network as possible, CES/Outreach engage local governments (code enforcement), ESG providers, early childhood programs, education authorities, community mental health centers, first responders, public health agencies, and faith-based organizations. These partners are educated in CE and all referral processes, so that they can market the housing and services available within their coverage area.
2. The CoC outreach, housing, and case management teams inform program participants of their Civil Rights as well as their right to FH throughout their time in program. This includes informing clients of the MS Center for Justice FH seminars and workshops. Once housed, agencies inform program participants of Mississippi Attorney General's Residential LandlordTenant Act. There is also a focus on repeatedly distributing the information through street outreach and housing programs needed to file a FH grievance through HUD's FHEO Housing Discrimination Reporting apparatus or a Civil Rights Grievance through the Dept of Justice's Civil Rights division.
3. The CoC has a plan in place with Mississippi Home Corporation, the jurisdiction responsible for certifying consistency with the Consolidated Plan, to immediately report Civil Rights and FH violations to the appropriate state and federal agencies. The CoC encourages program participants, service providers, partner agencies, and communities at large to report any housing or civil rights violations as soon as possible.

1D-9.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.p.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	09/12/2023

1D-9a.	<p>Using Data to Determine if Racial Disparities Exist in Your CoC's Provision or Outcomes of CoC Program-Funded Homeless Assistance.</p> <p>NOFO Section V.B.1.p.</p>	
Describe in the field below:		
1. the data your CoC used to analyze whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance; and		
2. how your CoC analyzed the data to determine whether any racial disparities are present in your CoC's provision or outcomes of CoC Program-funded homeless assistance.		

(limit 2,500 characters)

1. The CoC has continually utilized the Racial Equity Tool crafted by the National Alliance to End Homelessness (NAEH). Although the CoC has utilized the LSA Racial Equity tool in conjunction with PIT Count and CES data, the CoC has continued to use the NAEH tool as a primary assessment as it aligns with Racial Equity analysis in years past. As a part of that assessment, all CoC, ESG, SSVF, and HOPWA funded agencies are reviewed. The assessment looks at the race and gender of those identified in homelessness, the needs presented by the population/subpopulation, and then contrasts that data with the corresponding fields in those served. We analyze the data to determine if there are equitable outcomes in our CES and housing programs. We have utilized this tool for the past 5 years and it revealed that Black participants were less likely to opt into transitional housing. CoC leadership took the data and brought it to stakeholders to understand this trend. It was found that the trend was caused by a lack of TH in the areas where Black participants were located. This led the CoC to focus TH-funding to underserved areas and confirm that those units were implemented in a methodology consistent with the needs of the population. We record gender as well, because we have seen distinctions in the experience of BIPOC men as opposed to those of BIPOC women. Additionally, the CoC utilizes PIT Count and CES data to measure equity as well. Given that the PIT Count has been conducted annually over the past 14 years, this data gives the CoC the ability to recognize shifts in the population experiencing homelessness and project future needs that are likely to develop. This information has been shared with CoC member agencies and the CoC Governing Council, so that changes can be made but also so strategic decisions are informed by both current and past data.

2. Once the assessment has been conducted, the CoC Governing Council is presented with the data (with past PIT Count and CES data used in analysis). This allows for strategic decisions to be made based on the findings. Further, the CoC staff present the findings in the CoC Annual Meeting to member agencies, so that they are informed of how each CoC member is contributing to (or negatively impacting) the racial equity of the CoC systems. This is a time of reflection and conversation of how the CoC can equitably meet the needs of all subpopulations (specifically those historically marginalized) in the CoC coverage area.

1D-9b.	Implemented Strategies to Prevent or Eliminate Racial Disparities. NOFO Section V.B.1.p	
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Select yes or no in the chart below to indicate the strategies your CoC is using to prevent or eliminate racial disparities.

1.	Are your CoC's board and decisionmaking bodies representative of the population served in the CoC?	Yes
2.	Did your CoC identify steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC?	Yes
3.	Is your CoC expanding outreach in your CoC's geographic areas with higher concentrations of underrepresented groups?	Yes
4.	Does your CoC have communication, such as flyers, websites, or other materials, inclusive of underrepresented groups?	Yes
5.	Is your CoC training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness?	Yes
6.	Is your CoC establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector?	Yes
7.	Does your CoC have staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness?	Yes
8.	Is your CoC 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?	Yes
9.	Did your CoC review its coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness?	Yes
10.	Is your CoC collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system?	Yes
11.	Is your CoC conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness?	Yes
	Other:(limit 500 characters)	
12.		

1D-9c.	Plan for Ongoing Evaluation of System-level Processes, Policies, and Procedures for Racial Equity. NOFO Section V.B.1.p.	
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Describe in the field below your CoC's plan for ongoing evaluation of system-level processes, policies, and procedures for racial equity.

(limit 2,500 characters)

The CoC acknowledges that when comparing the homeless population to the general population, using tools such as the NAEH Racial Equity Analysis Tool, the HUD CoC Racial Equity Analysis and the LSA Racial Equity Tool, disparities do exist. The oversight and review of this important work falls within the job description of the CoC employed CoC Director. As a woman of color, she has made clear that her goal is to ensure that all populations within the CoC's homeless population are served with equity. In that effort, the CoC reviews agency policies and procedures, in CoC monitoring visits, to review with a racial equity lens. The CoC written standards also include explicit guidance and requirements regarding the consideration of racial equity in service provision. Additionally, in the CoC's review, staff examine CoC services and compare the racial demographics of persons served to the racial demographics of the overall homeless population, with no disparities being found. The CoC Director opined that this result was likely due to the diversity in CoC member agencies' leadership. Although MS has a checkered past in racism with deep scars still remaining, it also has the highest (per capita) Black population of all states. This is an incredible benefit as CoC agencies, local municipalities, and many state agencies, are led by and staffed by richly diverse groups of people.

This effort is not simply a box to check on an application or an empty agenda item that is begrudgingly addressed. The CoC genuinely pursues an ongoing evaluation of its systems, processes, and its policies and procedures, to ensure equity in its systems (with a focus on racial equity). Although we discussed quantitative reviews in the first paragraph, the CoC also considers more qualitative measures through consumer/provider feedback opportunities (surveys, anonymous feedback portal on website, and through the Consumer Advisory Group). The CoC also trains all CoC member agencies on the provision of services with racial equity. The CoC continually examines outcomes of persons served by homeless providers to ensure no disparities exist among persons served (reviewing permanent housing outcomes by race). Data is reviewed routinely by the CoC, and team reports are given to leadership. If disparities are identified, the CoC informs project staff and develops plans to correct.

1D-9d.	Plan for Using Data to Track Progress on Preventing or Eliminating Racial Disparities.				
	NOFO Section V.B.1.p.				
<p>Describe in the field below:</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">1.</td> <td>the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and</td> </tr> <tr> <td>2.</td> <td>the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.</td> </tr> </table>		1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and	2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.
1.	the measures your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance; and				
2.	the tools your CoC plans to use to continuously track progress on preventing or eliminating racial disparities in the provision or outcomes of homeless assistance.				

(limit 2,500 characters)

1. The CoC will continue to assess the annual NAEH Racial Equity Analysis Tool, the HUD CoC Racial Equity Analysis and the LSA Racial Equity Tool. These tools measure the general population, the homeless population, and those served in each CoC housing category. Additionally, continual quarterly reporting (Team Reports) will highlight racial equity measures per CoC program (funded and non-funded). The team reports will identify any disparities allowing CoC staff to work with the program to meaningfully address issues. Finally, the CoC will continue to utilize the consumer/staff feedback portal on the CoC website to receive candid feedback regarding racial equity at all levels. The CoC Governing Council will review the aforementioned reports as action items on its quarterly agenda, and utilize annual summaries in ranking and reallocation decisions. The CoC Governing Council will recommend necessary training, policy/practice updates, and will alter the evaluation methods as needed (given data).
2. As mentioned above, the COC will continue to utilize the NAEH Racial Equity Analysis tool, the HUD COC Racial Equity Analysis and the LSA Racial Equity Tool. The COC will also utilize the team reports to quarterly review each COC program along racial equity lines. The consumer/staff feedback portal will also be utilized to gain qualitative data for the COC governing Council's analysis. The overarching goal of all racial equity analysis with the COC is to reach equitable outcomes by the COC homeless system: the racial demographics of the general homeless population should equal the racial demographics of the served population (in each program type). In an effort to prevent or eliminate racial disparities, the COC has implemented a robust training curriculum provided to all COC member agencies.

1D-10. Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC's Outreach Efforts.	
NOFO Section V.B.1.q.	

Describe in the field below your CoC's outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decisionmaking processes.

(limit 2,500 characters)

The CoC places great emphasis on persons with lived experience serving in leadership and advisory roles. This has led to the CoC Governing Council, HMIS Committee, CES Committee, Monitoring Committee, and the Ranking and Review Committee, having persons with lived experience (within recent years) serving on - or chairing - each of those committees. One of our proudest accomplishments has come in the past year with the establishment of the Consumer Advisory Group (CAG). The CAG consisted of 11 formerly homeless clients (experience within 2 years) and people currently experiencing homelessness. Each quarterly meeting offers each member of the group mileage and payment for participating, a free lunch, and the respect and attention given to any consultant in our work. The group is led by a 3rd party who asks attendees to review CoC program practices and make recommendations to CoC planning given their invaluable experience with these services (or the unavailability of services). A report is drafted of all items that the group wishes to communicate to the CoC Governing Council, and the Governing Council includes review and acceptance of this report as one of its action items. This information leads to the recommendations of this group informing CoC strategic planning, state consolidated planning, and the program manuals of CoC-funded agencies. Persons with lived experience impact the CoC's planning, policies, and practices, through the CAG along with serving on the CoC's Governing Council and its many committees. This has also allowed for their insight to be utilized in drafting and finalizing the competition rating factors in this current CoC competition. The CoC provides financial payment for time given in their consultation with the CoC, mileage reimbursement, and connections for each participant to job training, leadership coaching/mentoring, and scholarships for formal education/training. We also confirm with each participant that the meeting times and locations do not interfere with their current employment or classes. During outreach and regional meetings, the CoC make recruiting efforts to gain new participants in the CAG. The CoC can now say that every practice and policy of the CoC has now been impacted by the recommendations of those with lived experience, and the programs are more effective than ever as a result.

1D-10a.	Active CoC Participation of Individuals with Lived Experience of Homelessness. NOFO Section V.B.1.q.
<p>You must upload the Lived Experience Support Letter attachment to the 4B. Attachments Screen.</p> <p>Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:</p>	

	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.	Routinely included in the decisionmaking processes related to addressing homelessness.	11	7
2.	Participate on CoC committees, subcommittees, or workgroups.	11	7
3.	Included in the development or revision of your CoC's local competition rating factors.	2	1
4.	Included in the development or revision of your CoC's coordinated entry process.	11	7

1D-10b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

For those with Lived Experience of Homelessness, the CoC offers mentoring relationships, direct and indirect employment opportunities, opportunities to complete education, technical certifications, and many networking opportunities as well. CoC member agencies have always attempted to hire directly from those with lived experience. Many staff members of CoC member agencies originated from the programming in which they now work. At times, those with lived experience have been offered opportunities that were too limited; therefore, the CoC has attempted to bring more employment options to these valued individuals. As a part of that effort, the CoC works closely with Community Colleges and Planning and Development Districts (PPD's - workforce investment) in our state. The CoC Governing Council has representation from the largest community college in the state. That representation was directly responsible for designing, applying, and implementing a minority male mentoring program. Further, the CoC has worked with community colleges to implement programming to assist formerly homeless students in getting their associate degrees and technical certifications. These are not simply referrals made available to every person with lived experience (that participates in any CoC work group) but a true connection made for the client to the resource as it aligns with the client's goal. Further, the CoC works with 2nd Chance Mississippi which coordinates with Community Colleges throughout the state. The CoC & 2nd Chance partnership allows for adult education and work-based credentials for lower-skill adults, and the CoC is working to ensure that those with lived experience are prioritized. Our PDD's also have extensive services to connect those with lived experience to high paying jobs (like electricians for utility companies). The connection with the PDD's, Community Colleges, and other employment service agencies, has allowed for those with lived experience to land true career opportunities (with higher earning potential than the social worker that met them in homelessness) and this also benefits community businesses and public agencies with employees that are stable in housing and ready to work.

1D-10c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.q.	

Describe in the field below:

1. how your CoC gathers feedback from people experiencing homelessness;
2. how often your CoC gathers feedback from people experiencing homelessness;
3. how your CoC gathers feedback from people who received assistance through the CoC Program or ESG Program;

4.	how often your CoC gathers feedback from people who have received assistance through the CoC Program or ESG Program; and
5.	steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

1 &3: The CoC has altered its processes to continually receive and act on the feedback gained from those with lived experience (LE) and those who have received assistance through CoC/ESG programs (RA). That feedback is routinely communicated by LE and RA who serve on the: CoC Governing Council (GC) and following committees: HMIS, CES, Monitoring, and the Ranking and Review. Beyond these traditional measures, in recent years, the CoC has implemented a Consumer Advisory Group (CAG), and this has opened an incredible resource in gathering feedback from both those with LE and RA. The CAG includes those currently experiencing unsheltered homelessness, those housed in ESG and CoC-funded RRH and PSH, and those that have been discharged from said programming. The CAG meets quarterly and sends a formal report to the GC and the Collaborative Applicant's board of directors. The review of this report is an action item of the CoC GC. CAG members are paid mileage and an hourly rate for their time, a catered dinner, and the respect and attention given to any consultant in our work. They determine the agenda of their meetings and can choose to take up requested topics to review. The meetings are facilitated by a 3rd party LMSW student that has been trained to only assist as requested by the group. This insight has been used to review CoC/ESG program processes including: outreach, housing, case management, and data collection, and this includes reviewing services that are unavailable or inaccessible. The recommendations of this group inform CoC strategic planning, state consolidated planning, and the program manuals of ESG/CoC-funded agencies. Their view is extremely valuable to the work of the CoC, and we're appreciative of their time and insight.

2&4: Ongoing & Quarterly.

5: Feedback from those with LE and RA impacts nearly every practice and policy of the CoC, and the CoC is positioned to continue gathering that feedback and acting to address the challenges identified. An example of a policy change, contributed to feedback from a person with LE, can be found in the update to the CoC's housing search process. While the CoC honors the client's choice in housing location, due to feedback from persons with LE, the CoC bolstered its training of housing providers to increase the involvement of the client in the process. The CoC Written Standards were updated to reflect this strengthened involvement.

1D-11.	Increasing Affordable Housing Supply. NOFO Section V.B.1.s.	
Describe in the field below at least two steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:		
1.	reforming zoning and land use policies to permit more housing development; and	
2.	reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1. In the past twelve months, the CoC has met with multiple planning and development agencies. The CoC staff has met with the MS Development Authority, MS Home Corporation, The City of Hattiesburg, The City of Meridian, The City of Tupelo, and all members of Congress representing the state of Mississippi. The specific focus of these meetings was the development of affordable housing as well as reforming zoning and land use policies to encourage affordable housing development. In these meetings, the CoC utilized data demonstrating the needs for additional affordable housing development, and we made use of clients' stories from their districts to bring the point home.
2. CoC staff and member agencies have attended zoning meetings, met with elected officials, and corresponded with elected and non-elected planning and development officials to advocate for the reduction of regulatory barriers to housing development. Additionally, the CoC has presented at the MS Municipal League's Annual Conference for the past two years where we, again, communicated the need to reduce regulatory barriers to housing development.

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

HUD publishes resources on the HUD.gov website at [CoC Program Competition](#) to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Advance Public Notice of Your CoC's Local Competition Deadline, Scoring and Rating Criteria.	
NOFO Section V.B.2.a. and 2.g.		

1.	Enter the date your CoC published its submission deadline and scoring and rating criteria for New Project applicants to submit their project applications for your CoC's local competition.	08/23/2024
2.	Enter the date your CoC published its submission deadline and scoring and rating criteria for Renewal Project applicants to submit their project applications for your CoC's local competition.	08/23/2024

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e.		

You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen.

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.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes
5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes

6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes
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1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2, along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	
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You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.

Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	120
2.	How many renewal projects did your CoC submit?	12
3.	What renewal project type did most applicants use?	PH-RRH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	the severe barriers your CoC considered.

(limit 2,500 characters)

1. The CoC Rank and Review (RR) utilized the tool developed by Homebase (TA), which is based on the HUD RR framework. This tool incorporates HMIS performance data, specifically focusing on exits to permanent housing (PH) for projects that have successfully housed participants. Our CoC takes a comprehensive approach to analyzing this data, evaluating each project based on metrics such as successful housing placements, the duration of stays in temporary accommodations, and the demographics of housed participants. This analysis enables us to identify which projects effectively meet the needs of vulnerable populations and consistently achieve positive housing outcomes. By combining these methodologies, we ensure that our review process is thorough and data-driven, leading to informed decisions about project effectiveness.
2. Our CoC analyzed data on housing timelines by tracking the average length of time from assessment to PH placement for each project, utilizing the RR tool. The tool incorporates HMIS performance data, including the length of time homeless and the timeline of the PH process. By comparing these metrics, we identified trends, enabling us to assess project impact and prioritize the solutions that targeted participants facing the greatest needs.
3. Our CoC carefully considered the severity of needs and vulnerabilities of program participants when ranking projects. We utilized data from our CES to identify individuals facing severe barriers, such as chronic homelessness, mental health, and physical disabilities. Projects demonstrating capacity to address these specific vulnerabilities were prioritized. This ensures that our funding supports initiatives best equipped to facilitate rapid placement and long-term housing stability for the most at-risk populations.
4. The RR considered the severe barriers that projects that prioritize the chronically homeless or serve the most vulnerable within the CES might have lower performance scores and, therefore, did not penalize them during the RR process. Projects were evaluated using the tool, and once scores were assigned, additional information was given consideration. The RR committee discussed whether projects served those with behavioral health, experience with the criminal/legal system, low or no income, and/or history of intimate partner violence. Finally, the RR compared the tools point assignment with CoC needs and priorities to develop a final ranking of projects for submission to HUD.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:	
1.	how your CoC used input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree that proposed projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and steps the projects took or will take to eliminate the identified barriers.

(limit 2,500 characters)

1. In the CoC Geographical area, the Black community is overrepresented in homelessness. According to the HUD CoC Racial Equity Analysis Tool, the CoC's distribution of race within the general population is 58% White, 39% Black, 1% Native American. According to our CoC's LSA Racial Equity Tool, those who experience homelessness within the CoC are the reverse. The homeless population is 57% Black and 39% White. In order to create a Rank and Review process that is equitable to those who are overrepresented, the CoC has partnered with advocacy agencies within the Black community for input on CoC system improvements to mitigate overall systemic issues. These efforts include ongoing partnerships with the NAACP, Mission Mississippi, and the ACLU. The CoC also ensures that Black individuals within the homeless community participate in the consumer advisory group (CAG). The input received in these groups is used to inform the rank and review process.
2. 60% of the Rank and Review Committee were members of the Black Community. The CAG also contributes through reviewing CoC programs (including ESG) to determine if updates need to be made to better serve persons of different races and ethnicities. Input from was also received from the MS Band of Choctaw Indians through a cultural competency training provided with the CoC Governing Council and members. The CoC Director, a woman of color, provided insight in the process.
3. Agencies applying for funding were sent a questionnaire inquiring about the participation at management levels from the BIPOC community, if the agency has reviewed their policies and procedures through a lens of equity, if the agency has reviewed project outcome with equity in mind (number of BIPOC persons receiving assistance vs. outcomes when compared to other groups), what changes the program has made as a result, and if the agency is actively working to disaggregate data for a more comprehensive look at equity. HMIS was utilized during the rating and ranking process to ensure that the makeup of program participants represents demographics from the area served. As a result, points were added to programs with equity among persons served; likewise, points were deducted if disparities were identified.

1E-4. Reallocation—Reviewing Performance of Existing Projects.	NOFO Section V.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 low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1. The CoC developed a Reallocation Policy and Procedure that is: aligned with HUD and HEARTH Act policy guidance; performance-based as specified with the annual HUD NOFO; and based on local needs, data, and use of common assessment tools. All renewal project applications will be included in the rank and review process. If it is determined that a renewal project fails to meet the required points or address the priorities of the competition, then it will be reallocated. The MSBOS CoC will consider involuntary reallocation as appropriate and as necessary based upon these criteria:
 - a. Consider unspent funds and the ability to cut grants without cutting service/housing levels;
 - b. Consider the history of reallocation (e.g., if a grant was reduced one year, this will not be apparent in spending the following year);
 - c. Consider the project's performance
 - d. Consider the project's ability to meet financial management standards,
 - e. Consider specific new permanent supportive housing or rapid rehousing project(s) and specific renewal project(s) at risk of not being funded;
 - f. Consider alternative funding sources available to support either new or renewal project(s) at risk of not being funded;
 - g. Consider renewal HUD "covenant" concerns related to grant funds for acquisition, rehabilitation, or new construction;
 - h. Consider the impact on system performance and the CoC's Consolidated Application score, and
 - i. Consider the impact on the community in light of community needs.
2. The Rank and Review Committee identified projects with lower utilization rates and performance measures compared to the other projects in the competition, and will make corrective action suggestions to the CoC Governing Council. However, the Rank and Review Committee did not identify any projects that are less needed.
3. The Rank and Review Committee did not reallocate any low-performing projects during this year's competition, but the CoC did have agencies voluntarily reallocate to meet the strategic planning of the CoC Governing Council.
4. The Rank and Review Committee decided to refund renewal projects at the same amounts as last year and did not reallocate funding. The Committee decided that the projects currently funded in the CoC are vital to our CoC's success.

1E-4a. Reallocation Between FY 2019 and FY 2024.	
NOFO Section V.B.2.f.	

Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2019 and FY 2024?	No
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1E-5. Projects Rejected/Reduced—Notification Outside of e-snaps.	
NOFO Section V.B.2.g.	
You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	Yes
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	Yes
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/09/2024

1E-5a.	Projects Accepted—Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	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. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2024, 06/27/2024, and 06/28/2024, then you must enter 06/28/2024.	10/09/2024
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project Status—Accepted, Rejected, Reduced Reallocated, Fully Reallocated; 4. Project Rank; 5. Amount Requested from HUD; and 6. Reallocated Funds +/-.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting—CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC's website or partner's website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	10/25/2024
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1E-5d.	Notification to Community Members and Key Stakeholders by Email that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC's website or partner's website.	10/25/2024
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2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

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

Enter the name of the HMIS Vendor your CoC is currently using.	Foothold
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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.	Single CoC
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

Enter the date your CoC submitted its 2024 HIC data into HDX.	05/23/2024
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2A-4.	Comparable Databases for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases; and
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2024 HMIS Data Standards.

(limit 2,500 characters)

1. The CoC has encouraged and obtained buy-in from all registered DV service providers in the state. The DV agencies either use Apricot or Vela to collect data. Both systems meet the standards set forth for DV data systems and produce a HUD APR. Although, HDX, currently, incorrectly reflects that the CoC has zero DV service providers utilizing an HMIS comparable database, the CoC actually has 6 DV agencies (of 8 total) utilizing a comparable system.
2. 6 of the 8 DV housing and service providers in the CoC are using a HUD compliant comparable database. Additionally, these systems can report and export data to be utilized by the CoC when reporting to HUD, ranking and reviewing project applications, and monitoring the agency's service effectiveness. The CoC HMIS lead agency and staff work closely with CoC staff to ensure continued compliance with HMIS data standards. Policies and procedures, agency agreements, and client notifications are all updated when needed due to changes in data standards.

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

Using the 2024 HDX Competition Report we issued your CoC, enter data in the chart below by project type:

Project Type	Adjusted Total Year-Round, Current Non-VSP Beds [Column F of HDX Report]	Adjusted Total Year-Round, Current VSP Beds [Column K of HDX Report]	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS Comparable Database [Column M of HDX Report]	HMIS and Comparable Database Coverage Rate [Column O of HDX Report]
1. Emergency Shelter (ES) beds	236	140	197	52.00%
2. Safe Haven (SH) beds	0	0	0	0.00%
3. Transitional Housing (TH) beds	53	0	53	100.00%
4. Rapid Re-Housing (RRH) beds	516	0	516	100.00%
5. Permanent Supportive Housing (PSH) beds	200	0	200	100.00%
6. Other Permanent Housing (OPH) beds	0	0	0	0.00%

2A-5a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
NOFO Section V.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 2,500 characters)

1. The only housing type below 85% coverage, in our most recent HIC, is emergency shelter category at 83.5% (non-VSP). We are happy to report that our coverage has increased to 84% (non-VSP) in that category since the HIC was submitted. Even the HIC reporting 83.5% was an increase over last year's 78%. However, the Housing Inventory did not include the VSP Beds that utilized a Comparable Database, and this data error resulted in a 52.4%. The actual percentage for all HMIS participating beds and comparable database beds is 82% had the HIC exhibited the accurate information. The window of editing this information with HUD closed and the CoC was unable to fix this data. The increase is a direct result of the CoC receiving funding for the "Data Bridge" grant, in the most recent CoC application cycle, that assists the CoC's shelters in participating in HMIS. The CoC aims to hit 100% utilization (as we have in every other project type) in the coming months. Agencies that do not currently participate have been visited by Data Bridge staff, have been offered data entry services (where they just send their paper copies to staff that input the data in HMIS), offered training in HMIS, and have been offered gently used equipment to facilitate their participation.
2. This has almost been achieved since the most recent HIC, and the CoC is set to hit even higher utilization rates in ES than the current rate of 84%. The Data Bridge project has implemented multiple processes to acquire HMIS participation. To increase bed coverage to at least 85 percent, our CoC has implemented a comprehensive plan that includes:

-Face-to-Face Visits: Conducting regular outreach to shelters and housing programs to ensure accurate bed availability and encourage participation in data reporting.

-Data Entry: Training staff on effective data entry practices and establishing a streamlined process for manual updates to ensure timely and accurate bed counts. The process can include staff scanning documents in a secure manner to HMIS staff for data entry.

-Providing Equipment: Supplying necessary technology and resources to all partner organizations for real-time data reporting, including printers and laptops.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0. NOFO Section V.B.3.d. You must upload your CoC's FY 2024 HDX Competition Report to the 4B. Attachments Screen.	
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Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by January 24, 2024, 11:59 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at [CoC Program Competition](#) to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	
	Enter the date your CoC conducted its 2024 PIT count.	01/24/2024
2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	
	Enter the date your CoC submitted its 2024 PIT count data in HDX.	05/24/2024
2B-3.	PIT Count–Effectively Counting Youth in Your CoC's Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	
	Describe in the field below how your CoC:	
1.	engaged unaccompanied youth and youth serving organizations in your CoC's most recent PIT count planning process;	
2.	worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC's most recent PIT count planning process; and	
3.	included youth experiencing homelessness as counters during your CoC's most recent unsheltered PIT count.	

(limit 2,500 characters)

1. The CoC has multiple youth service providers and youth advocacy agencies participating through its network, including two members of the Governing Council who are directors of youth service programs. These connections also link the CoC to the Young Adult Leadership Council which is an advisory council of local youth representatives, youth interns, and other identified youth. This group is able to give feedback on efforts to count the youth in the CoC. The PIT count committee also contains members who work in RHY agencies, the Mississippi Department of Child Protective Services, MS Department of Human Services, Local school districts, and Juvenile Court Liaisons.

2&3. Strategies to ensure that homeless youth were identified and counted were implemented, including the involvement of homeless and formerly homeless persons between 18-24 years old in gathering PIT data among the enacted plans. The youth count is implemented in coordination with (and at the same time as) the PIT Count. The CoC also engaged area community colleges and University volunteers to assist with the count. Information was distributed on campus about how to enroll in volunteering for the PIT. CoC member alums for area colleges and universities were tasked with contacting their alma mater for engagement. During the PIT, areas where homeless youth are usually located were visited by youth volunteers. These included train stations, bus stops, abandoned buildings, parks, and college campuses. When a homeless youth was identified during the PIT, a youth service provider was asked to follow-up with the youth to connect to youth-specific services.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points. NOFO Section V.B.5.a and V.B.7.c.
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In the field below:	
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2023 and 2024, if applicable;
3.	describe whether your CoC's PIT count was affected by people displaced either from a natural disaster or seeking short-term shelter or housing assistance who recently arrived in your CoCs' geographic; and
4.	describe how the changes affected your CoC's PIT count results; or
5.	state "Not Applicable" if there were no changes or if you did not conduct an unsheltered PIT count in 2024.

(limit 2,500 characters)

The CoC resumed the methodology that has worked in the area for many years in 2023 which included blitz counting, the use of GIS, and large numbers of volunteers aimed to capture harder-to-reach populations such as youth, families, and members of the LGBTQ+ and Hispanic communities. The CoC heavily recruited local health departments, libraries, faith-based organizations, and churches to participate in PIT Count in communities in which they are located as they are an integral part of service provision in the area. The CoC deployed experienced PIT volunteers with newer volunteers to ensure the PIT implementation was consistent throughout the CoC's 71 county geographical area.

1. N/A
2. N/A
3. The CoC was not impacted by people displaced either from natural disasters.
4. N/A
5. Not applicable - A 2024 unsheltered PIT Count was conducted but there were no changes.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reducing the Number of First Time Homeless—Risk Factors Your CoC Uses. NOFO Section V.B.5.b.	
In the field below:		
<ol style="list-style-type: none">1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;2. describe your CoC's strategies to address individuals and families at risk of becoming homeless; and3. 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		

(limit 2,500 characters)

1. The CoC utilized comprehensive HMIS and CES data to identify individuals and families entering homelessness for the first time. The CES tracks the number of people entering Emergency Shelters (ES), Transitional Housing (TH), and Permanent Housing (PH) projects with no prior enrollments in HMIS within the past 24 months. This data includes non-CoC funded agencies providing housing, homelessness prevention, and diversion services, such as ESG, SSVF, VSPs, HOPWA, and community-funded providers, helping us identify risk factors associated with homelessness.

Currently, the CoC uses an assessment tool to measure vulnerabilities and target individuals for appropriate assistance to prevent homelessness. This assessment includes questions about the duration of homelessness and the underlying causes, as well as social determinants of health such as economic stability, healthcare access, and social context. It also identifies risk factors to assist in harm reduction.

The CoC collaborates with area clothing closets, feeding programs, crisis call centers, employment centers, medical clinics, and outreach teams to enhance homeless prevention services. Referrals come from various sources, including TANF offices, Social Security offices, WIN Job Centers, crisis centers, public school systems, and supportive service providers. Additionally, the CoC has engaged landlords statewide to educate them on available services, resulting in referrals to SSVF, ESG, HOPWA, and other homeless prevention agencies.

2. The CoC has committees within its 5 regions to review areas, prevention service provider plans, and examine data that includes the level of need and associated factors. Information is shared with the CoC's committees, and reports are presented at full membership meetings. Area ESG, SSVF, HOPWA, and outreach teams immediately respond to persons identified at risk of homelessness. The CoC has held Rapid Resolution training attended by all service providers to ensure effective responses to preventing and rapidly ending homelessness.

3. MS United To End Homelessness, Inc. employs the CoC Director to oversee the CoC's strategy.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoC's geographic area?	No

2C-2.	Reducing Length of Time Homeless—CoC's Strategy.	
	NOFO Section V.B.5.c.	

	In the field below:
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;

2.	describe 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 2,500 characters)

1. The CoC works diligently to decrease the length of time individuals and families remain homeless using outreach, CES, by-name-list, diversion, and prioritization of housing placement. Outreach teams are linked directly to housing and can immediately place persons encountered into permanent housing solutions. The CoC has multiple agencies that use outreach workers covering the entire CoC area and performing daily outreach. Outreach is also provided on-site for many ES and TH projects within the CoC service area. The outreach staff meets with persons receiving shelter services to ensure they are included in the BNL. Additionally, the CES system places great emphasis on the length of time a person has spent in homelessness, and their priority is increased by the length of time they have remained homeless.
2. All CoC member agencies are encouraged to participate in monthly outreach following every regional meeting. This approach ensures that all agencies are aware of the needs present within their areas of service. Outreach teams use the CES assessment to help prioritize available beds for the most vulnerable and, with the most extended lengths of time homeless. This approach also helps with homelessness diversion where appropriate. Outreach teams ensure that every person or family encountered is entered into the CES and included on the BNL so that workgroups -that meet weekly- can provide access to services and that those most in need are placed in housing in an expedited manner. Our target timeline from housing program admission to move-in is 15 days. As part of the annual training regimen, the CoC includes Rapid Resolution/Diversion education (and planning) to better address the condition of people seeking services and reduce the length of time in homelessness.
3. MS United To End Homelessness, Inc. employs the CoC Director to oversee the CoC's strategy.

2C-3.	Successful Permanent Housing Placement or Retention –CoC's Strategy.	
	NOFO Section V.B.5.d.	

In the field below:	
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;
2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1. The CoC's rate of exits to permanent housing destinations for those residing in ES, TH, RRH, was higher than 50% (currently 56%). The CoCs HUD-funded agencies use a low-barrier, housing-first approach throughout all housing services to help ensure housing placement and retention. The CoC also ensures access to comprehensive services that provides all necessary support services to persons housed in ES and TH projects to move persons into Permanent Housing. These services include connecting to transportation, food, employment, education, and healthcare/mental health resources. Training is also offered on low-barrier acceptance and housing-first approaches. Available RRH projects routinely accept referrals from area shelters (through the CES) to immediately place persons receiving shelter services into permanent housing.
2. With the CoC's rate of retention of/or exits to permanent housing currently at 81%, our CoC understands that there is work to do. The CoC will bolster training and monitoring efforts to ensure that all CoC-funded RRH projects take a housing-first approach, so that families and individuals moving into permanent housing are provided the necessary support. Persons are identified using the VI-SPDAT to confirm the type of service offered meets the needs of the client. With this focused approach, clients are set for success by having their needs addressed while in program and after. The CoC will continue routinely updating its moving-on plan as situations within the community change. CoC and other agency staff will continue working to build relationships with employers, job training agencies, and non-CoC permanent housing opportunities (PHA lead programs) as part of its plan. Training is provided to service providers on best practices, evidence-based housing-first approaches, and area supportive services targeted toward the populations served to ensure participant success. The CoC and its lead agency also conduct Rapid Resolution training which assists clients even after they are discharged from program. Lastly, CoC agencies always prioritize formerly homeless that hit our Prevention system, so we prevent recidivism by using prevention (case management and rental assistance) to keep clients housed if they again fall on hard times.
3. MS United To End Homelessness, Inc. employs the CoC Director to oversee the CoC's strategy.

2C-4.	Reducing Returns to Homelessness—CoC's Strategy.	
	NOFO Section V.B.5.e.	

In the field below:	
1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate that individuals and families return 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 2,500 characters)

1. The CoC uses HMIS data to monitor and report returns to homelessness. The CoC had an 18% return rate when counting and strategies began. According to the HDX competition report, the CoC current return rate over the last 24 months is 5.6%. To reduce returns to homelessness, the CoC prioritizes prevention clients that originated from Outreach, CES, and/or RRH/PSH – this allows for quick identification (using data) and a quick response from agency staff. Therefore, when someone is at risk of returning to homelessness, agency staff are made aware and employ a swift response. We attempt to utilize prevention to avoid any client's return to homelessness. When prevention is not possible, the CoC has a by-name list of persons who returned to homelessness and worked with area agencies to ensure the needed wraparound services are being offered to decrease returns to homelessness for individuals and families served. This list also allows the housing projects to engage the individuals and families that returned to homelessness to make any return as brief as possible. The CoC routinely provides agencies training and education on available community support services to help prevent returns to homelessness.

2. As mentioned, the CoC prioritizes prevention clients with a history of homelessness, so this allows for returns to homelessness to be avoided through the use of targeted prevention funding (through ESG). This is evidenced by our rate of returns to homelessness being less than 10% (3%) within 12 months of program exit and less than 5% (2.6%) within 6 months of program exit. The CoC's success with state-led employment initiatives has increased job training availability which has prevented returns to homelessness. Job training program creation that provides education for jobs (that effectively provide pay rates that meet area median incomes) has been incredibly successful in helping to prevent future need for services. A project's homelessness return rate is communicated through monthly reporting, it is a focus of CoC monitoring, and is considered part of its monitoring and rating, and review process. Area agencies use a comprehensive list of all supportive services available in each region. The CoC has provided Rapid Resolution training to area agencies and is providing Homeless 101 training.

3. MS United To End Homelessness, Inc. employs the CoC Director to oversee the CoC's strategy to ensure that the strategy.

2C-5. Increasing Employment Cash Income—CoC's Strategy.	NOFO Section V.B.5.f.
In the field below:	
1. describe your CoC's strategy to access employment cash sources;	
2. describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment 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 2,500 characters)

1. The CoC, after much effort, the rate of income from employment was more than 20% as reported in HDX. As part of the increasing employment strategy, CoC homeless service providers across the state work with MS Voc-Rehab agencies to assist persons with training and employment opportunities. WIN Job Centers, run by the MS Department of Employment Services, provide connections to training and employment for CoC clients. In addition, TANF programs in MS offer some assistance to parenting persons seeking and engaging in work. The CoC provides information on accessing these services at annual training and monthly regional meetings. In addition, CoC member agencies are provided with training and access to HUD-provided training, including the "Getting to Work" and "HUD's Employment Lecture series."
2. Additionally, the CoC is constantly looking for funding opportunities that support creating job training programs that educate persons on trades that provide above-poverty wages. Recent stimulus funding has been used in part for this objective. CoC-funded agencies routinely work with area employers to assist persons receiving services in finding employment. In addition, the CoC regional committees work with corporations, for-profits, and non profit employers within their local areas to encourage involvement in regional committees and CoC-wide membership meetings. As a result, employers are educated on the benefits of employing their homeless neighbors. The CoC has worked with several corporations to create job training programs across the state. These programs include construction training in Hattiesburg, city beautification and landscape training in Tupelo, MS Dept of Transportation CDL training, Entergy's lineman training, and FedEx's training across the delta regions. At no cost to CoC clients, these training programs come with stipends and connections to employment once training is completed. In addition, the CoC has connected to cities, counties, and local employment agencies to receive emails related to job fairs and other training and employment opportunities. Email blasts are sent out to 200+ agencies of these notifications. Agencies are encouraged to build partnerships with companies in their areas invested in the agency's mission. All employment income is monitored in HMIS and reported to the CoC by the HMIS administrator every month.
3. MS United To End Homelessness, Inc. employs the CoC Director to oversee the CoC's strategy.

2C-5a.	<p>Increasing Non-employment Cash Income—CoC's Strategy</p> <p>NOFO Section V.B.5.f.</p> <p>In the field below:</p> <ol style="list-style-type: none">1. describe your CoC's strategy to access non-employment cash income; and2. provide the organization name or position title that is responsible for overseeing your CoC's strategy to increase non-employment cash income.
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(limit 2,500 characters)

1. The CoC has continually increased non-employment income across its programming (58% increase year over year), but we have yet to increase the rate to more than 50% as reported in HDX. MUTEH, Inc., the CoC HMIS lead agency, employs case managers who are SOAR trained. As part of the CoC, any agency that participates and is within the CoC service area is provided access to these SOAR-trained case managers to assist persons receiving housing services with increasing income from SSI and SSDI. In recent years, the representative from the MS Dept. of Mental Health for the CoC Governing Council was also the State SOAR Coordinator. Additionally, several agencies are currently employing SOAR-trained case managers. All case managers from participating agencies routinely assist persons in accessing TANF, SNAP, unemployment benefits, and community support. All income variances are monitored in HMIS and reported monthly by MUTEH, Inc. to the CoC-employed director. Reports are also given to area homeless service providers and the CoC member agencies. Even when considering all of these efforts, ultimately, programs allow for clients to choose how they wish to increase their income. They are informed of the option for non-employment cash income and the many benefits that are provided with that option. However, many opt to pursue earned income citing the higher earning potential, the mental health benefits of working, and the ability to support others as they maintain full-time employment at a livable wage.

2. MS United To End Homelessness, Inc. employs the CoC Director and she monitors these outcomes to identify agencies where additional training may be needed. These performance measures are used as part of the ranking and review process.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project—Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project 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-2.	New PH-PSH/PH-RRH Project—Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
--	--	-----

3A-3.	Leveraging Housing/Healthcare Resources—List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

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

Project Name	Project Type	Rank Number	Leverage Type
ASC 227 Place PSH...	PH-PSH	14	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? ASC 227 Place PSH Expansion
2. Enter the Unique Entity Identifier (UEI): FE7PFVYYKMX7
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 14
5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1. Rehabilitation/New Construction Costs–New Projects.	NOFO Section V.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 V.B.1.r.
---	-----------------------

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 2,500 characters)

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

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serve Persons Experiencing Homelessness as Defined by Other Federal Statutes. NOFO Section V.F.	
	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.	Cost Effectiveness of Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes. NOFO Section V.F.	
<p>You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.</p> <p>If you answered yes to question 3C-1, describe in the field below:</p> <p>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</p> <p>2. how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.</p>		

(limit 2,500 characters)

4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at [CoC Program Competition](#) to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2024 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1. New DV Bonus Project Applicants.	
NOFO Section I.B.3.j.	

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 have provided the following guidance to help you successfully upload attachments and get maximum points:

1.	You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2.	You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3.	We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4.	Attachments must match the questions they are associated with.
5.	Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6.	If you cannot read the attachment, it is likely we cannot read it either. 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). We must be able to read everything you want us to consider in any attachment.
7.	After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8.	Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	10/25/2024
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	10/25/2024
1D-10a. Lived Experience Support Letter	Yes	Lived Experience ...	10/25/2024
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	10/25/2024
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	10/25/2024
1E-2a. Scored Forms for One Project	Yes	Scored Forms for...	10/25/2024
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	10/25/2024
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	10/25/2024
1E-5b. Local Competition Selection Results	Yes	Local Competition...	10/25/2024
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes		
1E-5d. Notification of CoC-Approved Consolidated Application	Yes		

2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HUD's Homeless Da...	10/25/2024
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	10/25/2024
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Lived Experience Support Letters

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: HUD's Homeless Data Exchange (HDX) Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

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	09/18/2024
1B. Inclusive Structure	10/24/2024
1C. Coordination and Engagement	10/24/2024
1D. Coordination and Engagement Cont'd	10/24/2024
1E. Project Review/Ranking	10/24/2024
2A. HMIS Implementation	10/24/2024
2B. Point-in-Time (PIT) Count	10/24/2024
2C. System Performance	10/23/2024
3A. Coordination with Housing and Healthcare	10/22/2024
3B. Rehabilitation/New Construction Costs	10/18/2024
3C. Serving Homeless Under Other Federal Statutes	10/18/2024

4A. DV Bonus Project Applicants	10/18/2024
4B. Attachments Screen	Please Complete
Submission Summary	No Input Required

PHA HOMELESS PREFERENCE

Question 1C-7

BACKGROUND

Tennessee Valley Regional Housing Authority's Administrative Plan includes several general preferences for the homeless population. The MSBoS CoC can refer homeless individuals from the CoC Coordinated Entry System into housing vouchers through these preferences.

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Document Satisfying Requirement	Page Number
Cover Sheet	1
Tennessee Valley Regional Housing Authority Preference Letter	2
Tennessee Valley Regional housing Authority Administrative Plan	3-4
Excerpt listing preferences	



Tennessee Valley Regional Housing Authority

P. O. Box 1329, Corinth, Mississippi 38835-1329, A.C. 662-286-8437, FAX 662-287-1996

mail@tvhra.com

TTY/TDD Customers Dial – 711 or 1-800-855-1000 (Voice) 1-800-582-2233

October 23, 2024

To Whom It May Concern,

The Tennessee Valley Regional Housing Authority's current Administrative Plan implements multiple preferences that serve the homeless community within the Mississippi Balance of State Continuum of Care.

1. The Emergency Housing Voucher connects those experiencing literal homelessness to TVRHA's Emergency Housing Vouchers. We have a Memorandum of Understanding with MS Balance of State CoC to execute Emergency Housing Vouchers. TVRHA currently assists 40 EHV voucher holders.
2. The Domestic Violence Preference connects victims of domestic violence within HUD's category 4 of the homeless definition to housing vouchers.
3. The Foster Youth to Independence Preference connects homeless youths to the Foster Youth to Independence Vouchers. We have a Memorandum of Understanding with the MS Department of Child Protective Services, Youth Advocates, Youth Service Providers, and the MS Balance of State CoC to execute Foster Youth to Independence vouchers. We currently assist 10 FYI voucher holders.
4. The CHOICE Preference connects homeless and at-risk individuals with severe mental health issues to coinciding housing and mental health treatment.

The Mississippi Balance of State CoC Coordinated Entry System has been influential in implementing these preferences and has assisted in connecting vulnerable homeless individuals to our vouchers.

Sincerely,

A handwritten signature in blue ink that reads "M. Jason Spencer".

M. Jason Spencer
Executive Director
Tennessee Valley Regional Housing Authority

CC: File
Marika Baliko

Enclosures

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion.

Any local preferences established must be consistent with the PHA plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

The PHA uses the following Local Preference system:

1. **Choice Mobility Super-Preference:** Residents of Multifamily projects (PBRA) have a right to move with tenant based rental assistance (e.g., HCV) the later of: (a) 24 months from the date of execution of the HAP contract in Multifamily or (b) 24 months after the move-in date.
2. **Non-Elderly Disabled Preference/811:** Families with a household member (Age 18 to 61 y/o) with disabilities who are transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless or at risk of becoming homeless. In order to receive this preference, only one household member must be a non-elderly disabled person. It need not be the Head, Co-head or Spouse. This preference is open to all non-elderly disabled applicants regardless of whether they are referred by the Choice program or they come through the regular HCV waiting list.
3. **MUTEH/CHOICE Program Preference:** CHOICE provides independence to persons with serious mental illness through stable housing via rental assistance, with supportive mental health services through Integrated Supportive Housing
4. **Foster Youth to Independence Initiative (FYI):** This initiative provides vouchers to youth between the ages of 18-24, that have left foster care, or will leave foster care within 90 days, in accordance with a transition plan described in section 475(5)(H) of the Social Security Act at age 16 or older; and is homeless or is at risk of becoming homeless. These applicants will be referred by the Mississippi Department of Child Protection Services (MDCPS), who will determine eligibility for the initiative and that the applicants are emancipated pursuant to Mississippi Law. These vouchers will be applied for upon referral from the MDCPS on an individual basis.
5. **Community Transition Service (CTS):** Provides assistance to individuals in nursing facilities, or intermediate care facilities, in identifying potential community living options. To be eligible for this preference, individuals must be approved by the Mississippi State Division of Medicaid. CTS is for persons whom are 21 years of age and older with physical, mental, developmental, or intellectual disabilities and adults age sixty-five and older who qualify for Medicaid Elderly and Disabled Waiver
6. **Displaced Preference:** Selection of displaced public housing or voucher participants who have been displaced by a presidentially declared disaster. Evidence of displacement shall include a letter from a state, local, or federal agency. Evidence of displacement shall also include documentation of a current FEMA number as part of a presidentially declared disaster

7. **SAFE--Victims of domestic violence-** Applicants in place at a facility designed to house victims of domestic violence.
8. **Singles Preference--**Applicants who are elderly, disabled, or displaced families of no more than two person families will be given a selection priority over all “Other Single” applicants regardless of preference status.

“Other singles” denotes a one-person household in which the individual member is not elderly, disabled, or displaced by government action. Such applicants will be placed on the wait list accordance with any other preferences to which they are entitled, but they cannot be selected for assistance before any one- or two-person elderly, disabled, or displaced family.

9. Current waiting list applicants who can verify that they have a residence in our jurisdiction of Alcorn, Chickasaw, Itawamba, Lee, Monroe, Pontotoc, Prentiss, Tippah, and Union counties will come before any “out of jurisdiction” or “other single” applicants.

The PHA will first assist families that have been terminated from the HCV program due to insufficient funding and then assist families that qualify for the VAWA preference.

PHA MOVING ON PREFERENCE

Question 1C-7

BACKGROUND

Currently, no PHA Administrative Plans within the CoC geographical area implement a formal Moving-On Preference, but the MSBoS is working closely with PHAs and the Mississippi Association of Housing and Redevelopment Officials (MAHRO) to adopt formal Moving-On Preferences during their next Administrative Plan updates. Currently, The CoC implements the Moving-On strategy through working partnerships with PHAs, and routinely connects participants who no longer need intensive services from CoC programs into housing vouchers

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LIVED EXPERIENCE SUPPORT LETTER**Question 1D-10a****BACKGROUND**

The Mississippi Balance of State Continuum has multiple persons with lived experience volunteering their time and expertise to the CoC. Attached is a letter from our 11-person consumer advisory group, and a letter from our rank and review member with lived experience.

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Document Satisfying Requirement	Page Number
Cover Sheet	1
Letter signed by the MS BoS CoC Consumer Working Group	2
Letter Signed by the Rank and Review Committee member with Lived Experience	3

August 29, 2024

MS Balance of State Continuum of Care
Jackson, MS 39102

To Whom It May Concern:

We, the undersigned, are writing to inform you of our active participation in a Consumer Advisory Council dedicated to improving the housing system for individuals experiencing homelessness. As current participants in a housing program, individuals who have recently graduated from such programs, or those currently homeless and navigating their path to stable housing, we voice our perspectives and drive meaningful change.

Our Consumer Advisory Council plays a crucial role in evaluating and enhancing housing policies and practices. Through our lived experiences, we offer valuable insights into the challenges and successes of the current system. Our council is committed to ensuring that the voices of those directly affected by homelessness are integral to the decision-making process.

The primary goals of our council include:

1. **Identifying Barriers:** We work to pinpoint obstacles within the housing system that hinder access to stable and supportive housing and a reduction of unsheltered homelessness.
2. **Recommending Improvements:** Based on our collective experiences, we provide actionable recommendations to refine existing programs and introduce new strategies that better serve the needs of individuals experiencing homelessness and to end homelessness for all persons.
3. **Promoting Inclusivity:** We advocate for policies and practices that are inclusive, equitable, and responsive to the diverse needs of the homeless community.
4. **Ensuring Accountability:** We strive to hold the system accountable for the commitments made towards improving system performance and addressing homelessness effectively and compassionately.

Our participation in the Consumer Advisory Council is grounded in a shared commitment to creating a more effective housing system. Our direct experiences are essential in shaping policies that genuinely address the realities faced by those we represent.

We look forward to continuing our collaboration with the Continuum of Care and other housing, health, and service agency stakeholders to foster positive change. Thank you for your attention and support in this crucial endeavor.

Thank you,

Sign: Marcy Jones
Currently Unsheltered

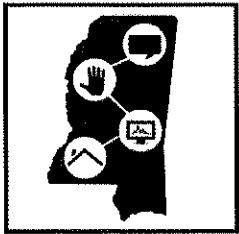
Print: Marcy Verus,

Sign: Mary Doner
Current Program Participant

Print: Mary Doner,

Sign: Rodney J. Wilcher
Previously Unsheltered

Print: Rodney Wilcher,



MISSISSIPPI
BALANCE OF STATE
CONTINUUM OF CARE

ADDRESS
201 W. Capitol Street, Suite 800
Jackson, MS 39201
MAILING ADDRESS
P.O. Box 24147
Jackson, MS 39225
PHONE
Office: (601) 960-0557
Fax: (866) 551-0916

October 3, 2024

To Whom it May Concern,

I, Brian Kemp, as a person with lived experience participated in the Mississippi Balance of State Continuum of Care Rank and Review Committee on Thursday, October 3, 2024.

If you have any questions, please email at bkemp@stewpot.org.

Sincerely,


Brian Kemp

HOUSING FIRST EVALUATION

Question 1D-2a

BACKGROUND

The Mississippi Balance of State Continuum of Care staff completed a Housing First Assessment with all currently funded CoC agencies before the CoC Competition process began. The Housing First Assessment example included in this attachment is for the Aids Services Coalition-227 Place project. The project has a total of 12 units serving both families and individuals in the Mississippi Balance of State Continuum of Care.

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Cover Sheet	1
ASC-227 Place Agency Evaluation for Compliance with Housing First Principles	2-22
ASC-227 Place HUD Housing First Standards Evaluation Tool Result	23-28

AIDS SERVICES COALITION
Agency Evaluation for Compliance with Housing First Principles

<p>1. Admission to projects is not contingent on pre-requisites, such as sobriety, completion of substance abuse treatment, a minimum income threshold, a clean criminal background, good credit, age, physical, mental, or emotional status, medication compliance, participation in services, history of victimization, or any other unnecessary conditions unless required by law or funding source.</p>	<p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>2. Procedures and oversight demonstrate staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed above.</p>	<p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>3. The application consists of the fewest questions possible to determine applicants' eligibility.</p>	<p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>4. Where applicants are found to be low on the vulnerability index and can be expected to remain on the waiting list long-term, procedures and oversight demonstrate that staff utilize the coordinated entry system to make referrals to housing programs and services elsewhere.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>5. Projects ensure equal access for persons regardless of one's sexual orientation, marital status, or gender identity in accordance with the 2012 and 2016 Equal Access Rule.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>6. Applicants with disabilities are offered clear opportunities to request reasonable accommodations during application and screening.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>7. Staff works with landlords to ensure the availability of housing that is accessible to persons with disabilities.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>8. Staff develops relationships with landlords who are willing to consider applicants who have poor credit, criminal backgrounds, or prior evictions, etc.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>9. Staff helps to prepare applicants to give an explanation regarding their background.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>10. There is a timely and clearly stated process for the approval or denial of housing applications and appeals.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>11. A system is in place to aid communication between staff and applicants during the application and screening phase of the admissions process.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>12. Projects have procedures to help participants obtain, track, and retain documentation required by funding sources.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>13. Applicants are admitted regardless of the status of their eligibility documentation whenever applicable.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>If "No," please explain:</p> <p>Our two CoC PSH programs are both facility based and serve special populations where their eligibility is based on HIV status (121 Haven House) or disability (227 Place/Green Meadows).</p> 	
<p>14. Intake schedules are flexible to ensure access for all households. Projects do not require specific appointment times.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>15. Intake and assessment procedures are focused on the individual's strengths, needs, and preferences and identify barriers to housing, which inform the basis of the housing plan at project enrollment and again after being housed.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>16. Housing and service goals are participant driven.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>17. Participation in services or compliance with service plans are not conditions of program participation but are reviewed with participants and regularly offered as a resource to participants.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>18. Participants are given the opportunity to transfer from one housing situation, program, or project to another if their housing is in jeopardy. Whenever, possible, exits back into homelessness are avoided.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain: Yes, however, our programs are facility based and movement would be within the housing (other units within facility).</p> 	
<p>19. Drug and alcohol use in and of itself, without other lease violations, is not considered a reason for eviction.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>20. Leases are renewable upon expiration (for a term of at least one month), except with prior notice by either party.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p>	
<p>Our PSH projects are facility based.</p>	
<p>21. As far as is practicable, participants are allowed to choose location and type and size of housing based on preferences from a range of housing types and among multiple units.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>If "No," please explain:</p>	
<p>Our PSH projects are facility based.</p>	
<p>22. As far as is practicable, participants are allowed to choose their roommates when sharing a room or unit.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p>	
<p>Our PSH projects are facility based.</p>	
<p>23. Leases are the same as they are for tenants who do not receive financial assistance.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p>	

<p>24. The terms of the lease are explained to the participant before signing. Participants are informed of their legal rights and responsibilities, including causes for eviction.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> <hr/> <hr/> <hr/>	
<p>25. Participants are encouraged to provide feedback regarding the project's policies, processes, procedures, and practices.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> <hr/> <hr/> <hr/>	
<p>26. There is a concerted effort among providers to hold housing for participants, even if they are absent from their unit for short periods of time (under 90 days) due to drug and alcohol treatment, hospitalization, or any other temporary stay away from the unit.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> <hr/> <hr/> <hr/>	

<p>27. Participants are given reasonable flexibility in paying their share of rent on time and offered special payment arrangements for rent arrears and/or assistance with financial management, including payee arrangements.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>28. Policies and practices are established to prevent eviction, evicting participants only when they are a danger to self or others.</p>	
<p>If "No," please explain:</p> 	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>29. Protection exists for a participant who is a victim of a criminal act of physical violence by another participant in the same unit, such that the victim is not evicted, removed, or penalized if the perpetrator is evicted.</p>	
<p>If "No," please explain:</p> 	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

<p>30. Participants are allowed to choose from an array of services that are designed to improve housing stability.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>31. Services are made available to participants for the duration of their participation in the project and up to six months following their exit.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>32. Services are continued, even if participants lose their housing or are absent from their unit for short periods of time (under 90 days) due to drug and alcohol treatment, hospitalization, or any other temporary stay away from the unit.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>33. Supportive services emphasize engagement and the development of relationships with participants that provide immediate needs and in which participants feel safe.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

<p>34. Services are culturally sensitive and family friendly. Interpreters are provided when needed to ensure full comprehension of the project.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>35. Staff demographics reflect the participant population, as far as is practicable.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>36. Staff are trained in clinical and non-clinical approaches (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based).</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	
<p>37. Policies and practices do not interfere with a participant's life in the community.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p> 	

38. Accommodation is made for pets.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If "No," please explain: Our PSH are facility based – one owned by ASC and the other leased apartments – and ASC will provide accommodations for certified service animals but not pets. With the client's permission, we will seek to find safe spaces if they have a pet.	
39. Policies and procedures contain an emergency transfer plan that accommodates transfers for participants who reasonably believe that they are threatened with imminent harm from further violence is the participant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No," please explain:	
40. Staff regularly assess participants' needs for continued assistance and provide tailored assistance based on those assessments.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If "No," please explain:	

<p>41. Recovery housing projects provide services that align with participants' choice and prioritization of recovery, including but not limited to abstinence from substances (if that is a personal goal), long-term permanent housing stability, and stable income through employment or benefits. Support is offered through connection to community-based treatment options.</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>If "No," please explain: ASC is not a recovery housing program but as a part of its case management works with those impacted by alcohol and drugs.</p>	
<p>42. Relapse support is provided that does not automatically evict or discharge a participant from the project for temporary relapse.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If "No," please explain:</p>	



MISSISSIPPI
BALANCE OF STATE
CONTINUUM OF CARE

(PLEASE NOTE THAT ASC COC PROGRAMS ARE FACILITY BASED PSH.)

HOUSING FIRST SELF-ASSESSMENT

1. How does the program determine the type of housing in which a participant will live?

- Program assigns participant to the first available housing unit.
- Program conducts a needs assessment and determines the most appropriate housing based on participant's needs/functioning.
- Program assigns housing based on a needs assessment, but with input from the participant regarding his preference.
- Participant chooses the type of housing he wants to live in.

2. How does the program determine the neighborhood in which a participant will live?

- Program automatically assigns participant to the neighborhood with the first available housing unit.
- Program conducts a needs assessment and determines the most appropriate neighborhood based on participant's needs/functioning.
- Program assigns housing based on a clinical assessment, but with input from the participant regarding his preference.
- Participant chooses the neighborhood he wants to live in, given what he can afford.

3. Does the program assist participants with furniture?

- Program does not assist participants with obtaining furniture.
- Program assists participants with finding furniture in the community (e.g., donations).
- Program assists participants by purchasing furniture.

4. To what extent does this program have ready access to affordable housing?

- Program does not have ready access to affordable housing and does not provide support for participants to obtain it.
- Program does not have access to affordable housing, but provides advocacy and support for participants to obtain housing.
- Program has direct access to affordable housing, but there is a waiting period for participants.
- Program has ready direct access to housing for all participants.

5. What percent of participants pay 30 percent or less of their income towards their rent (excluding costs for other services such as food, housekeeping, and nursing) in permanent supportive housing?

- 0 - 14%
- 15 – 29%
- 31 - 45%
- 56 – 60%
- 60 – 84%
- 85 – 100%

6. **On average**, how long does it take participants to move from enrollment into permanent housing?

- Within 1 year
- Within 6 months
- Within 3 months
- Within 1 month
- Within 2 weeks

7. What requirements do program participants have to meet in order to gain access to a permanent, independent unit (**choose all that apply**)?

- Completion of a period of time in transitional housing, outpatient, inpatient, or residential treatment.
- Sobriety or abstinence from alcohol and/or drugs.
- Compliance with medication.
- Psychiatric symptom stability.
- Willingness to comply with a treatment plan that addresses sobriety, abstinence, and/or medication compliance.
- Agreeing to face-to-face visits with staff.
- Meeting responsibilities of a standard lease.

8. What requirements do participants have to meet in order to stay in permanent housing (**choose all that apply**)?

- Sobriety or abstinence from alcohol and/or drugs.
- Compliance with medication.
- Psychiatric symptom stability.
- Compliance with treatment plan and/or participation in formal treatment activities (e.g., attending groups, seeing a psychiatrist, etc.).
- Agreeing to face-to-face visits with staff.
- Meeting responsibilities of a standard lease.

9. Do the majority of participants have any lease or occupancy agreement that specifies their rights and responsibilities of tenancy?

- Yes
- No

10. If yes to the question above, which of the following provisions does the lease or agreement contain (**choose all that apply**)?

- Provisions regarding adherence to medication, sobriety, and/or a treatment plan.
- Provisions regarding adherence to program rules, such as curfews.
- Provisions regarding adherence to face-to-face visits with staff.
- Provision regarding creating behavioral disturbances with respect to other tenants.

11. Which statement best describes program actions regarding housing when participants lose their housing?

- Program does not offer a new housing unit and does not assist participants with finding housing outside the program.
- Program does not offer a new housing unit, but helps participants find housing outside the program.
- Program offers participants a new unit after they meet readiness criteria, complete a period of time in more supervised housing, and/or program has set limits on the number of relocations.
- Program offers participants a new unit and decisions to re-house participants are individualized and minimize conditions that participants need to fulfill prior to receiving a new unit.

12. Which statement best describes program actions regarding services when participants lose their housing?

- Participants are discharged from services if they lose housing.
- Participants are discharged from services if they lose housing, but there are explicit criteria outlining options for re-enrollment.
- Participants continue to receive program services if they lose housing, but may be discharged from services if they do not meet certain criteria.
- Participants continue to receive program services if they lose housing.

13. How does the program determine the type, sequence, and intensity of services on an ongoing basis?

- Services are chosen by case manager, generally based on a needs assessment and participant functioning.
- Participants have some say in choosing, modifying, and refusing services, but case manager's determinations usually prevail.
- Participants have some say in choosing, modifying, or refusing services and participant preferences usually prevail.
- Participants choose, modify, or refuse services and supports at any time, except one face-to-face visit with case manager per month.

14. What are the requirements for participants with serious mental illness to take medication or participate in psychiatric treatment such as attending groups or seeing a psychiatrist?

- All participants with serious mental illness are required to take medication and/or participate in treatment.
- Most participants with serious mental illness are required to take medication and/or participate in treatment, but exceptions are made.
- Participants with serious mental illness who have not achieved symptom stability are required to take medication and/or participate in treatment.
- Participants with serious mental illness are not required to take medication and/or participate in treatment.

15. What are the requirements for participants with substance abuse disorders to participate in substance abuse treatment such as inpatient treatment, attending groups, or counseling with a substance use specialist?

- All participants with substance abuse disorders, regardless of current use or abstinence are required to participate in substance abuse treatment.
- Participants with substance abuse disorders who have not achieved a specified period of abstinence must participate in substance abuse treatment.
- Participants with substance abuse disorders who are currently actively using substances must participate in substance abuse treatment.
- Participants with substance abuse disorders are not required to participate in substance abuse treatment.

16. What is the program's approach to substance use among participants?

- Participants are required to abstain from alcohol and/or drugs at all times and/or program imposes negative consequences for substance use.
- Participants are required to abstain from alcohol and/or drugs while in their residence.
- Participants are not required to abstain from alcohol and/or drugs, but staff work with participants to achieve abstinence.
- Participants are not required to abstain from alcohol and/or drugs, but staff work with participants to reduce the negative consequences of substance use and/or utilize appropriate interventions.

17. Which of the following activities does program staff use to promote adherence to a service plan (**choose all that apply**)?

- Requiring urine screening.
- Paying participants to take medication
- Requiring daily visits with staff.
- The threat of withholding participant services.
- The threat of loss of housing.
- Engaging in quid pro quo (a bargained for exchange).

18. Which of the following are included in a participant's treatment plan and follow-up (**choose all that apply**)?

- Goals that are chosen by staff or automatically set by the program.
- Goals that are chosen by staff with input from the participant.
- Goals that are chosen by the participant with input from staff.
- Participant strengths.
- Barriers to achieving goals.
- Participant and program actions taken to support goals.

19. Which life areas does the program systematically address with specific service interventions (**choose all that apply**)?

- Interventions that target mental health and substance use symptoms.
- Interventions that target housing support.
- Interventions that target physical health.
- Interventions that target employment and education.
- Interventions that target financial needs.

20. What services does the program offer to help participants maintain housing such as offering assistance with neighborhood orientation, landlord relations, budgeting, and shopping (**choose all that apply**)?

- Program does not offer housing support services.
- Program offers housing support services during move-in, such as neighborhood orientation and shopping.
- Program offers ongoing housing support services, such as neighborhood orientation, landlord relations, budgeting, and shopping.

21. What type of psychiatric services, if any, are available to participants?

- Program does not assist participants with access to psychiatric care.
- Program refers participants to psychiatrists or nurse practitioners in the community, but **does not have** formal or informal linkages with these providers.
- Program refers participants to psychiatrists or nurse practitioners in the community **and has** formal or informal linkages with these providers.
- Program has a psychiatrist or nurse practitioner on staff that provides services directly to participants.

22. What types of services, if any, are available to participants who are interested in paid employment opportunities (choose all the apply)?

- Substance use treatment services are not available.
- Systematic integrated screening and assessment.
- Interventions/counseling tailored to participant's readiness to change.

23. What types of services, if any, are available to participants who are interested in paid employment opportunities (choose all that apply)?

- Employment services are not available.
- Vocational assessment.
- Community based employment.

24. What types of services, if any, are available to participants who are interested in education (choose all that apply)?

- Educational services are not available.
- Educational assessment.
- In house education (e.g., literacy remediation).
- Adult school, vocational training, trade school/apprenticeship.
- Supported education in the community (e.g., community college).

25. What types of services, if any, are available to participants who have medical (physical health) issues (choose all that apply)?

- Medical/physical health services are not available.
- Screening for medical problems or medication side effects.
- Managing medication related to physical health.
- Communicating and coordinating services with other medical providers.
- Health promotion, prevention, education activities.
- On-site diagnosis and treatment of physical health conditions.

26. Is there a policy regarding the minimum number of face-to-face contact that participants are required to have with staff in a month?

- No minimum requirements.
- 1
- 2 – 3
- 4 – 5
- 6 – 10
- 11 – 14
- 15+

27. On average, what is the actual number of face-to-face contacts participants have with staff in a month?

- < 1
- 1
- 2 – 3
- 4 – 5
- 6 – 10
- 11 – 14
- 15+

28. What types of opportunities are available for participant input into program operations and policy (**choose all that apply**)?

- Program has a formal grievance process for participants to express concerns or dissatisfaction.
- Program formally offers opportunities for participant feedback (e.g., community meetings).
- Program routinely includes participants on planning/implementation committees, advisory boards.
- Program employs persons with lived experiences in regular staff positions.
- Program includes participants on governing bodies.

29. Is there anything else that you would like to mention that would be important to know about your program and its Housing First principles?



Provider Information

Please complete the information below on the organization being assessed.

Provider Information	
Provider's Legal Name	AIDS Service Coalition
Acronym (If Applicable)	ASC
Year Incorporated	2003
EIN	14-1855167
Street Address	121 College St, Hattiesburg, MS
Zip Code	39401

Project Information	
Project Name	Green Meadows PSH 2022 (227 Place)
Project Budget	\$297,572
Grant Number	MS0011L4B012215
Name of Project Director	Jeri Jones
Project Director Email Address	jjones@ascms.org
Project Director Phone Number	(769) 692-2534
Which best describes the project *	Permanent Supportive Housing
<i>If project is a Safe Haven, please choose project type that it most operates like, e.g. shelter, transitional housing, or permanent housing</i>	
Are your services targeted to any of the following populations specifically? Please select one if so, as this impacts your assessment questions.	None of the above

*Please note that when you select a project type, particular standards may not be relevant.

Management Information	
Name of Executive Director	Kathy Garner
ED Email Address	asc@ascms.org
ED Phone Number	(601) 450-4286
Name of Staff Member Guiding Assessment	Kathy Garner
Staff Email Address	asc@ascms.org
Staff Phone Number	(601) 450-4286

Assessment Information	
Name of Assessor	Miranda Horn
Organizational Affiliation of Assessor	MS Balance of State Continuum of Care
Assessor Email Address	mhorn@msbos.org
Assessor Phone Number	(601) 720-2899
Date of Assessment	Jul 12 2024



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

No.	Standard	Access Definition / Evidence	Say It	Document it	Do it
Access 1	Projects are low-barrier	Admission to projects is not contingent on pre-requisites such as abstinence of substances, minimum income requirements, health or mental health history, medication adherence, age, criminal justice history, financial history, completion of treatment, participation in services, "housing readiness," history or occurrence of victimization, survivor of sexual assault or an affiliated person of such a survivor or other unnecessary conditions unless required by law or funding source.	Always	Always	Always
Access 2	Projects do not deny assistance for unnecessary reasons	Procedures and oversight demonstrate that staff do everything possible to avoid denying assistance or rejecting an individual or family for the reasons listed in Access Standard #1.	Always	Always	Always
Access 3	Access regardless of sexual orientation, gender identity, or marital status	Equal access is provided in accordance with the 2012 and 2016 Equal Access Rules, meaning that any project funded by HUD must ensure equal access for persons regardless of one's sexual orientation or marital status, and in accordance with one's gender identity. Adult only households, regardless of marital status, should have equal access to projects (if these project types are not available within a CoC, the CoC should conduct an assessment to determine if these project types are needed and work with providers to accommodate the need). Please see Equal Access Rules here: https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/ <i>Has accommodations for trans women in need of assistance.</i>	Always	Always	Always
Access 4	Admission process is expedited with speed and efficiency	Projects have expedited admission processes, to the greatest extent possible, including helping participants obtain documentation required by funding sources, as well as processes to admit participants regardless of the status of their eligibility documentation whenever applicable. <i>The two CoC PSH programs are both facility-based and serve special populations where their eligibility is based on HIV Status or Disability.</i>	Always	Always	Always
Access 5	Intake processes are person-centered and flexible	Intake and assessment procedures are focused on the individual's or family's strengths, needs, and preferences. Projects do not require specific appointment times, but have flexible intake schedules that ensure access to all households. Assessments are focused on identifying household strengths, resources, as well as identifying barriers to housing that can inform the basis of a housing plan as soon as a person is enrolled in the project. <i>Does not bring clients in on a Monday or Friday due to safety since orientation and staff will not be available, but will accommodate with hotels on those dates.</i>	Always	Always	Always
Access 6	The provider/project accepts and makes referrals directly through Coordinated Entry	Projects actively participate in the CoC-designated Coordinated Entry processes as part of streamlined community-wide system access and triage. If these processes are not yet implemented, projects follow communities' existing referral processes. Referrals from Coordinated Entry are rarely rejected, and only if there is a history of violence, the participant does not want to be in the project, there are legally valid grounds (such as restrictions regarding sex offenders) or some other exceptional circumstance that is well documented.	Always	Always	Always
Access 7	Exits to homelessness are avoided	Projects that can no longer serve particular households utilize the coordinated entry process, or the communities' existing referral processes if coordinated entry processes are not yet implemented, to ensure that those individuals and families have access to other housing and services as desired, and do not become disconnected from services and housing. Households encounter these exits under certain circumstances, such as if they demonstrate violent or harassing behaviors, which are described within agencies' regulation-adherent policies.	Always	Always	Always
Name		Participant Input Definition / Evidence	Say It	Document it	Do it
Participant Input 1	Participant education is ongoing	Project participants receive ongoing education on Housing First principles as well as other service models employed in the project. In the beginning of and throughout tenancy, participants are informed about their full rights and responsibilities as lease holders, including the potential causes for eviction. <i>Program hosts regular Community Meetings for tenancy education.</i>	Always	Always	Always
Participant Input 2	Projects create regular, formal opportunities for participants to offer input	Input is welcomed regarding the project's policies, processes, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, a participant leadership/advisory board, processes to formally communicate with landlords, the design of and participation in surveys and focus groups, planning social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services. <i>Community Meetings offer ability for input, and the members of the support groups offer input to the board via the facility. Has individuals with lived experience on the Board.</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Lease and Occupancy Definition / Evidence	Say It	Document It	Do It
Leases 1	Housing is considered permanent (not applicable for Transitional Housing)	Housing is not time-limited (though rent assistance may be) and leases are automatically renewable upon expiration, except with prior notice by either party. <i>Recertification is completed annually but rental assistance is not time-limited.</i>	Always	Always	Always
Leases 2	Participant choice is fundamental	A participant has, at minimum, choices in deciding the location and type of housing based on preferences from a range of housing types and among multiple units, as available and as practical. In project-based settings, participants should be offered choice of units within a particular building, or within the portfolio of single site properties. In projects that use shared housing, i.e. housing with unrelated roommates, participants should be offered choice of roommates, as available and as practical. Additionally, as applicable, participants are able to choose their roommates when sharing a room or unit. <i>Programs are facility-based, thus limiting the choices available to the client, though they are made aware of this ahead of time before accepting the housing accommodations. The program makes accommodations as much as possible, but they have a limited amount of beds in one facility.</i>	Always	Somewhat	Always
Leases 3	Leases are the same for participants as for other tenants	Leases do not have any provisions that would not be found in leases held by any other tenant in the property or building and is renewable per the participants' and owner's choice. People experiencing homelessness who receive help moving into permanent housing should have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws. For transitional housing, there may be limitations on length of stay, but a lease/occupancy agreement should look like a lease that a person would have in the normal rental market. <i>The Leases the clients sign resemble traditional leases with all the same tenant rights.</i>	Always	Always	Always
Leases 4	Participants receive education about their lease or occupancy agreement terms	Participants are also given access to legal assistance and encouraged to exercise their full legal rights and responsibilities. Landlords and providers abide by their legally-defined roles and responsibilities. <i>Clients are educated about their rights and responsibilities at intake, and they sign a form in acknowledgement.</i>	Always	Always	Always
Leases 5	Measures are used to prevent eviction	Property or building management, with services support, incorporates a culture of eviction avoidance, reinforced through practices and policies that prevent lease violations and evictions among participants, and evict participants only when they are a threat to self or others. Clear eviction appeal processes and due process is provided for all participants. Lease bifurcation is allowed so that a tenant or lawful occupant who is a victim of a criminal act of physical violence committed against them by another tenant or lawful occupant is not evicted, removed or penalized if the other is evicted.	Always	Always	Always
Leases 6	Providing stable housing is a priority	Providers engage in a continued effort to hold housing for participants, even if they leave their housing for short periods due to treatment, illness, or any other temporary stay outside of the unit. <i>Program will hold a unit for up to 90 days to allow for treatment, hospitalization, etc.</i>	Always	Always	Always
Leases 7	Rent payment policies respond to tenants' needs (as applicable)	While tenants are accountable to the rental agreement, adjustments may be needed on a case by case basis. As necessary, participants are given special payment arrangements for rent arrears and/or assistance with financial management, including representative payee arrangements. <i>Rent Payments are required to be re-reviewed and adjusted no less than once per year.</i>	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Services Definition / Evidence	Say it	Document it	Do it
Services 1	Projects promote participant choice in services	Participants are able to choose from an array of services. Services offered are housing focused and include the following areas of support: employment and income, childhood and education, community connection, and stabilization to maintain housing. These should be provided by linking to community-based services. <i>The paperwork clients sign offering services states the clients "may" participate in them, not "shall".</i>	Always	Always	Always
Services 2	Person Centered Planning is a guiding principle of the service planning process	Person-centered Planning is a guiding principle of the service planning process	Always	Always	Always
Services 3	Service support is as permanent as the housing	Service connections are permanently available and accessible for participants in Permanent Supportive Housing. Rapid Re-Housing projects should, at a minimum, be prepared to offer services for up to 6 months after the rental assistance ends. In emergency shelter and transitional housing, services are available as long as the participant resides in the unit or bed – and up to 6 months following exit from transitional housing. <i>Continued case management is offered for six (6) months after discharge.</i>	Always	Always	Always
Services 4	Services are continued despite change in housing status or placement	Wherever possible, participants continue to be offered services even if they lose their housing unit or bed (for congregate projects), or if they are placed in a short-term inpatient treatment. Ideally, the service relationship should continue, despite a service hiatus during some institutional stays. <i>Program will hold a unit for up to 90 days to allow for treatment, hospitalization, etc. Case management is available for six (6) months after discharge.</i>	Always	Always	Always
Services 5	Participant engagement is a core component of service delivery	Staff provide effective services by developing relationships with participants that provide immediate needs and safety, develop trust and common ground, making warm hand-offs to other mainstream service providers, and clearly explain staff roles. Engagement is regular and relationships are developed over time.	Always	Always	Always
Services 6	Services are culturally appropriate with translation services available, as needed	Project staff are sensitive to and support the cultural aspects of diverse households. Wherever possible, staff demographics reflect the participant population they serve in order to provide appropriate, culturally-specific services. Translation services are provided when needed to ensure full comprehension of the project. Projects that serve families with children should have family-friendly rules that allow for different schedules based on work and school hours and have services that allow parents to participate in activities without having to constantly supervise their children themselves (i.e. can use the bathroom or take a shower without their children being in the bathroom with them).	Always	Always	Always
Services 7	Staff are trained in clinical and non-clinical strategies (including harm reduction, motivational interviewing, trauma-informed approaches, strength-based)	Services support a participant's ability to obtain and retain housing regardless of changes in behavior. Services are informed by a harm-reduction philosophy, such as recognizing that substance use and addiction are a part of some participants' lives. Participants are engaged in non-judgmental communication regarding their behavior and are offered education regarding how to avoid risky behaviors and engage in safer practices. <i>Provides in-services to staff for clinical and non-clinical strategies for at least 3 times per year.</i>	Always	Always	Always
	Standard	Housing Definition / Evidence	Say It	Document It	Do It
Housing 1	Housing is not dependent on participation in services	Participation in permanent and temporary housing settings, as well as crisis settings such as emergency shelter, is not contingent on participating in supportive services or demonstration of progress made on a service plan. Services must be offered by staff, but are voluntary for participants.	Always	Always	Always
Housing 2	Substance use is not a reason for termination	Participants are only terminated from the project for violations in the lease or occupancy agreements, as applicable. Occupancy agreements or an addendum to the lease do not include conditions around substance use or participation in services. If the project is a recovery housing model focused on people who are in early recovery from drugs or alcohol (as outlined in HUD's Recovery Housing Brief), different standards related to use and subsequent offer of treatment may apply. See HUD's Recovery Housing brief here: https://www.hudexchange.info/resource/4852/recovery-housing-policy-brief/	Always	Always	Always
Housing 3	The rules and regulations of the project are centered on participants' rights	Project staff have realistic expectations and policies. Rules and regulations are designed to support safe and stable communities and should never interfere with a life in the community. Participants have access to the project at all hours (except for nightly in and out shelter) and accommodation is made for pets. <i>Pets are not available due to the owners of the apartments and out of respect for the other tenants.</i>	Always	Always	Always
Housing 4	Participants have the option to transfer to another project	Transfers should be accommodated for tenants who reasonably believe that they are threatened with imminent harm from further violence if the tenant remains in the same unit. Whenever possible, transfers occur before a participant experiences homelessness.	Always	Always	Always



Housing First Standards

For each standard, please use the drop down boxes in the three columns to the right to select "Not at all" or "Sometimes" or "Always". Marking "Always" signifies full compliance for the standard.

	Standard	Project -Specific Standards	Say It	Document it	Do it
Project 1	Quick access to RRH assistance	A permanent supportive housing project ensures quick linkage to a unit and wrap around services, based on participant needs, preferences, and resource availability.	Always	Always	Always
Project 2	PSH is focused on ending homelessness for those with the most severe barriers to maintaining housing	Participants and staff understand that a primary goal of permanent supportive housing is to end homelessness for people with the most severe service needs and help participants stay housed, regardless of other perceived barriers.	Always	Always	Always
Project 3	Property Management duties are separate and distinct from services/case management	In order to provide clear roles of staff for participants in terms of lease and rules enforcement as well as tenant advocacy, property management and service provider staff should be separate roles. However, they should work together on a regular basis through regular communications and meetings regarding Participants to address tenancy issues in order to preserve tenancy.	Always	Always	Always

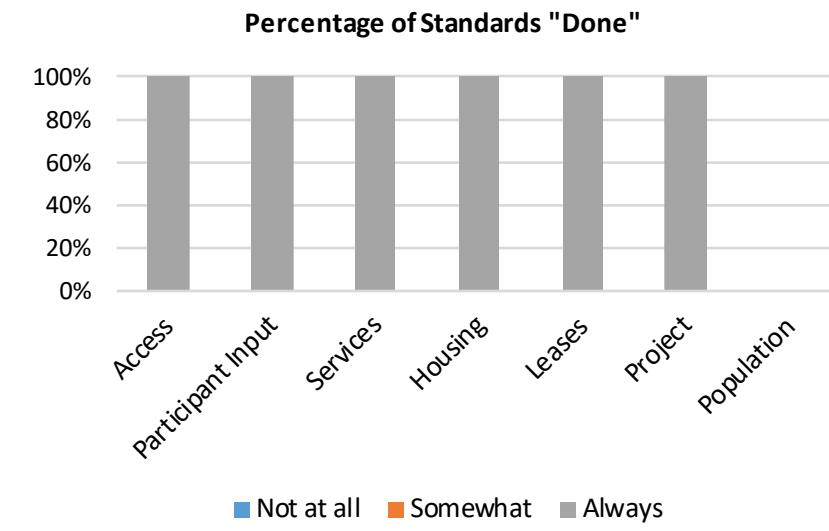
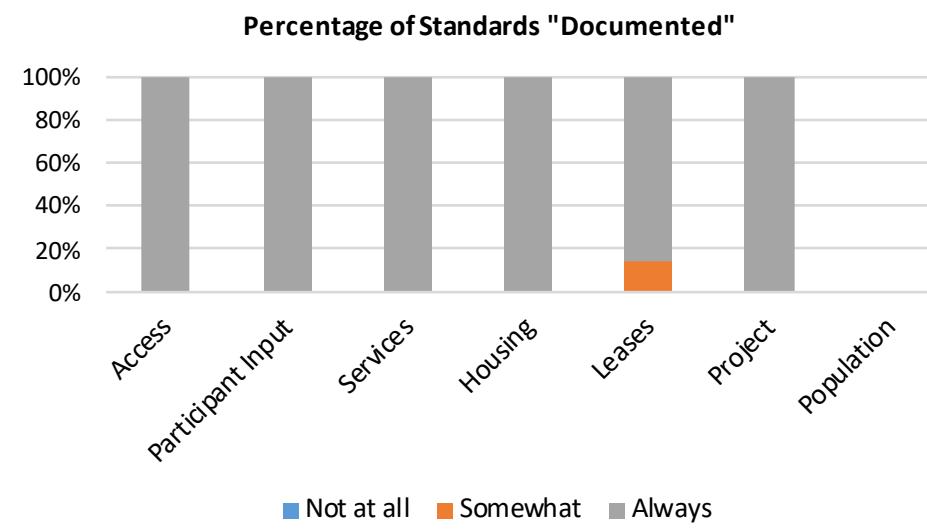
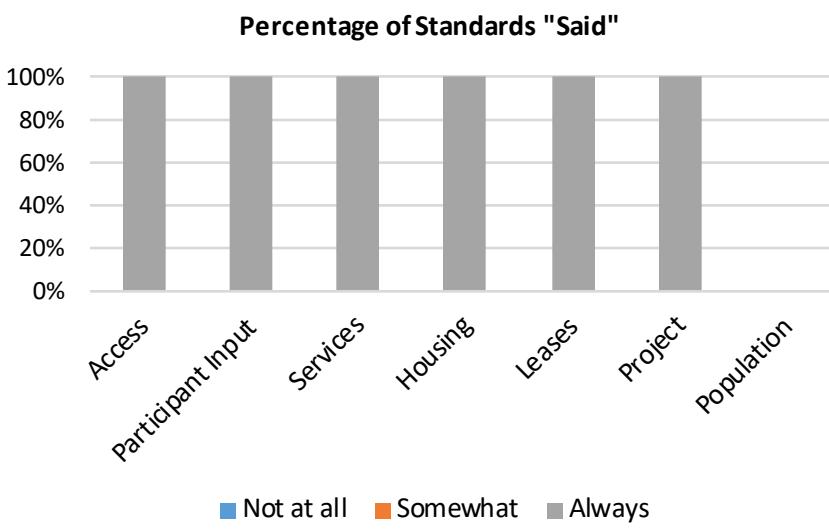
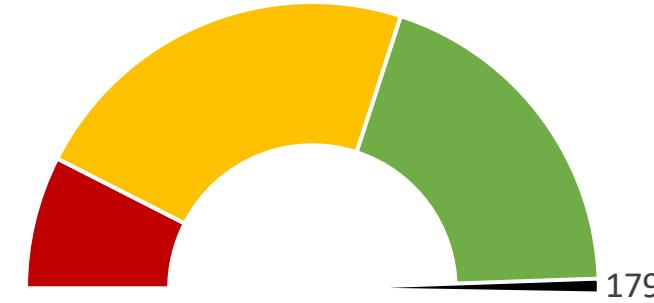


Housing First Standards: Assessment Summary

AIDS Service Coalition
12-Jul-24
227 Place (Green Meadows)

Your score: **179**
Max potential score: 180

Score is calculated by awarding 1 point for standards answered 'sometimes' and 2 points for standards answered 'always'. Categories that are not applicable for your project are not included in the maximum potential score.



LOCAL COMPETITION SCORING TOOL

Question 1E-2

BACKGROUND

The MSBoS Rank and Review Committee used a customized CoC Scoring Tool for the FY2024 rank and review process. The Tool has specific targets for each CoC Housing Program category and a total score of 120.

The scoring tool's numerical score, the agency's utilization rate, and the CoC's priorities and geographical needs create an objective performance and needs-based decision process, and all these components were factored into the final ranking. Two projects were ranked higher than their numerical score due to their high utilization rates and the Rank and Review Committee wanted to recognize the project's efforts in comprehensively utilizing their grants. Also, MSBoS CoC Rank and Review Committee policy ranks CoC system-wide projects, such as HMIS and CES in Tier 1 to support MSBOS operations annually. HMIS and CES Projects are not scored, but the Rank and Review Committee does review the utilization reports and APRs for these projects and will make a reallocation decision based on these two factors. There was one voluntary reallocation this year. The FY2024 Rank and Review Committee decided to rank all bonus projects at the bottom of Tier 2. The Rank and Review committee recognized that a few renewal projects were lower performing due to low-performance measures and unit utilizations, but did not consider these projects less needed.

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MSBOS 2024 NEW Project Scoring

2024 Prioritization Scoring Sheet for New Housing Projects

Threshold Requirements

If any of the HUD threshold requirements or local threshold requirements are not met, the Review Committee reserves the right to request additional information, amend back for revision, or choose not to consider the application in the ranking process.

- A. **Eligible:** Is this project eligible for funding? Is the applicant eligible to receive CoC funding (i.e. valid applicant type, SAM registered, has a Unique Entity Identifier number, no outstanding delinquent federal debt, has fully disclosed any violations of Federal criminal law, and no debarments/susensions)? Is the project type eligible for funding under this CoC NOFA and this CoC's local competition rules? Is the project consistent with the local Consolidated Plan? Will the project be ready to start by HUD's statutory deadlines? Does this project propose to serve an eligible population, with eligible costs? Does the project have adequate match?
 - a. Homebase will be available to help panelists complete this assessment.
- B. **HMIS Participation:** Does the applicant currently participate, or has it acknowledged and agreed to participate, in the HMIS of the CoC or comparable database if a DV provider?
- C. **Coordinated Entry Participation:** Does applicant actively participate in or will participate in at least 75% of the COC Coordinated Entry meetings and accept all referrals? Does the applicant have an adequate strategy detailing how they will use Coordinated Entry and either conduct vulnerability assessments or refer clients to access points to have a vulnerability assessment completed?
- D. **Program Capacity - Financial:** Does the applicant have an accounting system that meets federal standards? Did the applicant provide a current audit (must cover a fiscal period that ended not more than 18 months prior to January of the year in which the application is submitted) and current 990 (must cover the same fiscal period as the audit)?
- E. **Projects serving survivors of domestic violence** must demonstrate trauma-informed, victim-centered approaches.

Scoring Factors¹

Community Needs (33 points)

1. Unmet Need (6 points)

- Will the project address an unmet need by serving an underserved population, providing services that are less available, or serving an underserved geography of the CoC?
- For DV projects, can the project quantify need?

2. Does the Applicant Participate in the CoC or Otherwise Support Community Activities to End Homelessness? (5 points)

- Has the applicant attended at least 75% of CoC meetings from September 2023 to August 2024 (12 months prior to release of NOFA) or otherwise supported community activities to end homelessness?

3. Community Need (up to 10 points total)

- If the project submitted is a priority project type and/or has a priority project design, the project will be awarded up to 10 points.
 - **Priority Project Types 1:** Housing for chronically homeless people, permanent supportive housing (5 points)
 - **Priority Project Design 2:** To score a maximum of 5 points, the applicant has incorporated each of the following priorities in their program (1 point for each priority):
 1. If the applicant has incorporated feedback from individuals with lived experience to shape their program and delivery of services.
 2. If the applicant has taken steps to ensure all case managers have information about local resources and how to access them, including Mental Health and Substance Abuse Services.
 3. If the applicant has included Behavioral Health services as part of the budget or MOU.
 4. If the applicant has in place a case management ratio of 1:25 or less.
 5. If the applicant's staff attends at least 4 trainings promoted within the CoC a year.

¹

¹ All of the scoring factors in this tool measure projects' anticipated contribution to improving System Performance by strengthening the overall system of care through data collection, coordination, prioritization, and increasing resources available to end homelessness in our CoC. As enumerated in each factor, certain scoring factors relate to specific Performance Measures.

4. Can the Project Provide Letters of Commitment or Other Formal Written Documentation that Demonstrates Leveraging Housing and Healthcare Resources? (up to 12 points total)

- If the project can include letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or subsidized units that will be leveraged, the project will be awarded up to 6 points.
- If the project can include letters of commitment, contracts, or other formal written documents that demonstrate the utilization of healthcare resources that will be leveraged, the project will be awarded up to 6 points.

Improving System Performance (67 points)

5. Population Served (10 points) (related to SPM 1, 7) Source: CoC Application

- Is the population to be served well-defined? [CoC Application, Question 3B]
- Will the project prioritize serving project participants with the highest need? [CoC Application, NEW Application - Question: 3B(3) II RENEWAL Application Question: 3B(2)]
- Does the applicant or subrecipients (if any) have experience serving the targeted population (including if DV)? [CoC Application, Question 2B]
- Does the applicant or subrecipients (if any) understand the needs of the clients to be served? [CoC Application, Question 4A/3B]
- To what extent will the program be able to effectively serve eligible clients of different backgrounds, experiences, cultures, abilities, and language proficiencies? [CoC Application, Question 2B/3B]

6. Program Design (10 points) (related to SPM 2, 3, 7b)

- Will at least 25 percent of the units (PSH) or participants (RRH) be supported with non-CoC-funded housing? YES FOR ALL APPLICANTS
- Does the project leverage healthcare resources to support program participants, as evidenced by a written commitment from a healthcare organization that equals 25% of the funding requested?
- Does the project define the type of services that will be provided and how those services will meet the needs of the participant population? [CoC Application, Question 4A]
- Do the services described and staffing patterns seem adequate and appropriate? [CoC Application, Question 6J]
- Will staff be adequately trained to support the population?
- How will the applicant connect participants to services that other organizations in the community will provide? [CoC Application, Question 4A]
- Does the applicant or subrecipients (if any) have experience providing

housing similar to that proposed in the application? For DV projects, will the project meet safety outcomes? Please identify how you measure improved safety, why that measure is effective, and provide data on past performance using your suggested measure(s).

7. Outreach (5 points) (related to SPM 1, 4, 5, 7)

- Does the applicant adequately describe a strategy to outreach to special populations that may include LGBTQIA+, unaccompanied youth, or families?
- How will the program ensure clients receive reasonable accommodations whenever they are needed?
- Does the applicant strategy affirmatively further fair housing by providing outreach to special populations?
- Does the applicant provide clear strategies that affirmatively further fair housing as detailed in 24 CFR 578.93(c) (see below) and ensure that outreach is conducted to homeless individuals and families who are least likely to request housing or services in the absence of special outreach?

8. System Performance Improvement: Reduce Length of Time People are Homeless (up to 10 points) (SPM 1) (maximum points are possible

with acceptable outcome data provided for a similar program operated by the applicant within the last three years.) [Source: DATA from HMIS]

- If PSH:
 1. Does the applicant provide an adequate strategy to reduce barriers to housing placement?
 2. Does the applicant provide an adequate strategy to provide ongoing services?
 3. Does the applicant provide an adequate strategy to partner with property management?
 4. Does the applicant provide an adequate strategy to minimize barriers to housing retention?
- If RRH:
 1. Does the applicant provide an adequate strategy to identify, recruit, and retain landlords?
 2. Does the applicant provide an adequate strategy to reduce barriers to housing placement?
 3. Does the applicant provide an adequate strategy to administer rent and move-in assistance?

Applicant will provide data about past performance reducing the length of time people are homeless. Data will be compared to the renewal project scoring tool.

9. System Performance Improvement: Increase Exits to/Maintenance of Permanent Housing (10 points) (SPM 2, 7) (maximum points are available with acceptable outcome data provided for a similar program operated by the applicant within the last three years.)

- Does the applicant provide an adequate strategy to provide supportive services to clients to assist in locating housing and obtaining employment and/or benefits?
- Does the applicant strategy emphasize client choice?
- Applicants will provide data about past performance increasing exits to or maintenance of permanent housing. Data will be compared to renewal project scoring tool scales which are based on past CoC performance and national performance.
 1. If 90% or more of those leaving went to positive destinations (i.e., permanent housing and death) upon leaving, or there were no leavers add 10 points
 2. If between 80% and 89.9% of those leaving went to positive destinations upon leaving, add 8 points
 3. If between 70% and 79.9% of those leaving went to positive destinations upon leaving, add 6 points
 4. If between 60% and 69.9% of those leaving went to positive destinations upon leaving, add 4 points
 5. If between 50% and 59.9% of those leaving went to positive destinations upon leaving, add 2 points

10. System Performance Improvement: Limit Returns to Homelessness

(10 points) (SPM 2) (maximum points are available with acceptable outcome data provided for a similar program operated by the applicant within the last three years.)

- Does the applicant have an adequate strategy for follow-up after placement or program exit?
- Does the applicant provide an adequate strategy for avoiding involuntary project exits and the steps they take to ensure a client-centered no-fail approach?
- Applicant will provide data about past performance reducing returns to homelessness. Data will be compared to renewal project scoring tool scales which are based on past CoC performance and national performance.

11. Equity (5 points)

- Does the applicant engage unhoused and formerly unhoused participants and staff in service design and project implementation in any of the following ways?
 1. Strategies exist to recruit, retain, and develop staff who represent communities of color and/or speak languages other than English
 2. Racial equity and cultural responsiveness knowledge, skills, and practices are part of staff job descriptions and work plans.
 3. Internal structures exist to address issues of racial equity and cultural responsiveness (i.e., formal or informal complaint resolution process, community advisory body, equity committee)
 4. Staff receive training and support around racial equity, cultural responsiveness, and their role in addressing racial inequities.
 5. Ongoing evaluation of policy, service or program impacts, and progress toward racial equity and cultural responsiveness
 6. Public written commitment to address/eliminate racial and ethnic inequities and provide culturally responsive programming is included in guiding documentation (i.e., mission, vision, goals, etc.)
 7. Public reporting on populations being served, outcomes, and performance metrics disaggregated by race and ethnicity
 8. Written materials are provided in multiple languages for participants with limited English proficiency.
 9. Translation and interpretive services are provided in multiple languages for participants with limited English proficiency.
 10. Other: _____
- 11. If the applicant chose an “other” strategy, have they included any significant successes they have had with these strategies over the past year? The applicant should use specific examples where possible, including any substantive changes to programming that were made.
 - Agencies use at least 5 of the strategies for a maximum of 5 points.
 - Agencies use at least 4 of the strategies for a maximum of 4 points.
 - Agencies use at least 3 of the strategies for a maximum of 3 points.
 - Agencies use at least 2 of the strategies for a maximum of 2 points.
 - Agencies use at least 1 of the strategies for a maximum of

1 point.

12. Client Participation in Project Design (7 points)

- Does the applicant engage unhoused and formerly unhoused participants and staff in service design and project implementation in any of the following ways? (4 points)
 - Each CoC-funded project has at least one Board member with experience being unhoused;
 - The applicant administers satisfaction or feedback surveys to participants in all CoC-funded projects;
 - The applicant uses client focus groups which include participants in CoC-funded projects;
 - Each CoC-funded project has at least one staff member with experience being unhoused;
 - The applicant has a participant advisory board,
 - Resources are dedicated to support community advocacy by participants (e.g., stipends for participant advocacy work, public speaking skills development, etc.);
 - The applicant's hiring policies and approaches (e.g., job descriptions and/or qualifications, peer support positions, on-the-job-training, outreach/recruitment strategies, etc.) are designed to prioritize hiring and retention of people with lived experience or identities that reflect the population served (e.g., race, ethnicity, experience of homelessness, disability, experience with the criminal legal system, experience in foster care, etc.);
 - Other: _____
 - Agencies use at least 4 of the strategies for a maximum of 4 points.
 - Agencies use at least 3 of the strategies for a maximum of 3 points
 - Agencies use at least 2 of the strategies for a maximum of 2 points.
 - Agencies use at least 1 of the strategies for a maximum of 1 point.
- Has the applicant provided at least one piece of feedback or input received from participants, and how your applicant plans to respond/has responded to the feedback? (3 points) **OR**
- **For DV Projects only:** Has the applicant described how they will involve survivors with lived expertise in the policy and program development? (3 points)

Applicant Capacity and Compliance (20 points)

13. Program Capacity (5 points)

- Does the applicant have the expertise, staff, procedural, and administrative structure needed to meet all administrative requirements?
- Does the applicant have experience operating similar programs and receiving similar grants, specifically federal grants?
- Does the applicant have a staffing plan that covers both grant management and the performance of grant activities?

14. Low Barrier and Housing First for All Housing Programs (related to SPM 1, 3, 7) (10 Points) (This section is worth up to 10 points based on application and APR information:)

- The project will enroll individuals or households referred through Coordinated Entry regardless of the following circumstances. The scoring panel should take into account any legal requirements explained by the applicant (5 points):

- Behavioral Health
 - Person is actively using substances (including alcohol or illegal drugs)
 - Person has chronic substance use issues
 - Person has a mental health condition
 - Person has a mental health condition that is currently untreated
- Experience with Criminal Legal System
 - Person has a felony conviction
 - Person has an arson conviction
 - Person is on the Mississippi Sex Offender Registry
 - Person has a conviction for intimate partner violence or sexual assault
 - Person has another type of criminal conviction
- Income
 - Person has no current source of income
 - Person has very low or insufficient income
 - Person has poor credit
- History of Intimate Partner Violence
 - Person has been the victim of intimate partner violence, and either has not separated from their abuser or does not plan to obtain a protection order
- Service Participation
 - Person refuses to agree to participate in supportive services

- The project will work with participants to avoid involuntary project exit through

client-centered case management, robust support and resources, and a no-fail approach (5 points).

15. Applicant Compliance (5 points)

- Does the applicant have any outstanding financial audit findings or concerns?
- Does the applicant have any outstanding HUD monitoring findings or concerns and/or any history of sanctions imposed by HUD, including – but not limited to – suspending disbursements (e.g., freezing LOCCS), requiring repayment of grant funds, or de-obligating grant funds due to performance issues? If yes, what steps is the applicant taking to resolve the findings or concerns?

TOTAL POSSIBLE POINTS: 120 Points

MSBOS 2024 Scoring Sheet for Renewal Projects

2024 Prioritization Scoring Sheet for Renewal Projects

Threshold Requirements

Project must meet all of HUD's threshold requirements for renewal projects (including eligibility requirements). If threshold requirements are not met, the Review Committee reserves the right to request additional information, amend back for revision, or choose not to consider the application in the ranking process.

Local Threshold Requirement:

- **HUD POLICIES:** Projects are required to have policies regarding termination of assistance, client grievances, ADA and fair housing requirements, VAWA protection, and confidentiality that are in compliance with HUD CoC Program requirements. Projects must comply with the Equal Access Rule and ensure privacy, respect, safety, and access regardless of gender identity or sexual orientation in projects.

Scoring Factors

Capacity and Compliance (42 points)

1. **APPLICANT CAPACITY (from the narrative):** Does the applicant currently have any findings from a HUD monitoring review that have been open for a period greater than six months, for which the applicant has missed a HUD-stated deadline, or has the applicant experienced HUD sanctions in the past year? **(This section is worth up to 5 points)**
 - If the applicant does not have open findings or sanctions, add 5 points.
 - If the applicant has an open finding but has submitted a plan for corrective action to HUD, add 3 points.
 - If the applicant has an open finding for a period greater than six months and has not submitted a plan for corrective action to HUD and/ or experienced HUD sanctions in the past year, add 0 points.
2. **HMIS COMPLIANCE (from the HMIS Lead and narrative)(related to all SPM)** **(This section is worth up to 6 points)**
 - If the applicant is currently in compliance with HMIS standards, as determined by the HMIS lead, add 3 points.
 - VSP projects: If the applicant is in compliance with HUD requirements for a comparable database, add 3 points.

- If HIC data were accurate and submitted on time, add 3 points.

3. Coordinated Entry (CE) COMPLIANCE (as determined by CE Lead) (This section is worth up to 6 points)

If the applicant is currently participating in the implementation of CE in the following ways:

- Accepts all referrals from CE, add 3 points.
- Currently completes vulnerability assessments AND enters them into the HMIS system OR brings them to the monthly CE meeting, add 3 points.
 - a. Or if not an access point, currently refers clients to an access point in order to have a vulnerability assessment completed, add 3 points.

For VSPs:

- The applicant demonstrates participation in CE by providing a report of the number of referrals without client identifying data, add 3 points.
- Attends at least 75% of the monthly CE meetings, add 3 points.

4. CoC PARTICIPATION & SUPPORT: Does the Applicant Participate in the CoC?-(from the narrative and CoC records)

(This section is worth 5 points)

- If the applicant attended at least 75% of CoC meetings (12 months prior to release of NOFA), add 5 points.

5. LOW BARRIER AND HOUSING FIRST FOR ALL HOUSING PROGRAMS

(related to SPM 1, 3, 7): (This section is worth up to 10 points based on application and APR information)

The project enrolls individuals or households referred through Coordinated Entry regardless of the following circumstances. The scoring panel should take into account any legal requirements explained by the applicant (5 points):

- Behavioral Health
 - Person is actively using substances (including alcohol or illegal drugs).
 - Person has chronic substance use issues.
 - Person has a mental health condition.
 - Person has a mental health condition that is currently untreated.
- Experience with Criminal Legal System

- Person has a felony conviction.
- Person has an arson conviction.
- Person is on the Mississippi Sex Offender Registry.
- Person has a conviction for intimate partner violence or sexual assault.
- Person has another type of criminal conviction.
- Income
 - Person has no current source of income.
 - Person has very low or insufficient income.
 - Person has poor credit.
- History of Intimate Partner Violence
 - Person has been the victim of intimate partner violence and either has not separated from their abuser or does not plan to obtain a protection order.
- Service Participation
 - Person refuses to agree to participate in supportive services.

The project works with participants to avoid involuntary project exit through client-centered case management, robust support and resources, and a no-fail approach (5 points).

6. UNEXPENDED FUNDS: Amount left from Previous Grant-**This section is worth up to 10 points (from the spending report sent from HUD to the CoC)**

- If the applicant expended all HUD grant funds and made at least quarterly drawdowns, add 10 points.
- The project will lose two points for every percent of the grant remaining.
- If 5% or more, 0 points will be awarded.
- If quarterly drawdowns are not made, reduce final score by 2 points, without incurring a negative score.
- Please note- if the program had greater than 10% of funds remaining at the end of the program year and has established a 3-year trend of not expending funds, the review committee reserves the right to reallocate a portion of the funds.

Performance and Outcomes (78 points)

7. SYSTEM PERFORMANCE OUTCOME (related to SPM 2, 7)- Housing- (This section is worth up to 20 points, from the APR report)

Permanent Supportive Housing/Safe Haven/Rapid Rehousing: Housing

Destination Upon Exit (*The percentage of all leavers who either passed away or exited the program to a permanent housing destination*)

- If 90% or more of those leaving went to positive destinations (i.e., permanent housing and death) upon leaving, or there were no leavers, add 10 points.
- If between 80% and 89.9% of those leaving went to positive destinations upon leaving, add 8 points.
- If between 70% and 79.9% of those leaving went to positive destinations upon leaving, add 6 points.
- If between 60% and 69.9% of those leaving went to positive destinations upon leaving, add 4 points.
- If between 50% and 59.9% of those leaving went to positive destinations upon leaving, add 2 points.

Permanent Supportive Housing Retention (from the APR report)

- If the average length of stay is more than 365 days, add 10 points.
- If the average length of stay is more than 210 days, add 7 points.
- If the average length of stay is more than 180 days, add 4 points.

Rapid Rehousing Exit (from the APR report)

- If 95% or more of persons who exited the program exited to permanent housing (subsidized or unsubsidized), add 10 points.
- If between 90 and 94.9% or more of persons who exited the program exited to permanent housing (subsidized or unsubsidized), add 8 points.
- If between 85% and 89.9% or more of persons who exited the program exited to permanent housing (subsidized or unsubsidized) add 6 points.
- If between 80% and 84.9% or more of persons who exited the program exited to permanent housing (subsidized or unsubsidized), add 4 points.
- If between 75% and 79.9% or more of persons who exited the program exited to permanent housing (subsidized or unsubsidized) add 2 points.

Safe Haven: Positive Housing Outcome (from the APR report)

- If more than 90% of those served remained in the housing program housing or exited to a more stable housing destination, add 10 points.
- If between 85% and 89.9% of those served remained in the housing program housing or exited to a more stable housing destination, add 8 points.
- If between 80% and 84.9% of those served remained in the housing program housing or exited to a more stable housing destination, add 6 points.
- If between 75% and 79.9% of those served remained in the housing program housing or exited to a more stable housing destination, add 4 points.
- If between 70% and 75.9% of those served remained in the housing program housing or exited to a more stable housing destination, add 2 points.

8. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Earned Income for Stayers (*The percentage of adults who remained in the program who increased their employment income from entry to their most recent annual assessment*) **-This section is worth up to 4 points (from the APR report)**

- If the applicant had 15% or greater of adult stayers that increased earned income (excluding participants who have been in the program less than a year), add 4 points.
- If at least 7% but less than 15% of adults increased earned income (excluding participants who have been in the program less than a year), add 2 points.

9. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Earned Income for Leavers (*The percentage of adults who exited the program who increased their employment income from entry to exit*) **-This section is worth up to 4 points (from the APR report)**

- If the applicant had 27% or greater of adults that increased earned income, add 4 points.
- If at least 19% but less than 27% of adults increased earned income, add 2 points.

10. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Non-Employment Cash Income for Stayers (*The percentage of adults who remained in the program who increased their non-employment income from entry to their most recent annual assessment*) -**This section is worth up to 3 points (from the APR report)**

- If the applicant had 40% or greater of adult stayers that increased non-employment cash income (excluding participants who have been in the program less than a year), add 3 points.
- If at least 35% but less than 40% of adults that increased non-employment cash income (excluding participants who have been in the program less than a year), add 1.5 points.

11. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Non-Employment Cash Income for Leavers (*The percentage of adults who exited the program who increased their non-employment income from entry to exit*) -**This section is worth up to 3 points (from the APR report)**

- If the applicant had 30% or greater of adults that increased non-employment cash income, add 3 points.
- If at least 22% but less than 30% of adults increased non-employment cash income, add 1.5 points.

12. SYSTEM PERFORMANCE OUTCOME (related to SPM 2, 7b)- Mainstream Benefits (not including health insurance) (*The percentage of adults with at least one non-cash benefit at exit or follow-up assessment (excluding stayers not yet required to have an assessment)*- **This section worth up to 8 points (from the narrative and APR information)**)

- If at least 60% of the participants receive non-cash mainstream benefits, add 8 points.
- If between 40% and 59.9% of participants receive non-cash mainstream benefits, add 4 points.

13. SEVERITY OF NEEDS-**This section is worth up to 10 points (from the narrative and Coordinated Entry data)**

- If at program entry, more than 50% of adults have no earned or unearned income, add 5 points.
- If the program serves other populations with severe needs or vulnerabilities add 5 points. Such populations may include:
 - Current or past substance use,
 - Criminal record (esp for certain infractions),

- Survivor of domestic violence,
- LGBTQIA+ status,
- Significant health or behavioral health challenges that impede housing maintenance,
- High utilization of crisis/emergency services,
- Unsheltered youth/children,
- Vulnerability to illness/death,
- Vulnerability to victimization (e.g., trafficking, sex work).

14. **Chronic Prioritization and Dedication**-This section is worth up to 8 points (from the program description)

- If 90-100% of turnover beds are prioritized for use by the chronically homeless, add 5 points.
- If 75-90% of turnover beds are prioritized for use by the chronically homeless, add 3 points.

15. **Utilization Rate (related to SPM 1, 3)**-This section is worth up to 8 points (from the APR report)

- If the average daily bed utilization rate is more than 90%, add 4 points.
- If the average daily bed utilization rate is between 80% and 90%, add 2 points.
- If the average unit utilization rate is more than 90%, add 4 points.
- If the average unit utilization rate is between 80% and 90%, add 2 points.

16. **Equity** (5 points)

- Does the applicant engage unhoused and formerly unhoused participants and staff in service design and project implementation in any of the following ways?:
 - Strategies exist to recruit, retain, and develop staff who represent communities of color and/or speak languages other than English.
 - Racial equity and cultural responsiveness knowledge, skills, and practices are part of staff job descriptions and work plans.
 - Internal structures exist to address issues of racial equity and cultural responsiveness (i.e., formal or informal complaint resolution process, community advisory body, equity committee).
 - Staff receive training and support around racial equity and cultural responsiveness and their role in addressing racial inequities.
 - Ongoing evaluation of policy, service of program impacts, and progress toward racial equity and cultural responsiveness.
 - Public written commitment to address/eliminate racial and ethnic inequities and provide culturally responsive programming is included in

guiding documentation (i.e., mission, vision, goals, etc.).

- Public reporting on populations being served, outcomes, and performance metrics disaggregated by race and ethnicity.
- Written materials are provided in multiple languages for participants with limited English proficiency.
- Translation and interpretive services are provided in multiple languages for participants with limited English proficiency.
- Other:
 - Applicants **demonstrate** that they use at least 7 of the strategies above for a maximum of 5 points.
 - Applicants **demonstrate** that they use at least 5 of the strategies above for a maximum of 4 points.
 - Applicants **demonstrate** that they use at least 3 of the strategies above for a maximum of 3 points.
 - Applicants **demonstrate** that they use at least 2 of the strategies above for a maximum of 2 points.
 - Applicants **demonstrate** that they use at least 1 of the strategies above for a maximum of 1 point.
- To demonstrate that the applicant has used the strategy, the applicant should include any significant successes or challenges they have had with each of the strategies over the past year. The applicant should use specific examples where possible, including any substantive changes to programming that were made.
- If the applicant used “other,” the applicant should describe the specific strategy in detail as well as significant successes or challenges over the last year. The applicant should be specific and include examples.

17. Client Participation in Project Design (5 points)

- Does the applicant engage unhoused and formerly unhoused participants and staff in service design and project implementation in any of the following ways?:
 - Each CoC-funded project has at least one Board member with experience being unhoused;
 - The applicant administers satisfaction or feedback surveys to participants in all CoC-funded projects;
 - The applicant uses client focus groups which include participants in CoC-funded projects;
 - Each CoC-funded project has at least one staff member with experience being unhoused;

- The applicant has a participant advisory board;
- Resources are dedicated to support community advocacy by participants (e.g., stipends for participant advocacy work, public speaking skills development, etc.);
- The applicant's hiring policies and approaches (e.g., job descriptions and/or qualifications, peer support positions, on-the-job-training, outreach/recruitment strategies, etc.) are designed to prioritize hiring and retention of people with lived experience or identities that reflect the population served (e.g. race, ethnicity, experience of houselessness, disability, experience with the criminal legal system, experience in foster care, etc.);
- Other:
 - Applicants **demonstrate** that they use at least 3 of the strategies for a maximum of 3 points.
 - Applicants **demonstrate** that they use at least 2 of the strategies for a maximum of 2 points.
 - Applicants **demonstrate** that they use at least 1 of the strategies for a maximum of 1 point.
- Has the applicant provided at least one piece of feedback or input received from participants, and how your agency plans to respond/responded to the feedback? (2 points)

TOTAL POSSIBLE POINTS: 120



FY2024 LOCAL COMPETITION SELECTION RESULTS FOR ALL PROJECTS

2025-26 Program Year

PROJECT NAME	SCORE (of 120)	ACCEPTED OR REJECTED	RANK (IF ACCEPTED)	RANKED FUNDING AMOUNT	REALLOCATED FUNDS
CCSM Caprice DV TH-RRH (fka CCSM Monarch)	112	Accepted	1	\$160,060	\$0
MUTEH CoC RRH	90	Accepted	2	\$613,295	\$0
BCCAA CoC RRH	102	Accepted	3	\$660,369	\$0
MUTEH A New Hope DV TH-RRH	111	Accepted	4	\$308,808	\$0
MUTEH HMIS	N/A	Accepted	5	\$262,080	\$0
MUTEH BoS CoC CES	N/A	Accepted	6	\$291,460	\$0
MUTEH Data Bridge to CES	N/A	Accepted	7	\$226,000	\$0
CCSM CoC RRH	91	Accepted	8	\$136,600	\$0
BCCAA CoC PSH	86	Accepted	9	\$200,032	\$0
MUTEH Central PSH	85	Accepted	10	\$113,332	\$0
USM Institute for Disability Studies Project Recovery CoC RRH	79	Accepted	11	\$314,201	\$0
ASC 227 Place PSH (fka Green Meadows)	80	Accepted	12	\$314,076	\$0
USM Institute for Disability Studies Project Recovery - Expansion	94	Accepted	13	\$56,940	\$0
ASC 227 Place PSH - Expansion	112	Accepted	14	\$57,152	\$0
CoC Planning	N/A	Accepted	15	\$427,283	\$0
ASC 121 Haven House PSH	N/A	Rejected	-	-	\$57,152

Homebase R&EC Tier Tool 2024

Instructions: Fill in the yellow cells with information for your CoC from HUD ARD Report (<https://www.hud.gov/sites/dfiles/CPD/documents/CoC-FY-2024-CoC-Estimated-ARD-Report.pdf>) and your Grant Inventory Worksheets. Copy and paste your ranked list into columns E - G. Column H shows you the amount of each grant that falls into Tier 2. For all projects in Tier 1, Column H will be \$0.00. For a straddle project, Column H will be some amount less than the full request amount. For all other projects in Tier 2, Column H will be the full request amount.

For all projects with some Amount in Tier 2, copy columns E, F, and G into Columns J, K, and L. For the straddle project, be sure to adjust the Request Amount in Column L to match the Amount in Tier 2 for that project.

This tool will **not** confirm that your DV ARD and YHDP ARD are balanced, please do that external to the tool.

ARD (from HUD ARD Report):	\$3,657,465.00
CoC Bonus from HUD ARD Report):	\$1,025,479.00
Total Non-DV Funding Available:	\$4,682,944.00
DV Bonus (from HUD ARD Report) :	\$1,281,849.00
Total with DV Bonus:	\$5,964,793.00

YHDP ARD (from GIW)	
DV ARD (from GIW)	

Tier 1 Amount (from HUD ARD Report)	\$3,291,719.00
Tier 2 Amount:	\$2,673,074.00
Amount Reallocated:	\$57,152.00
Total Reallocated + Non-DV Bonus:	\$1,082,631.00

Straddling Project	
Original Amount Requested:	\$0.00
Tier 1 Amount:	\$0.00
Tier 2 Amount:	\$0.00

Tier 1				AMOUNT IN TIER 2
Rank	Project	Type	Request Amount	
1	CCSM Caprice	DV TH-RRH	\$ 160,060.00	\$0.00
2	MUTEH CoC RRH	PH-RRH	\$ 613,295.00	\$0.00
3	BCCAA CoC RRH	PH-RRH	\$ 660,369.00	\$0.00
4	MUTEH A New Hope	DV TH-RRH	\$ 308,808.00	\$0.00
5	HMIS I	HMIS	\$ 262,080.00	\$0.00
6	BoS CES	SO-CES	\$ 291,460.00	\$0.00
7	CES Data Bridge	SO-CES	\$ 226,000.00	\$0.00
8	CCSM CoC RRH	PH-RRH	\$ 136,600.00	\$0.00
9	BCCAA CoC PSH	PH-PSH	\$ 200,032.00	\$0.00
10	MUTEH Central PSH	PH-PSH	\$ 113,332.00	\$0.00
11	USM-IDS Project Recovery CoC RRH	PH-RRH	\$ 314,201.00	\$0.00
12	ASC 227 Place PSH	PH-PSH	\$ 5,482.00	\$0.00
13	*ASC121 Haven House PSH	Reallocated	\$ (57,152.00)	\$0.00
14				\$0.00
15				\$0.00
16				\$0.00
17				\$0.00
18				\$0.00
19				\$0.00
20				\$0.00

Tier 2			
Rank	Project	Type	Request Amount
12	ASC 227 Place PSH	PH-PSH	\$ 308,594.00
13	IDS Project Recovery CoC RRH Expansion	PH-RRH	\$ 56,940.00
14	ASC 227 Place PSH Expansion	PH-PSH	\$ 57,152.00
15			
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MS-501 MISSISSIPPI BALANCE OF STATE COC

SCORED FORMS FOR ONE PROJECT

Question 1E-2a

BACKGROUND

The scored form for one project is from Bolivar County Community Action Agency. They had a total score of 102 out of 120, and were ranked in Tier 1.

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Scored Form for BCCAA CoC Renewal Project	2-3



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CoC SCORING TOOL - FY 2024 RENEWAL PROJECTS

Project Name: BCCAA CoC RRH
 Organization Name: Ir County Community Action Agency (BC
 Project Type: PH-RRH

SECTION I: CAPACITY AND COMPLIANCE

SCORING FACTORS	PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
1. Applicant Capacity Does the applicant currently have any findings from a HUD monitoring review that have been open for a period greater than six months, for which the applicant has missed a HUD-stated deadline, or has the applicant experienced HUD sanctions in the past year?	<input type="checkbox"/> No open findings	<input type="checkbox"/> 5	<input type="checkbox"/> out of <input type="checkbox"/> 5
2. HMIS Compliance The applicant is currently in compliance with HMIS standards, as determined by the HMIS lead, OR if the VSP is in compliance with HUD requirements for a comparable database, add 3 points.	<input type="checkbox"/> YES	<input type="checkbox"/> 3	<input type="checkbox"/> out of <input type="checkbox"/> 3
Is the applicants HIC data accurate and submitted on time, add 3 points.	<input type="checkbox"/> YES	<input type="checkbox"/> 3	<input type="checkbox"/> out of <input type="checkbox"/> 3
3. Coordinated Entry (CE) Compliance (For VSPs, skip to the bottom 2 questions.) Accepts all referrals from CE, add 3 points.	<input type="checkbox"/> YES	<input type="checkbox"/> 3	<input type="checkbox"/> out of <input type="checkbox"/> 3
Currently completes vulnerability assessments AND enters them into HMIS system OR brings them to the monthly meeting, OR Or if not an access point, currently refers clients to an access point in order to have a vulnerability assessment completed add 3 points.	<input type="checkbox"/> YES	<input type="checkbox"/> 3	<input type="checkbox"/> out of <input type="checkbox"/> 3
For VSPs: The applicant demonstrates participation in CE by providing a report of the number of referrals without client identifying data, add 3 points.	<input type="checkbox"/> -	<input type="checkbox"/> 0	<input type="checkbox"/> out of <input type="checkbox"/> 3
Attends at least 75% of the monthly CE meetings, add 3 points.	<input type="checkbox"/> -	<input type="checkbox"/> 0	<input type="checkbox"/> out of <input type="checkbox"/> 3
4. CoC Participation & Support If the applicant attended at least 75% of CoC meetings (12 months prior to release of NOFA), add 5 points	<input type="checkbox"/> YES	<input type="checkbox"/> 5	<input type="checkbox"/> out of <input type="checkbox"/> 5
5. Low Barriers and Housing First for All Housing Programs The project enrolls individuals or households referred through Coordinated Entry regardless of Behavioral Health, Experience with the Criminal Legal System, Income, History of Intimate Partner Violence, or Service Participation.	<input type="checkbox"/> YES	<input type="checkbox"/> 5	<input type="checkbox"/> out of <input type="checkbox"/> 5
The project works with participants to avoid involuntary project exit through client-centered case management, robust support and resources, and a no-fail approach.	<input type="checkbox"/> YES	<input type="checkbox"/> 5	<input type="checkbox"/> out of <input type="checkbox"/> 5
6. Unexpended Funds The applicant expended all HUD grant funds and made at least quarterly drawdowns, add 10 points. If quarterly drawdowns are not made, reduce score by 2 points.	<input type="checkbox"/> YES	<input type="checkbox"/> 10	<input type="checkbox"/> out of <input type="checkbox"/> 10
Percentage of grant remaining [Enter Value -->]	<input type="checkbox"/> 0 %	<input type="checkbox"/> 0	
Capacity & Compliance - Subtotal		42	out of <input type="checkbox"/> 42

SECTION II: PERFORMANCE & OUTCOMES

SCORING FACTORS	PERFORMANCE	POINTS AWARDED	MAX POINT VALUE
7. System Performance Outcome Permanent Supportive Housing/Safe Haven/Rapid Rehousing: Housing Destination Upon Exit (The percentage of all leavers who either passed away or exited the program to a permanent housing destination)	<input type="checkbox"/> 97 %	<input type="checkbox"/> 10	<input type="checkbox"/> out of <input type="checkbox"/> 10
If PSH: Permanent Supportive Housing Retention (from the APR report)	<input type="checkbox"/> 0 days	<input type="checkbox"/> 0	<input type="checkbox"/> out of <input type="checkbox"/> 10
OR			
If RRH: Rapid Rehousing Exit (from the APR report)	<input type="checkbox"/> 99 %	<input type="checkbox"/> 10	<input type="checkbox"/> out of <input type="checkbox"/> 10
OR			
If Safe Haven: Positive Housing Outcome (from the APR report)	<input type="checkbox"/> 0 %	<input type="checkbox"/> 0	<input type="checkbox"/> out of <input type="checkbox"/> 10

8. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Earned Income for Stayers (The percentage of adults who remained in the program who increased their employment income from entry to their most recent annual assessment) -This section is worth up to 4 points (from the APR report)	38 %	4	out of	4
9. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Earned Income for Leavers (The percentage of adults who exited the program who increased their employment income from entry to exit) -This section is worth up to 4 points (from the APR report)	25 %	2	out of	4
10. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Non-Employment Cash Income for Stayers (The percentage of adults who remained in the program who increased their non-employment income from entry to their most recent annual assessment) -This section is worth up to 3 points (from the APR report)	7 %	0	out of	3
11. SYSTEM PERFORMANCE OUTCOME (related to SPM 4)- Non-Employment Cash Income for Leavers (The percentage of adults who exited the program who increased their non-employment income from entry to exit) -This section is worth up to 3 points (from the APR report)	9 %	0	out of	3
12. SYSTEM PERFORMANCE OUTCOME (related to SPM 2, 7b)- Mainstream Benefits (not including health insurance) (The percentage of adults with at least one non-cash benefit at exit or follow-up assessment (excluding stayers not yet required to have an assessment)- This section worth up to 8 points (from the narrative and APR information)	70 %	8		8
13. SEVERITY OF NEEDS-This section is worth up to 10 points (from the narrative and Coordinated Entry data)				
If at program entry, more than 50% of adults have no earned or unearned income, add 5 points.	52 %	5	out of	5
If the program serves other populations with severe needs or vulnerabilities add 5 points.	YES %	5	out of	5
14. Chronic Prioritization and Dedication	1 %	0	out of	8
15. Utilization Rate (related to SPM 1, 3)				
Average Daily Bed Utilization Rate	97 %	4	out of	4
Average Unit Utilization Rate	87 %	2	out of	4
16. Equity - Does the applicant engage unhoused and formerly unhoused participants and staff in service design and project implementation	7	strategies (at least) 5	out of	5
17. Client Participation in Project Design				
Number of strategies applicant uses engage unhoused and formerly unhoused participants and staff in service design and project implementation	3	strategies (at least) 3	out of	3
Has the applicant provided at least one piece of feedback or input received from participants, and how your agency plans to respond/responded to the feedback?	YES	2	out of	2
Performance & Outcomes - Subtotal		60	out of	78
TOTAL SCORE		102	out of	120
Percentage Score				85.00%

NOTIFICATION OF PROJECTS REJECTED-REDUCED

Question 1E-5

BACKGROUND

The currently CoC-funded project, 121 Haven House PSH, was voluntarily reallocated by the recipient AIDS Services Coalition (ASC). Therefore, the project was rejected and not ranked by the CoC's Rank & Review Committee. The project funding total of \$57,152 will be reallocated by the Committee. ASC plans to use the reallocated project dollars to expand another of their CoC-funded projects, 227 Place PSH (fka Green Meadows).

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AIDS Services Coalition Letter Notification of Voluntary Reallocation	3

Voluntary Reallocation Notice

Marika Baliko <cocdirector@msbos.org>
To: Kathy Garner <asc@ascms.org>

Wed, Oct 9, 2024 at 5:04 PM

Ms. Garner,

I am writing to formally notify you that your agency has voluntarily reallocated funds from the 121 Haven House project in the amount of \$57,152. As a result of this reallocation, the project was not scored in the ranking process.

We appreciate ASC's commitment to responsible fund management and understand that such decisions are made in the best interest of your overall objectives. Please confirm receipt of this notification and let us know if you require any further clarification regarding this matter.

We look forward to our continued collaboration.

Thank you,



Marika Baliko | Interim CoC Director

| **e.** cocdirector@msbos.org

| **p.** (601) 960-0557

| **f.** (601) 487-0984

P.O. Box 24147 | Jackson, MS 39225

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2 attachments

 **FY24 Reallocation Notice - ASC .pdf**
209K

 **2024 CoC Application Rankings.pdf**
202K



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ADDRESS

201 W. Capitol Street, Suite 800
Jackson, MS 39201

MAILING ADDRESS

P.O. Box 24147
Jackson, MS 39225

PHONE

Office: (601) 960-0557
Fax: (601) 487-0984

October 9, 2024

AIDS Services Coalition
Kathy Garner
121 College St,
Hattiesburg, MS 39401

Subject: Notification of Fund Reallocation and Project Ranking Status

Dear Ms. Garner,

I am writing to formally notify you that your agency has voluntarily reallocated funds from the 121 Haven House project in the amount of \$57,152. As a result of this reallocation, the project was not scored in the ranking process.

We appreciate your agency's commitment to responsible fund management and understand that such decisions are made in the best interest of your overall objectives. Please confirm receipt of this notification and let us know if you require any further clarification regarding this matter.

We look forward to our continued collaboration.

Sincerely,

Marika Baliko
Interim CoC Director

NOTIFICATION OF PROJECTS ACCEPTED

Question 1E-5a

BACKGROUND

The MSBoS CoC has 14 accepted and ranked project applications. Each agency was individually notified by email. Attached to each email was the Ranking List and an MSBoS Notification Letter.

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Ranking List attached to each notification email	31-34

MSBoS FY2024-FY2025 - Rank and Review Notification - CCSM TH-RRH DV Renewal

2 messages

Marika Baliko <cocdirector@msbos.org>

Wed, Oct 9, 2024 at 9:00 AM

To: kwald@ccsms.org

Cc: Amy Styron <astyron@ccsms.org>

Dear Mr. Wald,

I am excited to inform you that the renewal application for CCSM – Monarch TH-RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: CCSM – Monarch TH-RRH DV Renewal

Project Rank: 1

Project Score: 112 out 120

Funding Amount: \$160,060

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Thank you,
Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

P.O. Box 24147 | Jackson, MS 39225

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2 attachments

 **CCSM-Caprice Transitional- Competition Award Letter.pdf**
114K

 **2024 CoC Application Rankings.pdf**

**ADDRESS**

201 W. Capitol Street, Suite 800
Jackson, MS 39201

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P.O. Box 24147
Jackson, MS 39225

PHONE

Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Keenyn Wald
Community Counseling Services of Mississippi
PO Box 2590
Columbus, MS 39704

I am excited to inform you that the renewal application for CCSM – Monarch TH-RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: CCSM – Monarch TH-RRH DV Renewal
Project Rank: 1
Project Score: 112 out 120
Funding Amount: \$160,060

To see where your application was ranked among all submissions, please visit <https://msbos.org/coc-app-rankings/>.

For more information on the ranking process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Marika Baliko".

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH CoC RRH Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkers@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH – CoC RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH – CoC RRH

Project Rank: 2

Project Score: 90 out of 120

Funding Amount: \$613,295

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika



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Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

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2 attachments

 **2024 CoC Application Rankings.pdf**
287K

 **MUTEH COC RRH- Competition Award Letter.pdf**
112K



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Office: (601) 960-0557
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October 9th, 2024

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH – CoC RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH – CoC RRH

Project Rank: 2

Project Score: 90 out of 120

Funding Amount: \$613,295

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

A handwritten signature in black ink that reads "Marika Baliko".

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - BCCAA CoC RRH Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Elnora Littleton <capdir@bolivarcaa.org>
Cc: Florida Mckay <fmckay@bolivarcaa.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mrs. Littleton:

I am excited to inform you that the renewal application for BCCAA Rapid Rehousing project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: BCCAA Rapid Rehousing Project

Project Rank: 3

Project Score: 102 out of 120

Funding Amount: \$660,369

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

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 **BCCAA COC RRH- Competition Award Letter.pdf**
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Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Mrs. Littleton:

I am excited to inform you that the renewal application for BCCAA Rapid Rehousing project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: BCCAA Rapid Rehousing Project

Project Rank: 3

Project Score: 102 out of 120

Funding Amount: \$660,369

To see where your application was ranked among all submissions, please visit:
<https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH TH-RRH DV Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkers@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH TH-RRH DV (A New Hope) project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH TH-RRH DV

Project Rank: 4

Project Score: 111 out of 120

Funding Amount: \$308,808

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

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 **MUTEH A New Hope- Competition Award Letter.pdf**
117K

 **2024 CoC Application Rankings.pdf**
287K



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Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH TH-RRH DV (A New Hope) project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH TH-RRH DV

Project Rank: 4

Project Score: 111 out of 120

Funding Amount: \$308,808

To see where your application was ranked among all submissions, please visit:

<https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH HMIS Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkers@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH HMIS project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH HMIS

Project Rank: 5

Project Score: N/A

Funding Amount: \$262,080

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

P.O. Box 24147 | Jackson, MS 39225

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2 attachments

 **2024 CoC Application Rankings.pdf**
287K

 **MUTEH HMIS Competition Award Letter.pdf**
116K

**ADDRESS**

201 W. Capitol Street, Suite 800
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P.O. Box 24147
Jackson, MS 39225

PHONE

Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH HMIS project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH HMIS

Project Rank: 5

Project Score: N/A

Funding Amount: \$262,080

To see where your application was ranked among all submissions, please visit:

<https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

A handwritten signature in black ink that reads "Marika Baliko".

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH BOS CES Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkers@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH BOS CES project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH BOS CES

Project Rank: 6

Project Score: N/A

Funding Amount: \$291,460

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

P.O. Box 24147 | Jackson, MS 39225

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 **MUTEH BOS CES Competition Award Letter.pdf**
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ADDRESS
201 W. Capitol Street, Suite 800
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MAILING ADDRESS
P.O. Box 24147
Jackson, MS 39225

PHONE
Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH BOS CES project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH BOS CES

Project Rank: 6

Project Score: N/A

Funding Amount: \$291,460

To see where your application was ranked among all submissions, please visit:
<https://msbos.org/coc-app-rankings/>.

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Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH Data Bridge to CES Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkar@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH Data Bridge to CES project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH Data Bridge to CES

Project Rank: 7

Project Score: N/A

Funding Amount: \$226,000

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

Marika



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Sincerely,

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Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - CCSM CoC RRH Renewal

2 messages

Marika Baliko <cocdirector@msbos.org>

Wed, Oct 9, 2024 at 9:00 AM

To: kwald@ccsms.org

Cc: Amy Styron <astyron@ccsms.org>

Dear Mr. Wald,

I am excited to inform you that the renewal application for CCSM CoC RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: CCSM CoC RRH

Project Rank: 8

Project Score: 91 out 120

Funding Amount: \$136,600

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

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CCSM COC RRH Competition Award Letter.pdf



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Jackson, MS 39225

PHONE
Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Mr. Wald,

I am excited to inform you that the renewal application for CCSM CoC RRH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: CCSM CoC RRH

Project Rank: 8

Project Score: 91 out 120

Funding Amount: \$136,600

To see where your application was ranked among all submissions, please visit:

<https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - BCCAA CoC PSH Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Elnora Littleton <capdir@bolivarcaa.org>
Cc: Florida Mckay <fmckay@bolivarcaa.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mrs. Littleton:

I am excited to inform you that the renewal application for BCCAA PSH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: BCCAA PSH Project

Project Rank: 9

Project Score: 86 out of 120

Funding Amount: \$200,032

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

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October 9th, 2024

Dear Mrs. Littleton:

I am excited to inform you that the renewal application for BCCAA PSH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: BCCAA PSH Project

Project Rank: 9

Project Score: 86 out of 120

Funding Amount: \$200,032

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness!

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - MUTEH Central MS PSH Renewal

1 message

Marika Baliko <cocdirector@msbos.org>
To: Ledger Parker <lparkar@muteh.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Mr. Parker,

I am excited to inform you that the application for MUTEH Central MS PSH project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: MUTEH Central MS PSH

Project Rank: 10

Project Score: 85 out of 120

Funding Amount: \$113,332

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,
Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

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Dear Mr. Parker,

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Project Name: MUTEH Central MS PSH
Project Rank: 10
Project Score: 85 out of 120
Funding Amount: \$113,332

To see where your application was ranked among all submissions, please visit:
<https://msbos.org/coc-app-rankings/>.

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Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

Sincerely,

A handwritten signature in black ink that reads "Marika Baliko".

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - USM IDS Project Recovery Renewal

2 messages

Marika Baliko <cocdirector@msbos.org>
To: Jerry Alliston <jerry.alliston@usm.edu>
Cc: Tracy Coleman <tracy.coleman@usm.edu>

Wed, Oct 9, 2024 at 9:00 AM

Dear Dr. Alliston,

I am excited to inform you that the renewal application for USM IDS Project Recovery project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: USM-IDS Project Recovery

Project Rank: 11

Project Score: 79 out of 120

Funding Amount: \$314,201

To see where your application was ranked among all submissions, please see the attached ranking document or visit www.msbos.org/coc-app-rankings/

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, please contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

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 **USM IDS Project Recovery Renewal Award Letter.pdf**
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October 9th, 2024

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Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, please contact me.

Sincerely,

A handwritten signature in black ink that reads "Marika Baliko".

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - ASC 227 Place Green Meadows

3 messages

Marika Baliko <cocdirector@msbos.org>
To: Kathy Garner <asc@ascms.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Ms. Garner,

I am excited to inform you that the application for ASC 227 Place (aka Green Meadows) project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: AIDS Services Coalition – 227 Place (aka Green Meadows)

Project Rank: 12* This project is partially split between Tier 1 and Tier 2

Project Score: 80 out of 120

Funding Amount: \$314,076

To see where your application was ranked among all submissions, please see the attached ranking document or visit: <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

| p. (601) 960-0557

| f. (601) 487-0984

P.O. Box 24147 | Jackson, MS 39225

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2 attachments

 **ASC Green Meadows Award Letter.pdf**
116K



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CONTINUUM OF CARE

ADDRESS

201 W. Capitol Street, Suite 800
Jackson, MS 39201

MAILING ADDRESS

P.O. Box 24147
Jackson, MS 39225

PHONE

Office: (601) 960-0557
Fax: (866) 551-0916

October 9th, 2024

Dear Ms. Garner,

I am excited to inform you that the application for ASC 227 Place (aka Green Meadows) project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: AIDS Services Coalition – 227 Place (aka Green Meadows)

Project Rank: 12* This project is partially split between Tier 1 and Tier 2

Project Score: 80 out of 120

Funding Amount: \$314,076

To see where your application was ranked among all submissions, please visit <https://msbos.org/coc-app-rankings/>.

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Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika Baliko

Marika Baliko

MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - USM IDS Project Recovery Expansion

1 message

Marika Baliko <cocdirector@msbos.org>
To: Jerry Alliston <jerry.alliston@usm.edu>
Cc: Tracy Coleman <tracy.coleman@usm.edu>

Wed, Oct 9, 2024 at 9:00 AM

Dear Dr. Alliston,

I am excited to inform you that the expansion application for USM IDS Project Recovery project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: USM-IDS Project Recovery Expansion

Project Rank: 13 ranked in Tier 2

Project Score: 94 out of 120

Funding Amount: \$56,940

To see where your application was ranked among all submissions, please see the attached ranking document or visit www.msbos.org/coc-app-rankings/.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, please contact me.

Sincerely,

Marika



Marika Baliko | Interim CoC Director

| e. cocdirector@msbos.org

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Sincerely,

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Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director

MSBoS FY2024-FY2025 - Rank and Review Notification - ASC 227 Place Green Meadows Expansion

Marika Baliko <cocdirector@msbos.org>

To: Kathy Garner <asc@ascms.org>

Wed, Oct 9, 2024 at 9:00 AM

Dear Ms. Garner,

I am excited to inform you that the expansion application for ASC 227 Place (aka Green Meadows) project submitted by your organization in the FY2024 and FY2025 CoC Competition has been accepted and ranked by the MSBoS Rank and Review Committee. Your project will be included in the Balance of State Collaborative Application.

Project Name: AIDS Services Coalition – 227 Place (aka Green Meadows) Expansion

Project Rank: 14* This project is ranked in Tier 2

Project Score: 112 out of 120

Funding Amount: \$57,152

To see where your application was ranked among all submissions, please see the attached ranking document or visit <https://msbos.org/coc-app-rankings/>.

For more information on the Rank and Review Process, please visit <https://msbos.org/ranking-review/>.

Congratulations on this achievement, and I encourage you to continue to strive for excellence in the fight against homelessness.

If you have any questions, don't hesitate to contact me.

Sincerely,

Marika



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October 9th, 2024

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**Project Name: AIDS Services Coalition – 227 Place (aka Green Meadows)
Expansion**

Project Rank: 14* This project is ranked in Tier 2

Project Score: 112 out of 120

Funding Amount: \$57,152

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If you have any questions, don't hesitate to contact me.

Sincerely,

Marika Baliko

Marika Baliko
MS Balance of State CoC Continuum of Care Interim Director



2024 CoC APPLICATION RANKINGS

2025-26 Program Year

TIER 1 RANKINGS

1 Community Counseling Services of MS

Caprice DV TH-RRH (fka Monarch DV TH-RRH)

Project Type: Renewal -DV

Component Type: TH-RRH

Amount Ranked: \$ 160,060

2 MUTEH Inc.

MUTEH CoC RRH

Project Type: Renewal

Component Type: PH (RRH)

Amount Ranked: \$ 613,295

3 Bolivar County Community Action Agency

BCCA CoC Rapid Rehousing

Project Type: Renewal

Component Type: PH (RRH)

Amount Ranked: \$ 660,369

4 MUTEH Inc.

A New Hope

Project Type: Renewal – DV Bonus

Component Type: Joint TH-RRH

Amount Ranked: \$ 308,808

5 MUTEH, Inc.

HMIS

Project Type: Renewal

Component Type: HMIS

Amount Ranked: \$ 262,080



2024 CoC APPLICATION RANKINGS

2025-26 Program Year

6

MUTEH, Inc.

MS BoS Coordinated Entry System

Project Type: Renewal

Component Type: SSO-Coordinated Entry

Amount Ranked: \$ 291,460

7

MUTEH, Inc.

Data Bridge to CES

Project Type: Renewal

Component Type: HMIS

Amount Ranked: \$ 226,000

8

Community Counseling Services of MS

CCSM CoC RRH

Project Type: Renewal

Component Type: PH (RRH)

Amount Ranked: \$ 136,600

9

Bolivar County Community Action Agency

BCCAA CoC PSH

Project Type: Renewal

Component Type: PH (PSH)

Amount Ranked: \$ 200,032

10

MUTEH, Inc.

MUTEH Central MS PSH

Project Type: Renewal

Component Type: PH (PSH)

Amount Ranked: \$ 113,332



2024 CoC APPLICATION RANKINGS

2025-26 Program Year

11

USM – Institute of Disability Studies

Project Recovery

Project Type: Renewal

Component Type: PH (RRH)

Amount Ranked: \$ 314,201

12

AIDS Services Coalition

227 Place (aka Green Meadows) PSH

Project Type: Renewal

Component Type: PH (PSH)

Amount Ranked: \$ 314,076

This project is partially split between Tier 1 and Tier 2 of this ranking.

TIER 2 RANKINGS

12

AIDS Services Coalition

227 Place (aka Green Meadows) PSH

Project Type: Renewal

Component Type: PH (PSH)

Amount Ranked: \$ 314,076

This project is partially split between Tier 1 and Tier 2 of this ranking.

13

USM – Institute of Disability Studies

Project Recovery - Expansion

Project Type: New

Component Type: PH (RRH)

Amount Ranked: \$ 56,940

This project is an expansion of a currently funded CoC project.



2024 CoC APPLICATION RANKINGS

2025-26 Program Year

AIDS Services Coalition

227 Place (aka Green Meadows) PSH - Expansion

Project Type: Renewal

Component Type: PH (PSH)

Amount Ranked: \$ 57,152

14

**This project is an expansion of a currently funded CoC project.
Also, this project is being formed from a reallocation of ASC's
project, 121 Haven House.**

NOTE: The current CoC-Funded project, 121 Haven House PSH, was voluntarily reallocated by the recipient AIDS Services Coalition (ASC). Therefore, the project was rejected and not ranked by the CoC's Rank & Review Committee. The project funding total of \$57,152 was reallocated by the Committee to expand ASC's other CoC-funded project, 227 Place PSH (fka Green Meadows).

MS-501 MISSISSIPPI BALANCE OF STATE COC

LOCAL COMPETITION SELECTION RESULTS

Question 1E-5b

BACKGROUND

List of all projects submitted to HUD.

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FY2024 LOCAL COMPETITION SELECTION RESULTS FOR ALL PROJECTS

2025-26 Program Year

PROJECT NAME	SCORE (of 120)	ACCEPTED OR REJECTED	RANK (IF ACCEPTED)	RANKED FUNDING AMOUNT	REALLOCATED FUNDS
CCSM Caprice DV TH-RRH (fka CCSM Monarch)	112	Accepted	1	\$160,060	\$0
MUTEH CoC RRH	90	Accepted	2	\$613,295	\$0
BCCAA CoC RRH	102	Accepted	3	\$660,369	\$0
MUTEH A New Hope DV TH-RRH	111	Accepted	4	\$308,808	\$0
MUTEH HMIS	N/A	Accepted	5	\$262,080	\$0
MUTEH BoS CoC CES	N/A	Accepted	6	\$291,460	\$0
MUTEH Data Bridge to CES	N/A	Accepted	7	\$226,000	\$0
CCSM CoC RRH	91	Accepted	8	\$136,600	\$0
BCCAA CoC PSH	86	Accepted	9	\$200,032	\$0
MUTEH Central PSH	85	Accepted	10	\$113,332	\$0
USM Institute for Disability Studies Project Recovery CoC RRH	79	Accepted	11	\$314,201	\$0
ASC 227 Place PSH (fka Green Meadows)	80	Accepted	12	\$314,076	\$0
USM Institute for Disability Studies Project Recovery - Expansion	94	Accepted	13	\$56,940	\$0
ASC 227 Place PSH - Expansion	112	Accepted	14	\$57,152	\$0
CoC Planning	N/A	Accepted	15	\$427,283	\$0
ASC 121 Haven House PSH	N/A	Rejected	-	-	\$57,152

MS-501 MISSISSIPPI BALANCE OF STATE COC

HUD'S HOMELESS DATA EXCHANGE (HDX) COMPETITION REPORT

Question 2A-6

BACKGROUND

2023 HDX Competition Report.

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2024 HDX Competition Report

2024 Competition Report - Summary

MS-501 - Mississippi Balance of State CoC

HDX Data Submission Participation Information

Government FY and HDX Module Abbreviation	Met Module Deadline*	Data From	Data Collection Period in HDX 2.0
2023 LSA	Yes	Government FY 2023 (10/1/22 - 9/30/23).	November 2023 to January of 2024
2023 SPM	Yes	Government FY 2023 (10/1/22 - 9/30/23).**	February 2024 to March 2024
2024 HIC	Yes	Government FY 2024. Exact HIC and PIT dates will vary by CoC. For most CoCs, it will be last Wednesday in January of 2024.	March 2024 to May 2024
2024 PIT	Yes	Government FY 2024. Exact HIC and PIT dates will vary by CoC. For most CoCs, it will be last Wednesday in January of 2024.	March 2024 to May 2024

1) FY = Fiscal Year

2) *This considers all extensions where they were provided.

2) **"Met Deadline" in this context refers to FY23 SPM submissions. Resubmissions from FY 2022 (10/1/21 - 9/30/22) were also accepted during the data collection period, but these previous year's submissions are voluntarily and are not required.

2024 HDX Competition Report

2024 Competition Report - LSA Summary & Usability Status

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

LSA Usability Status 2023

Category	ESTAO	ESTAC	EST CO	RRHAO	RRH AC	RRH CO	PSHAO	PSHAC	PSH CO
Fully Usable				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Partially Usable									
Not Usable	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

EST

Category	2021	2022	2023
Total Sheltered Count	282	381	594
AO	265	323	422
AC	4	50	39
CO	13	8	7

RRH

Category	2021	2022	2023
Total Sheltered Count	1,167	1,465	1,253
AO	633	901	658
AC	534	567	599
CO	0	0	0

2024 HDX Competition Report

2024 Competition Report - LSA Summary & Usability Status

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

PSH

Category	2021	2022	2023
Total Sheltered Count	199	217	256
AO	150	180	205
AC	49	37	51
CO	0	0	0

1) Glossary: EST = Emergency Shelter, Save Haven, & Transitional Housing; RRH = Rapid Re-housing;

PSH = Permanent Supportive Housing; AO = Persons in Households without Children; AC = Persons in Households with at least one Adult and one Child; CO=Persons in Households with only Children

2) Because people have multiple stays in shelter over the course of a year and stay in different household configurations, a single person can be counted in more than one household type.

Therefore, the sum of the number of people by household type may be greater than the unique count of people.

3) Total Sheltered count only includes those served in HMIS participating projects reported by your CoC.

4) For CoCs that experienced mergers during any of these reporting periods, historical data will include only the original CoCs.

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.

Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, and SH	559	70.8	29.0
1.2 Persons in ES-EE, ES-NbN, SH, and TH	590	77.6	29.5

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

b. This measure is based on data element 3.917

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

Metric	Universe (Persons)	Average LOT Homeless (bed nights)	Median LOT Homeless (bed nights)
1.1 Persons in ES-EE, ES-NbN, SH, and PH (prior to "housing move in")	1,095	244.6	88.0
1.2 Persons in ES-EE, ES-NbN, SH, TH, and PH (prior to "housing move in")	1,126	243.9	89.0

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons Exited to a PH Destination (2 Yrs Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
Metric	Count	Count	% of Returns	Count	% of Returns4	Count	% of Returns6	Count	% of Returns8
Exit was from SO	543	19	3.5%	22	4.1%	41	7.6%	82	15.1%
Exit was from ES	79	1	1.3%	2	2.5%	3	3.8%	6	7.6%
Exit was from TH	21	1	4.8%	0	0.0%	1	4.8%	2	9.5%
Exit was from SH	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Exit was from PH	493	8	1.6%	10	2.0%	18	3.7%	36	7.3%
TOTAL Returns to Homelessness	1,136	29	2.6%	34	3.0%	63	5.6%	126	11.1%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

Please refer to PIT section for relevant data.

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

Metric	Value
Universe: Unduplicated Total sheltered homeless persons	594
Emergency Shelter Total	563
Safe Haven Total	0
Transitional Housing Total	37

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

This measure is divided into six tables capturing employment and non-employment income changes for system leavers and stayers. The project types reported in these metrics are the same for each metric, but the type of income and universe of clients differs. In addition, the projects reported within these tables are limited to CoC-funded projects.

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	44
Number of adults with increased earned income	16
Percentage of adults who increased earned income	36.4%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	44
Number of adults with increased non-employment cash income	7
Percentage of adults who increased non-employment cash income	15.9%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

Metric	Value
Universe: Number of adults (system stayers)	44
Number of adults with increased total income	22
Percentage of adults who increased total income	50.0%

Metric 4.4 – Change in earned income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	182
Number of adults who exited with increased earned income	38
Percentage of adults who increased earned income	20.9%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Metric 4.5 – Change in non-employment cash income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	182
Number of adults who exited with increased non-employment cash income	23
Percentage of adults who increased non-employment cash income	12.6%

Metric 4.6 – Change in total income for adult system leavers

Metric	Value
Universe: Number of adults who exited (system leavers)	182
Number of adults who exited with increased total income	54
Percentage of adults who increased total income	29.7%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 5: Number of Persons who Become Homeless for the First Time

This measures the number of people entering the homeless system through ES, SH, or TH (Metric 5.1) or ES, SH, TH, or PH (Metric 5.2) and determines whether they have any prior enrollments in the HMIS over the past two years. Those with no prior enrollments are considered to be experiencing homelessness for the first time.

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES-EE, ES-NbN, SH or TH during the reporting period.	501
Of persons above, count those who were in ES-EE, ES-NbN, SH, TH or any PH within 24 months prior to their entry during the reporting year.	41
Of persons above, count those who did not have entries in ES-EE, ES-NbN, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	460

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

Metric	Value
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1,231
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	98
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1,133

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

Measure 6 is not applicable to CoCs in this reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH).

Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations

Metric	Value
Universe: Persons who exit Street Outreach	548
Of persons above, those who exited to temporary & some institutional destinations	68
Of the persons above, those who exited to permanent housing destinations	430
% Successful exits	90.9%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations

Metric	Value
Universe: Persons in ES-EE, ES-NbN, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1,181
Of the persons above, those who exited to permanent housing destinations	809
% Successful exits	68.5%

Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

Metric	Value
Universe: Persons in all PH projects except PH-RRH who exited after moving into housing, or who moved into housing and remained in the PH project	215
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	203
% Successful exits/retention	94.4%

2024 HDX Competition Report

2024 Competition Report - SPM Data

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

System Performance Measures Data Quality

Data coverage and quality will allow HUD to better interpret your SPM submissions.

Metric	All ES, SH	All TH	All PSH, OPH	All RRH	All Street Outreach
Unduplicated Persons Served (HMIS)	619	55	260	1,255	403
Total Leavers (HMIS)	514	24	117	737	321
Destination of Don't Know, Refused, or Missing (HMIS)	27	0	1	7	16
Destination Error Rate (Calculated)	5.3%	0.0%	0.9%	1.0%	5.0%

2024 HDX Competition Report

2024 Competition Report - SPM Notes

MS-501 - Mississippi Balance of State CoC

FY 2023 Reporting Year: 10/1/2022 - 9/30/2023

Notes For Each SPM Measure

Note: Cells may need to be resized to accomodate notes with lots of text.

Measure	Notes
Measure 1	No notes.
Measure 2	No notes.
Measure 3	No notes.
Measure 4	No notes.
Measure 5	No notes.
Measure 6	No Notes. Measure 6 was not applicable to CoCs in this reporting period.
Measure 7	No notes.
Data Quality	No notes.

2024 HDX Competition Report

2024 Competition Report - HIC Summary

MS-501 - Mississippi Balance of State CoC
For HIC conducted in January/February of 2024

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Year-Round, Current Beds in HMIS or Comparable Database	Total Year-Round, Current, Non-VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster*	Adjusted Total Year-Round, Current, Non-VSP Beds	Adjusted HMIS Bed Coverage Rate for Year-Round, Current Beds	Total Year-Round, Current, VSP Beds in an HMIS-Comparable Database	Total Year-Round, Current, VSP Beds	Removed From Denominator: OPH EHV [†] Beds or Beds Affected by Natural Disaster**
ES	376	197	236	0	236	83.5%	0	140	0
SH	0	0	0	0	0	NA	0	0	0
TH	53	53	53	0	53	100.0%	0	0	0
RRH	516	516	516	0	516	100.0%	0	0	0
PSH	200	200	200	0	200	100.0%	0	0	0
OPH	0	0	0	0	0	NA	0	0	0
Total	1,145	966	1,005	0	1,005	96.1%	0	140	0

2024 HDX Competition Report

2024 Competition Report - MS-501 - Mississippi Balance of For HIC conducted in January/Fe

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Adjusted Total Year-Round Current, VSP Beds	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Year-Round, Current, HMIS Beds and VSP Beds in an HMIS-Comparable Database	Adjusted Total Year-Round, Current, Non-VSP and VSP Beds	HMIS and Comparable Database Coverage Rate
ES	376	140	0.00%	197	376	52.39%
SH	0	0	NA	0	0	NA
TH	53	0	NA	53	53	100.00%
RRH	516	0	NA	516	516	100.00%
PSH	200	0	NA	200	200	100.00%
OPH	0	0	NA	0	0	NA
Total	1,145	140	0.00%	966	1,145	84.37%

2024 HDX Competition Report

2024 Competition Report - HIC Summary

MS-501 - Mississippi Balance of State CoC

For HIC conducted in January/February of 2024

Rapid Re-housing Beds Dedicated to All Persons

Metric	2020	2021	2022	2023	2024
RRH beds available to serve all pops. on the HIC	679	570	671	554	516

1)† EHV = Emergency Housing Voucher

2) *This column includes Current, Year-Round, Natural Disaster beds not associated with a VSP that are not HMIS-participating. For OPH Beds, this includes beds that are Current, Non-HMIS, and EHV-funded.

3) **This column includes Current, Year-Round, Natural Disaster beds associated with a VSP that are not HMIS-participating or HMIS-comparable database participating. For OPH Beds, this includes beds that are Current, VSP, Non-HMIS, and EHV-funded.

4) Data included in these tables reflect what was entered into HDX 2.0.

5) In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

6) In the HIC, "Current" beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

7) For historical data: Aggregated data from CoCs that merged are not displayed if HIC data were created separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

2024 HDX Competition Report

2024 Competition Report - PIT Summary

MS-501 - Mississippi Balance of State CoC

For PIT conducted in January/February of 2024

Submission Information

Date of PIT Count	Received HUD Waiver
1/23/24	Not Applicable

Total Population PIT Count Data

Category	2019	2020	2021	2022	2023	2024
	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and partial unsheltered count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count	Sheltered and Unsheltered Count
Emergency Shelter Total	210	202	112	184	179	210
Safe Haven Total	0	0	0	0	0	0
Transitional Housing Total	81	18	33	18	12	40
Total Sheltered Count	291	220	145	202	191	250
Total Unsheltered Count	189	227	123	140	221	219
Total Sheltered and Unsheltered Count*	480	447	268	342	412	469

1) *Data included in this table reflect what was entered into HDX 1.0 and 2.0. This may differ from what was included in federal reports if the PIT count type was either sheltered only or partial unsheltered count.

2) Aggregated data from CoCs that merged is not displayed if PIT data were entered separately - that is, only data from the CoC into which the merge occurred are displayed. Additional reports can be requested via AAQ for any CoCs that have been subsumed into other CoCs.

3) In 2021, for CoCs that conducted a "Sheltered and partial unsheltered count", only aggregate and not demographic data were collected.

HEALTHCARE FORMAL AGREEMENTS

Question 3A-2a

BACKGROUND

The MSBoS has accepted, ranked, and submitted a new RRH project from AIDS Services Coalition (ASC) on the priority listing within this CoC Application. ASC has a formal partnership with Forrest General Hospital to provide healthcare services to the clients in the ASC's new RRH project. Services include emergency medical services, and mental health services.

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**MEMORANDUM OF AGREEMENT
BETWEEN
AIDS SERVICES COALITION
AND
FORREST COUNTY GENERAL HOSPITAL**

This Memorandum of Agreement ("Memorandum"), is dated as of June 1, 2025, by and between Forrest County General Hospital (hereafter "FGH"), and AIDS Services Coalition ("ASC").

WHEREAS, FGH was the recipient of a Continuum of Care program grant from the United States Department of Housing and Urban Development (the "HUD Grant"), pursuant to which it operated the permanent supportive housing program known as "Pine Grove Green Meadows," (227 Place) and

WHEREAS, the HUD Grant previously held by FGH has been transferred from FGH to AIDS Services Coalition (*effective July 15, 2013*), and ASC has agreed to continue operation of Pine Grove Green Meadows by acceptance of the HUD Grant and through FGH's unconditional commitment to assist ASC with its required in-kind match by providing ASC with documentation of the value of FGH medical services provided to residents of Green Meadows. These services in the amount of \$70,925 for the 30 clients of Green Meadows/227 Place, as described in 24 CFR 578.53 (12) include:

	Hours	Rate	Subtotal
Outpatient Health Services listed in 24 CFR § 578.53(e)(12), primarily acute emergency care services	500	\$125	\$62,500
Mental Health Services listed in 24 CFR § 578.53(e)(11), primarily crisis interventions; counseling; individual, family, or group therapy sessions	123	\$150	18,450
Total value			\$70,925

NOW, THEREFORE, FOR AND IN CONSIDERATION of the mutual covenants herein set forth, it is mutually agreed by and between FGH and ASC as follows:

1. Purpose. The purpose of this Memorandum is to memorialize FGH's one-year unconditional commitment to assist ASC in ensuring the continuation of Pine Grove Green Meadows by contributing to ASC's in-kind match requirements under the HUD Grant by providing FGH services to those Pine Grove Green Meadows residents who request and consent to such services for Grant No. MS0011L4B012215. This Memorandum also sets forth a protocol for documentation and transmittal of information between FGH and ASC so that ASC can meet the requirements of the HUD Grant.
2. Protocol. The protocol between FGH and ASC shall be as follows:
 - FGH and ASC agree to designate staff persons as points of contact for the purposes of this Memorandum.
 - Those designated staff persons shall develop appropriate consent forms that will enable information to be shared between FGH and ASC in a manner that is compliant with all applicable laws.
 - FGH will deliver FGH services to those residents of Pine Grove Village that seek the services of FGH.
 - ASC staff will receive written authorization from its residents to release personally identifying information to FGH that identifies them as current residents of the Pine Grove Green Meadows. By the last day of each month, ASC designated staff will transmit to the designated FGH staff that identifying information.
 - FGH will seek appropriate written authorization from Pine Grove Green Meadows residents to release information to ASC staff, and by the 10th day of each month, the designated FGH staff person will provide to ASC staff the specific services provided by FGH to Pine Grove Green Meadows residents and the specific costs for those said services provided by FGH to the residents.

The information transmitted between ASC and FGH will be used by ASC solely to provide documentation to HUD of information appropriate to document in-kind match required for continuation of the HUD Grant. FGH's one-year commitment hereunder is unconditional, as required by 24 C.F.R. § 578.73.

3. Other Policies and Procedures. The parties shall execute such other policies, procedures and instruments as required to implement the reporting necessary for in-kind match contributions to ensure the continuation of the HUD Grant.

4. Modification and Amendments. This Memorandum may be revised and modified only by written amendments mutually agreed upon and signed by both parties.

5. Term. This Memorandum will be effective as of June 1, 2025, and shall expire after one year. After one year the parties shall review the mutual benefit accruing to both parties and update the protocol between them annually as long as ASC remains the grantee for the HUD Grant. The parties shall execute a new memorandum each year.

IN WITNESS WHEREOF, the parties have caused this agreement to be signed in duplicate by their duly authorized representatives.

AIDS SERVICES COALITION

BY:



KATHY GARNER, Executive Director

AIDS Services Coalition

★

BY

DEBBIE SANFORD, Chief Officer
Pine Grove Behavioral Health
Forrest County General Hospital

Please note that
this is an annually
renewed MOA and
FGH / PGB executes upon
receipt of contract
9/25/24

