In attendance:

> Michele Fuller-Hallauer, Facilitator, Clark County Social Service
> Danyell Cadell, Clark County Social Service
> Karen Schneider, Clark County Social Service
> Tara Ulmer, Clark County Social Service
> Catherine Huang Hara, Clark County Social Service
> Brenda Herbstman, Clark County Social Service
> Tracy Torrence, Southern Nevada Regional Housing Authority
> Donna Jordan, Southern Nevada Adult Mental Health Services
> Annie Wilson, Las Vegas Metropolitan Police Department
> Stacy DiNicola, City of Henderson
> Sarah Reber, Department of Welfare and Social Services
> Elvira Ramirez, Nevada Health Center
> Joselyn Bluitt-Fisher, City of Las Vegas
> Emily Paulsen, Nevada Homeless Alliance
> Tameca Ulmer, Clark County Social Service
> Julee King, BitFocus
> Tauri Royce, BitFocus

Agenda Item 1. Introductions.
A meeting of the Southern Nevada Homelessness Continuum of Care Board Scoring and Ranking Meeting was called to order at 8:55 a.m., on Wednesday, August 10, 2016, at Clark County Social Service, 1600 Pinto Lane, 3rd Floor Training Room, Las Vegas, Nevada, 89106. Audience members introduced themselves. Michele Fuller-Hallauer, Manager, Clark County Social Service introduced herself and then introduced the Resource and Development team, which includes: Brooke Page, Assistant Manager; Tara Ulmer and Karen Schneider, Quality Management Analysts; Brenda Herbstman, Clark County Social Service Grants Coordinator; Danyell Cadell, CoC Grants Coordinator; and Catherine Huang Hara, Senior Management Analyst and CoC Lead.

Agenda Item 2. Public Comment.
Bridget Claridy, HELP of Southern Nevada, had Mindy Torres, HELP of Southern Nevada, present handouts that showed a discrepancy in the score card and to give and explain the correct information. HELP of Southern Nevada had performance evaluation and as discussed in their rebuttal, received a low score due to the allowance of a 6-month length of stay. The low score caused HELP of Southern Nevada to review the data in HMIS. It was determined that a group of clients entered into the program late enough in the fiscal period that did not have enough time to complete the program by the end of the fiscal year. The New Start Program outcomes showed that 17% had not met the goal of 6-months stay. The Healthy Living Program showed the same thing with a score card of 18.9% when the people entering the program was actually 74%. The handout shows this carried on throughout. The New Beginnings Program score card was 71.5%, when 24% of the participants had entered the program too late to meet the 6-month period. Ms. Claridy had been asked to present this information and to discuss with BitFocus why these individuals are being pulled into the data when they have not met the time criteria. Ms. Claridy also brought to the attention of the team the number of clients accepted into the program with no income. In the Healthy Living Program, 51 out of 52 people had no income when they entered the program. The percentage of people entering the New Beginnings program with no income was 91% of 208 people. She then asked the team to take this issue into consideration since sometimes the measure doesn't take in the entire picture. Michele Fuller-Hallauer, Clark County Social Service, asked Ms. Torres, to retrieve the handouts at the end of the Public Comment time, since the team had many documents to review. BitFocus agreed to keep their handouts in order to look at the information presented by Ms. Claridy. Shalimar Cabrera, U.S. Vets – Las Vegas, explained she is presenting to the Team again, since upon reviewing their score, which appeared low, that it was determined there was an error in the computation causing the score to be 20 points lower than it should have been. She stressed that no data was changed. She also brought out that another issue did not work in her program's favor, but she learned that if another agency has not released them from their program, that client cannot be included in another program. Teresa Etcheberry, Clark County Social Service, provided updates to the team regarding The Vivo Housing Project. At present, 20 clients, who are cased managed by one case manager, are ready to house. Four more

case managers will be starting in September. A vocational specialist will be coming in to work with the clients regarding employment needs; and a registered nurse is working with the clients to assist in navigation of the health care system. The program started slow due to staffing difficulties. The program has now gotten other vendors to come onboard to assist in identifying housing opportunities to get clients into housing. The program has a housing coordinator to help the clients walk through the process, as well as a realty company that has done outreach to 50 properties and landlords. Some clients have themselves identified housing, and the program is working to get them housed. Arash Ghafoori, Nevada Partnership for Homeless Youth, stated the NPHY Transitional Youth Housing Program received a 71.4% score for clients exiting to permanent supportive housing, when normally their score is above 90% and closer to 100%. He explained that the reason for the lower score this year was due to 2 particular exits. One case involved a youth who had many immigration challenges. He had been lied to by his parents about his age and, therefore, had false documentation. By the time this was discovered, NPHY had already begun to help him apply for a J-1/F-1 Visa, which normally is a 1 year process. Since this client was nearing the age of 21, NPHY had the client transition to HELP of Southern Nevada, so they could continue to work with him on his immigration process and keep him safely housed. Although with this client, it was an exit from transitional housing to transitional housing, it was in the best interest of the client. The other case involved a youth getting ready to exit and coordinated entry. This youth had anxiety about exiting and had heard that coordinated entry was a process that would take a few months to be placed after contacting social services. Since the youth thought that it would be few months before he would be exiting the program, he went and was entered into coordinated intake, which only took a few days to place him in St. Jude's Ranch. Unfortunately, St. Jude's never verified whether he was through exiting the NPHY program. Evidently there are communications challenges with coordinated intake, as it only places and is up to the provider getting the placement to verify all the information with the client. The issue was then brought to the attention of Michele Fuller-Hallauer and the Coordinated Intake Change Advisory Team.

Agenda Item 3. Scores Distribution and Reallocations Discussion.
Tauri Royce, Bitfocus, provided the scores distribution statistics without project names. The scores were accumulative scores, which included the monitoring, the performance measures, and the application score. Michele Fuller-Hallauer, Clark County Social Service, explained that the project names and agency names are initially being withheld in order for the team to make data driven decisions. Then it was brought to the team's attention that a decision as to whether a cutoff be placed to determine if a reallocation of projects needs to occur. The first distribution chart presented shows the project overall score, which takes into consideration the monitoring score, performance score, and application score. Projects with an overall score that was low and projects which chose not to renew are at the bottom of the chart. The dollars amounts from projects which chose not to renew can be reallocated. The new projects are at the bottom because they do not have performance measures or monitoring scores. Two other projects, Planning and HMIS, are at the bottom. Planning is not part of the tiering process but is included in the full distribution of grants; HMIS does not go through the normal process, as the application process is different. If HMIS is to continue in the community, it must be included in Tier I. There is also a project at the bottom that just completed a HUD monitoring, so, therefore, did not go through the monitoring process and did not receive a monitoring score. This project passed the HUD monitoring process with flying colors. This project, which is WestCare's SafeHaven, is unique to the community. Since HUD is not funding any new safe havens, if the CoC wishes to continue to fund this project, it must be ranked accordingly. There was 1 renewal project that fell to the bottom, and 1 permanent supportive housing that is ranked in the lower section due to their total score of under 120 points. Tauri Royce, BitFocus, also presented a different type of chart to show the distribution. Ms. Fuller-Hallauer explained the team now needs to discuss reallocation or potential reallocation of funding from projects. Reallocation is taking currently funded projects, defunding those projects, and applying those funds to a new project. When asked for clarification, Ms. Fuller-Hallauer stated that prior to moving forward with the blind data, the team needs to decide if there are certain projects that have gone below a certain scoring threshold and set those projects aside as potential reallocation. Jocelyn Bluitt-Fisher, City of Las Vegas, pointed out that there are presently 3 projects that have very low scores. Ms. Fuller-Hallauer stated that although those 3 projects have fallen to the bottom, they aren't necessarily going to have their funds reallocated because of need in the community. Of the 3 projects, Planning and HMIS have always been at the bottom of the ranking. In the past, because it has been decided that HMIS is critical to our community and funding for HMIS is lost if it isn't included the ranking, the team has always put it as number 1 in the Tier I funding. When asked for clarification as to why HMIS was ranked at the bottom, Ms. Fuller-Hallauer restated that HMIS utilizes a different application process because it does not serve clients. Since the application is not included in ZoomGrants, which focuses on serving clients, it does not have an application score. Also, the monitoring falls within different components than those of other projects. Ms. Bluitt-Fisher received verification that the money allocated for Planning is completely used each year. Ms. Fuller-Hallauer also clarified that although Planning is at the bottom of the scoring, it is not subject to the ranking process, but is part of the full application. She also stated that HMIS does get ranked, and therefore, needs to be put into Tier I or Tier II. Ms. Fuller-Hallauer then reiterated that the team needs to determine if there is a cutoff line to decide if any renewal projects falling below that line need to have their funds considered for possible reallocation. Emily Paulsen, Nevada Homeless Alliance, stated that the team needs to first decide if there is a threshold to

take into consideration possible reallocation of funding. Ms. Fuller-Hallauer stated the team has the right to table the discussion of setting a threshold until the team receives further information.

Agenda Item 4. CoC Project Monitoring Process Overview.
Karen Schneider, Clark County Social Service, gave a brief overview of the monitoring process for this cycle. The Monitoring Working Group first started looking at the guidance and regulations from HUD with regard to full monitoring of every project type. The Monitoring Working Group decided to provide to all the providers the full monitoring tools specific to project type and create a condensed tool to be used for enhanced desk audits. By providing the full monitoring tool, the provider would be more prepared of the guidelines and their agency is prepared and in compliance of all the items. The Monitoring Working Group can focus on doing enhanced desk audits taking into consideration certain factors, i.e. project performance; performance measures which includes serving those hardest to serve; and measures associated with permanent housing, self-sufficiency, HMIS participation and data quality. Another important factor was participant eligibility in accordance with the current definition of chronic homelessness, including meeting eligibility guidelines and having proper documentation. For this factor, specific case files were reviewed. Other factors were utilization rates, drawdown rates, and HUD funds recaptured. The enhanced desk audits for all projects took into account the performance measures, which are evaluated through the performance monitoring tool found in HMIS; case file reviews; and other factors such as utilization and unspent rates. Ms. Schneider then brought to the team's attention the unspent rates and utilization rates. She explained that because some projects had not been under contract an entire year, a formula was used to give those projects a variance. She then provided the formula that was used to apply the variance and stressed that it was important to prove that it was taken into account that not all of programs worked under the same contract year, which the formula shows. After the enhanced desk audits were done and the providers were given their results, they were then given the opportunity to meet with the Monitoring Working Group and BitFocus, for clarification of their scores, to discuss the results of their performance monitoring and to talk further about the unspent funds variance and the utilization rate. With regard to unspent funds, through discussions with Ms. Fuller-Hallauer, the ranking team was able to step back and come up with a simpler way to make the calculation and have it be a truer representation of the numbers. Ms. Fuller-Hallauer clarified with Ms. Schneider that all projects were monitored with the exception of WestCare's Safe Haven, because they had just gone through the monitoring process with HUD.

Agenda Item 5. Provider Technical Assistance Review.
Danyell Cadell, Clark County Social Service, since the last time the team met, and based on the recommendations the providers were given the opportunity to come and discuss issues related to their monitoring results. The team was then told of some of the concerns the providers brought to the attention of the Monitoring Working Group and things that are going to be worked on in the coming year. One of the recommendations received that has already been addressed is the changing of the formula/calculation for the drawdown rates to make it more equitable. Most of the providers, except for Women's Development Center and WestCare, participated in the monitoring technical assistance process. There were concerns about the utilization rates and drawdown rates. Many delays that impacted the drawdown rates were due to contract delays. To take those delays into consideration, the variance was applied to the scores of those projects. Other concerns were related specifically to the performance monitoring tool. Generally, the concerns regarded exit issues, i.e. how to handle exits related to active duty, data entry of children exits, handling of immigration issues, ensuring there is a consensus among the providers in collaboration of transferred clients. During the review, Tauri Royce, BitFocus, offered the providers the opportunity to go to her with regard to those types of issues. To ensure the process continues to be transparent and to promote collaboration, the Monitoring Working Group will be addressing these issues throughout the year. When asked about the origin of the contracts and why those contracts would cause a delay, Ms. Cadell referred the question to Michele Fuller-Hallauer. Ms. Fuller-Hallauer explained that through the local process, once the applications are received, those applications are sent to the ranking team. The team then scores and ranks those applications. The recommendation of the Scoring and Ranking Team is then sent to the Southern Nevada CoC Board for final approval. Upon approval, the ranked applications are then put into the local consolidated CoC application which in turn is sent to HUD. HUD reviews and scores all the of project applications, and ranks the consolidated application. A conditional award is then made and released. For example, for last year, the consolidated application was due in November, Tier I conditional award announcements were made in March and Tier II award announcements were made in May. Once the consolidated award announcements are made, HUD then generates an eSnaps entry, which is like a technical submission. Each agency must go into the eSnaps component and make any adjustments and clarifications. HUD then generates information to San Francisco to start contracts. San Francisco works with the local HUD office to send contracts out to providers. The contracts are then signed in triplicate and returned to San Francisco to execute the contract. Once the contract is executed, the funding is set up in eLOCCS for the projects to start drawing down money. Both the San Francisco office and the local HUD office are very good at letting the staff as a collaborative applicant know there is an eSnaps opportunity available for the provider to go in and make any adjustments. We work closely with the providers to make sure the eSnaps application is completed and submitted quickly to try and

minimize the delay. For communities that have a unified funding agency, there is the same local process, but conditional awards are made to the CoC collaborative applicant. The collaborative applicant does one eSnaps application to send to San Francisco, San Francisco sends one contract to the CoC collaborative applicant, the CoC collaborative applicant does subcontracts based on the submission of the full CoC application. We are not a unified funding agency, nor have we applied to be a unified funding agency. That request has to come from the CoC board. Therefore, the original process is what we deal with. Catherine Huang Hara, Clark County Social Service, also added that when a new project starts and is newly funded, the start date of the grant is contingent upon when HUD signs the contract. For example, if notification of award for a new project starting was received in either March or May, they usually are to start by the end of the calendar. Therefore, some projects that submitted an application last year may still be waiting to start their contract. For a housing project, once they serve their first client, their program would start, which creates another delay. If the grant agreement from HUD is slow in being received, the projects continue to wait. For renewals, this is problematic, for example with HMIS, when the grant agreement started in February, but the awards were not announced until March, so we're already behind on getting the new grant award. There are also housing projects with a February start date that are waiting on the grant agreement to be able draw funds. However, since they know they've been awarded, their agency is "floating" the project until they receive the grant funding. Due to this challenge, one of the projects is dropping out of competition because they cannot sustain the long lag time to get their executed agreement. We have been trying to consult with HUD to try to get things moving. However, with this year's grant agreement execution for 2015, for eSnaps, all HUD representatives are being asked to initiate that process and some of those representatives are in a learning curve. Social Service has only received a couple of the grant agreements for 2015, and it sounds as if only a few are beginning to trickle in. Marilee Hansen, the local HUD representative, will notify us when the eSnaps is available to go into. Once the adjustment to eSnaps occurs, match letters are updated and loaded into the agreement. Then eLOCCS must set up, so the provider can go in to put in dates to eLOCCS to start the draw down. The question was then asked if a renewal project could be approved by the team, even if there is a substantial portion of spenddown of the original grant that needs to occur. At this point there is a possibility that some projects that were renewals still do not have their renewal contract. However, those projects are still serving clients but, paying for it themselves, so they can back bill to the beginning of the project year once they get the grant agreement. The challenge is determining whether a project should continue if the contract end date is before the grant announcement. Donna Jordan, Southern Nevada Adult Mental Health Services, asked whether it would be in the best interest of the providers to ask the CoC to move toward a UFA to speed up the process. Ms. Fuller-Hallauer suggested that an evaluation needs to be done to see if moving towards a UFA would be beneficial to the community, but there are challenges that come with a UFA, as well. Emily Paulsen, Nevada Homeless Alliance, then referred back to the monitoring process, and asked about the question regarding the income measure. She asked Ms. Fuller-Hallauer to explain the income measure and give more information from the Monitoring Working Group about the providers' feedback on the income. Ms. Fuller-Hallauer referred Ms. Paulsen's question back to Ms. Schneider. The income measure is contained within the performance monitoring version of the report in HMIS. The performance monitoring report is added into the sum for the total score in the performance monitoring tool. The points possible for the entire tool are 100. Of those points, 50 points came from the performance monitoring report out of HMIS. The income measure is housed within that report and is looking at increasing or maintaining income from client entry to client exit or client assessment. Ms. Paulsen then asked about the length of stay in the program to assess the client. She was informed that the assessment could be done at any time, as needed. Ms. Schneider went on to explain the time period for all the data in the performance monitoring version to report covered the time May 1, 2015, to April 30, 2016. Ms. Cadell explained that with regard to this particular measure, depending on the population a program serves, lower scores for the program may be seen. This section is called "Increased Jobs, Income, & Self Sufficiency", which includes 3 parts scored together: "Increased or Sustained Employment", "Cash Income", and "Education". Those three things gather a percentage. If the program reaches over 65% on that measure, it gains 12.5 points. The other part of the measure is Increased or Sustained Employment. For those programs that are dealing with clients able to work or increasing their income or education, the scores may be higher, but if they are serving clients with severe chronic medical or mental health issues, they could pick up points in the second area. This is why it's so important for those providers dealing with individuals with severe or chronic medical or mental health issues to work with the SOAR Coordinator to ensure they are accessing those mainstream benefits. By doing so, the program would be able to pick up to 12.5 points in the second part for a total combined score of 25 points. Ms. Cadell then clarified that disabled and homeless fall within the second part and explained that mainstream benefits included those such as food stamps, Social Security disability, and Medicaid. Ms. Paulsen then asked if a program could lose points if it was not assisting clients to pursue those benefits, to which Ms. Cadell confirmed. Ms. Fuller-Hallauer also explained the difference between cash and non-cash mainstream benefits, i.e. food stamps and Medicaid are non-cash; whereas, Social Security and Veterans' benefits are cash. Ms. Cadell also explained that when a program is dealing with someone in the process of getting Social Security, due to the length of time to get those benefits, they may not immediately receive points in that area, but the points are available. Programs that are serving older clients that have chronic medical issues or mental health issues and have qualified for mainstream cash or non-cash benefits will have higher scores in this area. The question was then posed as to whether the overall score of a program would be

impacted by the population they are serving? To help clarify, Ms. Schneider showed a sample of a portion of the performance monitoring report from HMIS. In the Self-Sufficiency measure, 4 measures are looked at for the scoring. The 3 measures (employment measure, other cash income measure, and improved education measure) are looked at to see if they reach 65% or more, and if so, the program scores points. The other mainstream non-cash benefits are separate and that threshold can score up to 12.5 points. The first part is where they receive points for the population served, and therefore, may receive a higher score.

Agenda Item 6. USICH – HUD CoC NoFA Webinar.
The team viewed the 30 minute, USICH-HUD CoC NoFA Webinar entitled, "Strategies for Success". The webinar covered overall questions regarding community planning, best practices, and strategies. Opening Doors: Federal Strategic Plan to Prevent and End Homelessness – this focuses on 4 priorities toward ending homelessness. Those events are ending Veteran homelessness; ending chronic homelessness; preventing and ending homelessness for families, children, and youth; and ending homelessness of all types. HUD Policy and Overview of the 2016 Competitive application - Approximately 1.9 billion dollars are available for FY 2016 competition. As a competitive NoFA, it implements a strong preference to performance and effective practices, included in the McKinney-Vento Act as amended by the HEARTH Act. The competition uses the same practice for selection for 2016 as was used in 2015, with an increase in percentage of funds for Tier I and a decrease for Tier II. The competition will close at 7:59 p.m. eastern time on September 14. Communities are being given the opportunity to create new, highly effective projects, both through reallocation and through a permanent housing bonus. Through reallocation, CoCs have the opportunity to create 4 types of new projects: permanent supportive housing dedicated for youth, individuals, and families experiencing homelessness; rapid rehousing for individuals, families, and accompanied youth coming directly from the streets or emergency shelters, or people meeting the criteria of paragraph 4 of HUD's definition of homelessness; supportive services only; and/or a dedicated HMIS project. New projects can also be created through a permanent housing bonus which is worth up to 5% of the CoC's federal pro rata need. This could be a permanent supportive housing project where all beds are dedicated for those experiencing chronic homelessness, and new rapid rehousing projects serving individuals, families, unaccompanied youth, or other persons meeting the criteria of paragraph 4 of HUD's definition of homelessness. HUD will award up to 2 points to CoCs that can demonstrate they are implementing a strategy to prevent criminalization of homelessness and to ensuring outreach is conducted to individuals and families who are least likely to seek services. Planning and unified funding agencies (UFA) grants are not tiered or ranked, which means these are available funds and do not affect the CoC for the available amount for funding for new and renewal project applications. Policy Priorities – The first policy priority in this year's competition is creating a systemic response to homelessness. In addition to having the right programs, CoCs should be developing a system for ending homelessness that are coordinated, inclusive of all partners that have a role to play, including mainstream systems and programs, transparent, and achieve positive outcomes. HUD has developed system performance measures to assess the overall impact the CoC's homeless system. These include the average length of homeless episodes, the rate of returning to homelessness, and other factors that determine whether the CoC is effectively serving what areas of homelessness. CoCs should be using these measures of analyzing how they can improve their system to achieve better performance for the population being served. CoCs should recognize that by including aggregate data from the community's domestic violence transitional housing programs may increase the CoC's average length of stay. These programs contribute positively to other metrics by serving highly vulnerable populations. CoC are encouraged to integrate metrics and include descriptions of those populations served and services provided in their application. Coordinated entry should be integrated into community outreach work to ensure that people who are living in unsheltered conditions are prioritized for help. Coordinated entry should be several fold. They should make it easier for persons experiencing homelessness to access the appropriate programs and service intervention. They should prioritize persons with longest history of homelessness and the most extensive needs. There should be lower barriers to entering programs or receiving assistance, and ensure that those receiving assistance are being housed as quickly as possible. Establishing and strengthening coordinated entry is an opportunity for communities to make sure they that all open community-based housing providers are at the table and ensuring their clients have access to available to homeless services. One example of such stakeholders includes domestic violence victim service providers. HUD has published guidance on how CoCs can engage domestic violence victim service providers as full partners in in the community coordinated entry process to ensure that services are available for families needing assistance, they will be able to access housing, and services tailored to their unique circumstances and needs. Promote Participant Choice – CoCs should do everything they can to support the choices made by persons experiencing homelessness. Examples of these choices were then given, i.e., persons may prefer a program that focuses on promoting the continued sobriety of the participant. Plan as a system – CoCs should be coordinating homeless assistance in mainstream housing and service providers to ensure that people experiencing homelessness receive a placement as soon as possible, and that assistance is focused on obtaining and retaining housing. CoCs should be monitoring these providers performance, eligibility criteria, target populations, and cultural competence. They should also ensure that providers work together when a participant is moving from one program to another or when more than one program is serving the same person. The first policy priority is delivering homeless

assistance in a more open inclusive and transparent way. CoCs should ensure that the needs of all individuals and families experiencing homelessness are represented within the CoC structure by including persons who have experienced homelessness throughout the planning process and in leadership and oversight roles. CoCs should also include organizations representing persons fleeing domestic violence, the LGBTQ community, victims of human trafficking, unaccompanied youth, individuals with disabilities, and other relevant populations within their planning bodies. The steps ensure that they are client centered and culturally competent. The second policy priority is to strategically reallocate forces. Using cost performance and outcome data, CoCs should improve how the resources are utilized to end homelessness, including CoC and ESG program funds, state and local funds, public assistance housing units, mainstream service resources, i.e., Medicaid, childcare development fund, Head Start, home visiting, and philanthropic efforts. CoCs should manage the performance of all projects in the community and reallocate resources whenever doing so will better help them end homelessness. Some steps to consider include comprehensively reviewing project quality, performance, and cost effectiveness. CoCs should use objective performance-based scoring criteria and selection priority that are approved by the CoC to determine the extent to which each project addresses HUD's policy priorities. CoCs should reallocate funds from a project whenever reallocation would improve outcomes and reduce homelessness. CoCs should consider how much each project spends to serve and house an individual or family, as compared to other programs serving similar individuals or families, while being mindful of some unique program designs essential to serve special subpopulations, such as those fleeing domestic violence. Maximizing the use of mainstream and other community-based resources: CoC's should educate all stakeholders in the community about mainstream resources and funding opportunities, particularly new opportunities made available through the Affordable Care Act. Additionally, providers should partner with other partners and stakeholders within the community that have resources, i.e., public housing agencies, and other agencies in the foundation that have resources that could serve persons experiencing homelessness. Reviewing transitional housing projects – Research shows that transitional housing is generally more expensive and achieves similar or less impactful outcomes to other housing models serving similar populations. HUD recognizes that transitional housing may be an effective tool for addressing certain needs, such as housing for underage youth, those fleeing from domestic violence situations and persons recovering from addiction. HUD strongly encourages CoCs and recipients to carefully review the transitional housing projects within the CoC's geographic area to determine cost effectiveness, performance and for the number and type of eligibility criteria to determine if funds should be reallocated to rapid rehousing or another model. CoCs that are reviewing transitional housing projects should first consider whether the project meets the needs of the population they are serving and ensuring that the project is performing well by using appropriate measures and metrics. Many communities will find that the transitional housing model is often used and tailored to the needs of survivors of domestic violence. The last bit of focus is on integration. Recipients must administer their programs and activities in the most integrated setting appropriate to the needs of qualified individuals of disability. Recipients operating projects serving chronically homeless individuals and families must ensure individuals with disabilities can interact with individuals without disabilities to the fullest extent possible. The next policy priority is to end chronic homelessness - The key element includes targeting those individuals with the highest needs and the longest histories of homelessness for existing a new permanent supportive housing. CoCs should prioritize chronically homeless individuals, youth and families who have had the longest history of the highest need for new and turnover units by implementing HUD's notice on prioritization. Increasing units - CoC should create new permanent supportive housing units dedicated to individuals, youth, and families experiencing chronic homelessness and if CoC's have not already done so, dedicate existing permanent supportive housing units to those experiencing chronic homelessness. There are numerous ways of the community getting permanent supportive housing units including applying for CoC program funds, partnering with DHH for rental assistance, and strengthening connections to Medicaid, to pay for services and permanent supportive housing. Improving outreach – To decrease the number of persons experiencing chronic homelessness in the community, the community must identify and continually engage all persons who are currently experiencing sheltered or unsheltered chronic homelessness, and those who are in jeopardy of experiencing chronic homelessness. This includes ensuring effective communication with individuals with disabilities in a facility and taking reasonable steps to ensure meaningful access to services, programs, and activities by persons with limited English proficiency. Links to resources were shown that are intended to provide communities with additional support, if they work to achieve the goal and include strategies and benchmarks to achieve the goal to end chronic homelessness. The fourth policy priority is ending family homelessness. Most families experiencing homelessness can be housed quickly and stably using rapid rehousing. Some will need the longer support provided by permanent supportive housing subsidy or permanent supportive housing. CoCs should ensure families can easily access housing assistance tailored to their strengths and needs and through partnership, increase access to the mainstream affordable housing. For most CoCs this would require expanding rapid rehousing programs. HUD encourages CoCs to use reallocation to create new rapid rehousing projects, and to use ESG and other funding sources to expand rapid rehousing assistance. It is also suggested that CoCs consider the intersection with domestic violence. High quality projects that serve people fleeing domestic violence are critical components of comprehensive homeless services, regardless of component type. Recognition of the intersection between domestic violence and family homelessness, and maintaining CoC funded projects available for this population. Transitional, rapid rehousing, and permanent supportive housing for survivors

should have a place in the community system, as long as there is a need in the community and can show positive and safety related outcomes and provide choice to those who want these types of programs. Policy priority number five is ending youth homelessness. CoCs should understand the varied and unique needs of youth experiencing homelessness and reach out to youth service providers to encourage active participation in the CoC. CoCs and youth serving organizations should work together to develop resources and programs to end youth homelessness and meet the needs of youth and LGBTQ youth. HUD recipients must comply with HUD's final rule, equal access to housing and HUD programs, regardless of sexual orientation or gender identity, which requires that HUD assisted and HUD insured housing programs are made available to all eligible individuals and families. When evaluating performance of youth programs, CoCs should take into account the specific challenges faced by youth experiencing homelessness. CoCs should identify lower performance youth projects and should seek to reallocate funds from those projects to projects that would achieve better outcomes for youth. In coordination with mainstream programs, CoCs should also consider how they can best serve young people who are fleeing domestic violence, human trafficking, or exchanging sex for housing. The next policy priority is ending veteran homelessness. CoCs should take specific steps to reach this goal, including prioritizing veterans and their families for assistance when they cannot be effectively assisted through VA services, and coordinating closely with veteran serving organizations and VA funded housing. Communities that have effectively ended veteran homelessness should continuously assess the performance of the homeless assistance system to ensure for the continued achievement by periodically reviewing the benchmarks established by HUD, VA, and USICH. The final policy priority is Housing First approach. The Housing First approach prioritizes rapid placement and stabilization in permanent housing, and does not have a service placement requirement or precondition, such as sobriety or minimum income threshold. Projects using Housing First Approach often have supportive services; however, participation is in these services is based on the needs and desires of program participants. Specific steps to using the Housing First approach are: 1. Use data to quickly and stably house persons experiencing homelessness. CoCs should be measuring the length of time it takes for the program to move households into permanent housing and help providers improve performance. 2. Engage landlords and property owners. Identify and recruit landlords and property owners in a certain geographic location so that when a family or individual needs housing, potential units that those individuals or family units choose have already been identified, speeding up the housing process. Landlord engagement may be undertaken by each homeless assistance provider or consolidated by one or a few organizations to engage landlords on behalf of one or many providers. 3. Remove barriers to entry. CoCs should review project level eligibility criteria for all programs and remove any barriers to accessing housing and services. Folks that are experiencing homelessness should not be screened out of or discouraged from participating in programs because of poor credit, lack of income, or employment. People with addictions to alcohol or substances should not be required to seek assistance with their addiction before accessing all services. 4. Adopting a client-centered service method – All projects should ensure housing and service options are tailored to meet the unique needs of each individual or family presented for services and that program participants have access to services they reasonably believe will help them achieve their goals. However, programs participants should not be required to participate in services and cannot be required to participate in disability related services. HUD will continue to require collaborative applicants to rank all projects into tiers, except for CoC planning and UFA costs. The purpose of the 2 tiered approach is for CoCs to clearly indicate to HUD which projects they are prioritizing for funding. The projects should be ranked according to quality, effectiveness, and the ability to meet the need in the community. The amount available for Tier I increased to 93% of the Annual Renewal Demand (ARD), which is approved on the final HUD grant inventory worksheet. Projects in this tier are conditionally selected from the highest scoring CoCs to the lowest scoring CoCs, provided the project application passes both the eligibility and threshold review. Any type of new or renewal project application can be placed in Tier I; however, in the event that HUD is required to drastically reduce the amount of funds available in this NoFA, the Tier I amounts for the CoCs would be reduced proportionately among all CoCs which could cause some projects put into Tier I to fall into Tier II. This means that CoCs should carefully determine the ranking and priority for all projects placed in Tier I and Tier II. The funding for Tier II is the difference between the Tier I and the CoC ARD plus any amount available in the Permanent Housing Bonus, before adjustments are made to the permanent housing leasing, operating and rental assistance items changes to the FMRs. Projects placed in Tier II will be assessed for eligibility threshold requirements and funding will be determined using the CoC application score as well as factors listed in the NoFA. If a project application straddles Tier I and Tier II funding lines, HUD can conditionally select the project up to the amount of funding that falls within Tier I; then using the CoC score, HUD may the fund the Tier II portion of the CoC project. If HUD does not fund the Tier II portion of the project, HUD may award the project funds at the reduced amount provided that the project is still feasible with the reduced funding. Basically, what is important to put into Tier I are those effective, well performing programs that will meet the needs of the community. Allocation and System performance measures are worth 10 points, which is more than last year. Each project, whether new or renewal, that falls in Tier II will be scored using a 100 point scale. The point scale is broken down as follows: up to 50 points will be awarded in direct proportion to score received on CoC applications rounded to the nearest whole point; up to 35 points for the CoC ranking of the project application will be scored. In order to more evenly distribute funding across CoCs, and to take into account the CoCs ranking of the projects, point values will be assigned directly related to CoC ranking of projects. Up to 5 points will be based on the type of project application submitted and the population that will be served

with the following points available for the following project types. For renewal and new permanent housing, 5 points will be awarded. This includes permanent supportive housing, rapid rehousing, renewal safe havens, HMIS, SSO for centralized or coordinated entry, or transitional housing that serves exclusively homeless youth programs. For renewal transitional housing, 3 points will be awarded except those transitional housing projects that exclusively serve youth. Renewal SSO project applications will receive 1 point, other than those for centralized or coordinated entry program. Up to 10 points will be awarded for how the CoC can demonstrate that permanent housing program application are committing to applying the Housing First model. Transitional housing projects, Safe Haven, and SSO projects that are not for centralized or coordinated entry can receive up to 10 points for how the project demonstrates that it's low barrier, it prioritizes rapid placement and stabilization in permanent housing, and does not have service participation requirements or pre-conditions to entry. HMIS projects, SSO projects for centralized or coordinated entry will automatically receive 10 points. The National Alliance on Homelessness created a tool to help score criteria on the consolidated application. This tool stresses the importance of having a performance-based review and ranking process of all projects and covers reallocation, progress on each of the opening doors population goals, HUD's policy priority, strengthening system-wide CoC coordination and engagement. It also summarizes the estimated number of points CoCs will receive through charts and graphs. The concept of reallocation is when a CoC shifts funds in whole or in part from existing eligible renewal projects to create 1 or more new projects without decreasing the CoC ARD. New projects created through reallocation must meet the requirements as set forth in the NoFA and the project eligibility and project quality threshold, also established in the NoFA. In the 2016 CoC program competition, CoCs may reallocate to create permanent supportive housing for chronically homeless individuals and families, including individuals with unaccompanied youth; rapid rehousing for individuals and families, including unaccompanied youth that are coming directly from the streets, emergency shelters, or are fleeing domestic violence situations, or others that may meet the criteria in the definition of homelessness; dedicated HMIS, or SSO for a centralized or coordinated entry system. Key decisions to consider for reallocating funds – Reallocations should be done whenever the process of reallocation would reduce homelessness. Use CoC approved scoring criteria and reflection of priorities, but in the reviewing process, let scoring criteria work as a process for strategic project placement. Carefully review all projects, including transitional housing for cost effectiveness and performance in ending homelessness. After reviewing data and the unique outcomes related to services for survivors fleeing domestic violence, CoCs may decide that there are lower performing programs that the CoC would like to reallocate. In implementing reallocations of this type, CoCs should ensure they are reallocating to programs that will be dedicated to survivors of domestic violence, and that the reallocation will result in at least as many units of this population. Permanent Housing Bonus - There is an opportunity to apply for the permanent housing bonus which is equal to up to 5% of the CoCs final pro rata need. CoCs may apply for the following types of programs: permanent supportive housing projects that will be fully dedicated to chronically homeless families and individuals; and rapid rehousing projects that will serve families and individuals coming directly from the streets or emergency shelter, including persons fleeing domestic violence. In order to be eligible for bonus projects, CoCs have to demonstrate they have the capacity to reallocate, in one of two ways. First, they must demonstrate they have reallocated a significant share of their projects in recent competition. Or second by demonstrating they have a process in the current competition that encourages reallocation. Strategies for success – Use the performance score card to rank all projects into tiers. Use appropriate metrics to measure the effectiveness and performance of all programs, especially those serving survivors of domestic violence. Make sure coordinated entry processes are being designed that ensure the choice of the people being served, and that all parts of the system are engaged beyond the targeted homelessness resources. Reallocate away from programs that are no longer achieving strong outcomes, are poorly performing, or are otherwise not contributing to the end of homelessness in the continuum of care. Review each application thoroughly to make sure the information is accurate before submitting as a part of the full application. Be able to demonstrate programs are being prioritized according to chronic homelessness for turnover permanent supportive housing units; the Housing First Approach is being implemented across the CoC and the system; and that you are leveraging other means from resources to support stable housing for the people being served. Finally, also demonstrate capacity to prioritize planning and data gathering for the overall CoC process. Strategies to avoid - When reallocating, do not reallocate a little from each project, as this keeps the programs from being effective or providing adequate services; don't apply for projects that are weak; don't rate and rank projects in a vacuum - make sure the process is objective and transparent; and do not leave any money on the table. Helpful resources to aid in the HUD and CoC competition phase were then covered.

Agenda Item 7. Southern Nevada CoC Important Information.
Michele Fuller-Hallauer, Clark County Social Service, reminded the team that Tier II is scored differently than Tier I. Because of the way HUD is breaking out the scoring components of Tier II, the more projects in Tier II, the less the score will be for each of the projects. Last year, if Tier II contained larger projects, they had a more likelihood of being funded, rather than multiple, smaller projects. Because the component of the project ranking, the more projects in Tier II, the more diluted the numbers become, and then the less the overall score for that project becomes in Tier II, when it gets ranked across the nation with other Tier II projects. The team was given a 1-page reminder of items to keep in mind during the ranking

process and a handout on the scoring and ranking process. To recap, the team needs to rank in rank order 1 to 34 for Tier I and Tier II. Tier I is 93% of Continuum's Annual Renewal Demand (ARD) as approved by HUD's Grant Inventory Worksheet (GIW). There have recently been changes that have adjusted the ARD for Southern Nevada's CoC. The Women's Development Center's (WDC) transitional housing program has chosen to **not** execute their contract for 2015, which changes the ARD for the whole community. By removing the $128,474 for that program from the overall ARD, the community's ARD has been reduced to $12,968,681, which changes the 93% for Tier I to $12,060,873.33. Tier II is the difference between Tier I and the ARD, plus the eligible Permanent Housing Bonus amount of $648,484. There are also funds available for reallocation due to a couple of projects that did not come in for renewal, even though the 2015 contracts have been or will be executed. Although those projects did not come in for renewal, that will not affect the ARD. This is money available for reallocation. The projects not coming in for renewal are: New Genesis - $161,596; WDC-Housing Stability for Families-Expansion - $108,158. Information was also taken out of HUD's NoFA around the Tier II and how those projects in Tier II will be scored, so the strongest application can be presented to move forward for Tier II projects. The scoring and ranking process document was then reviewed. It was mentioned that background information is given as well as information regarding the new bonus projects. Information about the project score card would also be covered later by Tauri Royce, BitFocus. The information about ranking was then covered. General information around ranking– the team should use as objective information as possible, taking into account the needs of the community. When ranking, the team should make sure it is done in accordance with the NoFA from HUD. Reallocation can also be done from any project(s) that is not performing or meeting or continuing to meet the needs of the community, if it aids in ending homelessness, as long as it is reallocating to a different rapid rehousing project or permanent supportive housing project. This year's methodology to be used – threshold reviews and threshold scores will be determined by the team based on the scores of the actual application, before project names and agencies are revealed. Planning does not need to be ranked. Part of the CoC Evaluation Working Group and the other Working Groups, and historically with the CoC Board, have ranked the following projects in Tier I: HMIS Expansion; and Safe Haven project, if the needs of the community are being met and have good outcomes. The rank may be made from the scores and adjust the project's ranking for the following reasons: There can be a deviation if there are poor outcomes, but it's likely to result in programs that service the most vulnerable or harder to serve populations, i.e., chronically disabled, mentally ill, etc., to automatically be placed in Tier II based on outcomes, and there is reason to believe those outcomes were not reflected appropriately in the tools that were used. If the scoring is likely to result in a project that fills a critical service gap, and/or community need by being placed in Tier II, the team can discuss whether the project should be placed in Tier I. If 2 projects are ranked at the same level, the following criteria are to be used as tiebreakers: 1. The project's monitoring score; 2. The project's local application score; 3. The project's score on the performance monitoring tool. For reallocation, lower scoring projects, as determined by the application scores and the monitoring scores, may have their funds reallocated to new projects. Projects that choose not to reapply may have their funding reallocated, as well. The team may deviate from the scores and adjust the projects ranking for the same reasons as discussed previously. If poor outcomes cause a project to be put in Tier II, but it is determined those outcomes could be due to something else in the current system and their scores will be adjusted and modified within the next year, and those projects meet the most vulnerable and hard to serve populations, the team could choose to place them in Tier I. Another reason for deviation is if the scoring is likely to result in a project that fills a critical service gap or community need by being placed in Tier II. Ms. Fuller-Hallauer then reminded the team of their role to rank the projects from 1 to 34, to not leave any money on the table, and ensure the CoC has a strong application to be sent to HUD. Once the ranking recommendations are made, it will go to the CoC Board on August 22 for the final decision as to what will go forth on the CoC application. There is an appeals process in place which takes place quickly, as projects are notified tomorrow, August 11, of the team's decision to include them in the recommendations to the board. Appeal requests need to be submitted to www.helphopehome.org by close of business Monday, August 15. The appeal will take place Wednesday morning, August 17. If the appeals team chooses to override the original recommendation, the team will need to reconvene later on August 17. Ms. Fuller-Hallauer stressed to the team that their ranking decisions be the most appropriate decisions and are best for the community; and that the most open and transparent decisions be made. She also reminded the team members that discussions needed to be heard throughout the room for the benefit of the audience and the recording of the meeting, in order to ensure transparency and inclusivity. After recalculating the mean score of all projects, Tauri Royce, BitFocus, determined it to be 151.

Agenda Item 8. 2016 CoC Local Application Scoring and Ranking Process (includes Deliberation).
Michele Fuller-Hallauer, Clark County Social Service, asked the team whether they wanted to consider reallocating any funds from projects that did not come in for renewal. The question was raised as to whether the team was being asked to reallocate funds other than from those projects that did not request a renewal. Ms. Fuller-Hallauer affirmed that in addition to the funds that will be reallocated from projects not seeking to renew, the team needed to determine if there were any other projects they felt should have the funds reallocated. Donna Jordan, Southern Nevada Adult Mental Health Services, raised a concern about a project which scored lower than most other projects. Tauri Royce, BitFocus, stated that without knowing the name of the project, the team can look at the information. The project is a permanent supportive housing project that has 44

beds; $189,409; an application score of 92.25; a performance monitoring score of 47.5 out of 100 points; and an outcomes total of 69.88 out of 100 points. The breakdown of the performance monitoring tool shows the PMV total score of 107 out of 200 points (with the mean score of 151); a utilization of 28.06% out of 100; exit to a permanent destination from a permanent supportive housing of 19.05%; and a recidivism rate of 25%. When asked if the project had been monitored by HUD, Ms. Fuller-Hallauer, stated it had not. A discussion then took place to determine if this project was operating in a successful way. Performance percentage showed the project ranked 20% of serving harder to serve population; but there was 0 reduction in the length of homelessness; 12.50 increase in income; and 15% participation in data. Ms. Fuller-Hallauer also brought to the attention of the team that the Monitoring Working Group identified this program as a program of concern. Emily Paulsen, Nevada Homeless Alliance, asked for clarification of the 0 score. Ms. Fuller-Hallauer stated the project didn't meet the threshold to receive any points. Ms. Jordon asked if the team could compare this project with other projects serving harder to serve populations. Ms. Fuller-Hallauer asked Ms. Royce to show the information for other permanent supportive housing projects applying for renewal, without showing the project names. Ms. Fuller-Hallauer explained that all projects that serve the harder to serve population received a score of 25, with the exception of Project DD which received a score of 20, and Project Q, which received a score of 15. Ms. Royce brought to the team's attention that all permanent supportive housing projects scored high. Ms. Jordon suggested that the project in question is a concern and should be moved to Tier 2, rather than to reallocate the funds, since the project is serving the harder to serve population. Tracy Torrence, Southern Nevada Regional Housing Authority, felt the project should have the funds reallocated. Ms. Fuller-Hallauer clarified that if the project is put into Tier 2 and Tier 2 is not funded, the community loses those funds. Jocelyn Bluett-Fisher, City of Las Vegas, suggested that because there is more demand than money in the community, the funding should be reallocated rather than risking the loss of the funds. Ms. Fuller-Hallauer also interjected that once the application is submitted, money cannot be added to the budget, but it can be reduced, and this information should be kept in mind when considering Project DD. Ms. Fuller-Hallauer then asked Ms. Royce to reveal the project names. Ms. Royce explained adjustments were needed based on the changes discussed. New Crossing Expansion consolidated with New Crossings. Highest ranked were US Vets and Southern Nevada Childs Paradise. The projects below the mean score were Clark County Vivo Housing Project, and WestCare HCCP that had the lowest scoring project. The team was provided a hardcopy of the ranking, when it was requested. Ms. Bluitt-Fisher requested to see the project that did not spend their budgeted funds. Ms. Fuller-Hallauer highlighted the new project, HopeLink; projects not yet in contract, Clark County FUSE and Keeping Families Together; and projects just starting with a contract of less than 1 year, Clark County Vivo Housing Project and The Shade Tree project. All these projects must be included in the 2016 application, or their funding will go away. Vivo had a score of 150 out of 200, which was lowered since they had no performance outcomes. Danyell Cadell, Clark County Social Service, explained that projects starting out were given an average performance by other projects. Ms. Fuller-Hallauer explained that The Shade Tree project only had 2 months of client data in March 2016 at the time of their monitoring. They received an overall score of 131.67 out of 200. She also explained that 5 projects, HMIS, and Safe Haven are not applicable for ranking in the Tier I funding. Ms. Royce expressed that when ranking, the team should take into consideration grant allocation vs. the amount of funding asked for. The team decided to keep HMIS at the top of Tier I. The next decision facing the team was with regards to the 3 new programs, all of which are rapid rehousing programs and had no outcomes or performance scores to take into consideration. The team decided to discuss these programs later in the day. The last project, which did not participate in the local monitoring process, is WestCare Safe Haven. This project was monitored by HUD, is considered as a special project, but must be ranked in order to continue funding. Annie Wilson, Las Vegas Metropolitan Police Department, asked if the project had scored high with HUD. When Ms. Fuller-Hallauer affirmed it had, it was decided to keep the project in the second spot of Tier I. Ms. Paulsen then asked which tier the permanent supportive housing bonus was added to. Ms. Fuller-Hallauer stated it had been added to Tier II, but it does not have to remain there. Ms. Cadell explained that due to the adjustment from HUD, a variance was applied. Ms. Fuller-Hallauer continued to explain that by taking into consideration the funds being requested in Tier I, that The Shade Tree project straddled Tier I and Tier II. It was also brought to the team's attention that based on the scoring and the break off between Tier I and Tier II based on the mean score, all transitional housing projects were in Tier I, all but 1 permanent supportive housing project were in Tier I, and all rapid rehousing projects were in Tier II. As the team was being dismissed for lunch, Ms. Fuller-Hallauer cautioned the audience and agencies to not discuss the ranking with team members. The meeting was then adjourned at 12:05 for lunch. When the meeting reconvened, Ms. Fuller-Hallauer reviewed the team's current ranking decisions thus far: HMIS is number 1, the 3 new projects were placed at the bottom for further discussion later in the day, and Safe Haven was placed as number 2, and a review of the renewal process had started to take place. Ms. Fuller-Hallauer stated that The Shade Tree project is now a N/A and asked Ms. Cadell to explain the process. Ms. Cadell explained that the Monitoring Working Group decided that new projects and projects not contracted for a full year would receive a score of "Not Applicable", or N/A. However, if a project with an N/A is with an agency with another project that had a full year's data, the new project that has less than 1 year of data gets the average of the agency's other projects. The committee then ranked the new project according to the application score. Ms. Fuller-Hallauer further explained that The Shade Tree only has 1 project, and since there are no other projects from The Shade Tree to pull an average from, the project was given an N/A. She asked Ms. Cadell if the Monitoring

Working Group had a recommendation for the team about how to rank those projects with and N/A. Ms. Cadell said the team should consider the projects' application score. Ms. Bluitt-Fisher requested to look at projects that still needed to spend their funds. Ms. Torrence asked if those projects still had time to spend their funds. Ms. Fuller-Hallauer verified that those projects have until the end of the contract to complete their spenddown. Ms. Wilson asked to review the HUD requirements vs. the community needs. Ms. Fuller-Hallauer reiterated that those are some of the things the team needs to look at and take into consideration. Ms. Bluitt-Fisher stated that the criteria is different for new projects compared to renewal projects. Discussion between the team members was held regarding the renewal projects, which tier to rank them in, and which to drop to the bottom. Ms. Paulsen asked for clarification on how fully ranked projects compared to new projects. Ms. Torrence asked about the population in the Women's Development Center reentry. Ms. Paulsen suggested a discussion was needed to look at the community need, the beds available, and the community queue. Ms. Fuller-Hallauer stated that 500 beds are for households without children who have been assessed, but at present there are 0 vacancies. There are also 500 beds for rapid rehousing. Ms. Jordan sked whether the beds at WestCare could be filled, considering they only had a 28% utilization rate. Ms. Fuller-Hallauer stated that the new projects are for families. The census showed 118 families are in need of housing. FUSE and Keeping Families Together are new projects and have not started their contract. Ms. Torrence asked to review the needs of the community and what is required. The team was reminded that they needed to rank the projects for Tier I and then the put the rest in Tier II; review projects currently funded and doing well; then sort by type and then total score. Ms. Fuller-Hallauer stated the permanent supportive housing projects below the mean score are SNAMHS Stepping Stones and Families First. The average score is 154.7. Ms. Jordan asked the average for utilization of beds, and also what greater than 100% meant. Ms. Fuller-Hallauer stated that with regards to the greater than 100%, it is the contracted number of beds. If an agency can get housing at the fair market rate (FMR), and then allows rental savings and therefore, can serve more clients. Ms. Jordan asked if utilizing beds is serving more, and then requested to see those projects with a utilization rate of 100% or more. Ms. Paulsen suggested keeping the following programs in Tier I: Clark County New Beginnings, HELP them Home, A New Start, Children First, Families First, Permanent Housing for Veterans II. Ms. Jordan asked what was taken into consideration for the total score. She was informed that the monitoring/utilization score, application score, performance measures, outcome totals, and increase or service to which population. There was an in depth discussion regarding total score and utilization score. Ms. Fuller-Hallauer mentioned that with the ranking method the team had used, the utilization score was being counted twice, since it is was being taken into consideration separately, but also included in the total score. The team then suggested the ranking go back to using the 151 mean score for determining Tier I and Tier II rankings. Ms. Fuller-Hallauer also suggested that if only permanent supportive housing is in Tier I and rapid rehousing and transitional housing are in Tier II, then the data is being skewed. If projects with a score greater than 151 are included in Tier I, then those projects with N/A would need to be taken out of Tier I. A discussion ensued about keeping projects that are not currently in a contract, so as not to penalize those projects. The team then asked for the cutoff amount for Tier I and was informed it was $1,019,668.67. Ms. Fuller-Hallauer then brought to the team's attention that 4 projects do not have a complete score and they need to determine how to evaluate those projects. Ms. Paulsen suggested comparing application scores with another comparable program with similar scores to move up, but then bumping the others to Tier II. Tameca Ulmer, Clark County Social Service, stated that depending on the housing category, programs should compete against each other. Ms. Bluitt-Fisher suggested using the average per program to determine the top projects. Ms. Torrence suggested using reallocated funds for new projects. Ms. Cadell then reviewed with the team the funding available for new projects as follows:

     Reallocation from non-renewing projects - $269,754
     Permanent housing bonus   - <u>$648,484</u>
     Total available   - $918,238

The amount requested for new project is $903,488, which still requires an additional $14,750. These projects are Hope Link, Salvation Army and Lutheran Social Services. Ms. Jordan suggested that the new projects should be funded with reallocation funds and the permanent housing bonus. The team then discussed the possibility of ranking each project according to the type of housing, i.e., determining the average for all permanent supportive housing projects, determining the average for all rapid rehousing projects, and determining the average for all transitional housing projects. It was then determined to put WestCare at the bottom for now and discussing its ranking later. When asked how the amount for the permanent housing bonus was determined, the team was reminded that the Permanent Housing Bonus = ARD – 93% of the ARD. Ms. Fuller-Hallauer suggested that any type of renewal application be placed in Tier I. The team then discussed the individual new projects. It was determined that there will be an additional 158 beds available with the new projects, but household size and budget applications would be taken into consideration. The Salvation Army project will bring on 15 one bedroom units for households without children. Lutheran Social Service project would have 5 one bedroom units for households without children, 15 two bedroom units for households with families, 1 one bedroom unit, 8 two bedroom units, 10 three bedroom units, and 1 four bedroom unit. These units would be to house 28 households without children and 31 households with families. Ms. Jordan asked if HopeLink could serve families to increase the budget. Ms. Fuller-Hallauer stated that HopeLink is specifically serving the LGBTQ population. Ms. Paulsen asked if Salvation Army could increase their budget

since they scored higher. Ms. Fuller-Hallauer stated that to maximize the bonus, one or more of the new projects must equal the permanent supportive housing bonus, which would be Hopelink and Salvation Army. Ms. Bluitt-Fisher asked to see the breakdown of cost per client for each of the new projects. Those breakdowns were as follows: Salvation Army - $13,333.33 per client; HopeLink - $5145.24 per client; and Lutheran Social Service - $4,598.10 per client. The team asked the representative of Lutheran Social Service if the agency could increase their budget by $14,800. Marisa Cervantes, Lutheran Social Service Program Director, stated her agency could increase their budget. Upon further review, it was discovered that the total of HopeLink and Lutheran Social Service would be greater than the permanent housing bonus. After more team discussion, E. Lavonne Lewis, Salvation Army, was asked to reduce their budget to be in line with the other new projects' budget, and increase the number of clients served which would reduce the cost per client breakdown. Ms. Lewis agreed to reduce the budget and increase the number of clients served. Ms. Bliett-Fisher asked if the change requested of the new project agencies would be part of the contract, to which Ms. Fuller-Hallauer assured the team to have eyes on the eSnaps application, which is the contract. The team then discussed the Tier II ranking of the projects based on the number of projects in Tier II. It was then suggested that the order of the rapid rehousing projects should be changed according to the application score. Ms. Fuller-Hallauer recapped the team's ranking decisions. For Tier I, HMIS is listed as number 1 due to the critical nature of the program, with Safe Haven listed as number 2 based on the program's unique and critical nature. Tier I involves permanent supportive housing that scored average and above, rapid rehousing that scored average and above, transitional housing that scored average and above, 3 new projects and 1 renewal with an N/A total score. Added to Tier I based on the money cutoff were permanent supportive housing bonus money that explored new projects and identified the highest scored applications and how to utilize the money. Two projects were identified, Salvation Army and Lutheran Social Services, with budget adjustments. The team asked Lutheran Social Services to accept an additional $14,800 in funding, and asked Salvation Army to decrease their budget by $69,854, and then to increase it by $16,234, which was taken from HopeLink and Lutheran Social Services. Also placed in Tier I was SNAMHS Stepping Stones, which is a straddle project, and is included in Tier II with 2 other projects. Ms. Fuller-Hallauer then told the ranking and amount of funding requested for each project, which is as follows:

TIER I -- HMIS Expansion – Clark County - $504,900; Safe Haven – WestCare - $329,612: Rapid Rehousing – Salvation Army - $269,854; Rapid Rehousing – Lutheran Social Services of NV - $285,988; HopeLink Supportive Housing Program – HopeLink of Southern NV - $362,346; Re-entry Housing Program – Women's Development Center - $121,981; Housing Stability for Families Program – Women's Development Center - $202,989; Permanent Housing for Veterans with Disabilities - US Vets - $120,781; Paradise – Southern Nevada Children First - $240,709; HELP them HOME – HELP of Southern NV - $407,980; Chronically Homeless Aspiring for Maintenance 2 – US Vets - $218,487; A New Start – HELP of Southern NV - $583,793; A Place Called Home – Southern Nevada Children First - $193,208; Permanent Housing for Veterans with Disabilities 2 – US Vets - $662,933; The Vivo Housing Project – Clark County - $1,601,349; FUSE – Clark County - $1,322,339; New Beginnings – Clark County - $1,380,976; Chronically Homeless Aspiring for Maintenance 1 – US Vets - $167,645; Healthy Living – Clark County - $565,540; Moving Forward – Southern Nevada Children First - $175,107; Keeping Families Together – Clark County - $255,784; NPHY Independent Living – Nevada Partnership for Homeless Youth - $226,210; Housing Opportunities Mean Empowerment (H.O.M.E.) – The Shade Tree - $195,200; Veterans in Progress (VIP) – US Vets - $122,854; Shannon West Homeless Youth Center – HELP of Southern NV - $210,282; Dual Success – Southern Nevada Adult Mental Health Services - $412,553; Crossings – St. Jude's Ranch - $344,610; Families First – SNAMHS - $100,328; Stepping Stones – SNAMHS (Tier I portion) - $474,535.

TIER II – Stepping Stones – SNAMHS (Tier II portion) - $1,034,369; New Crossings – St. Jude's Ranch - $332,464; Homeless Coordinated Care Project (HCCP) – WestCare - $189,409.

A discussion ensued showing that Tier I had no prioritization order, 3 new projects were ranked among each other, but not among the other applications and Tier II contained the lowest in the project type. It was determined that Tier I should be ranked on total score; then review the application score for the rapid rehousing new applications and the 1 rapid housing renewal and rank them within. When the funding amounts were added together, there was a $9.67 discrepancy. Because of the lateness in the day, the team was given the option to stay and find the discrepancy or to return the following day. The team decided to stay and hammer out any details and discrepancies. Ms. Jordan suggested putting the new projects at the bottom of Tier I, above the straddle project. Ms. Bluitt-Fisher stated she felt the 3 new projects were a priority and should be moved to the top to ensure funding rather than risk losing those funds. Catherine Huang Hara, Clark County Social Service, shared her concern that if the bonus was not given because Tier II not funded, then other projects would lose out. Ms. Jordan then suggested putting the renewal project with N/A below projects with the same application score. All other projects after the rapid rehousing renewal N/A project did not have a higher application score and scored below the mean/average score. That way the methodology used in the ranking process would be acceptable to HUD. Ms. Paulsen suggested reallocating youth funds and voiced a concern that HUD's priorities for ranking have been taken into consideration based on clients served.

Agenda Item 9. Deliberation.
This item is included in Agenda Item 8.

Agenda Item 10. Board Presentation.
The group's recommendations for ranking and inclusion into the CoC Consolidation Application will be presented to the Southern Nevada Homelessness CoC Board on Monday, August 22, 2016 at the offices of United Way of Southern Nevada.

Agenda Item 11. Next Steps/Action Items.
Michele Fuller-Hallauer, Clark County Social Service, recapped the ranking of the projects in Tier I and Tier II. The suggested ranking of the CoC Application will be presented to the CoC Board, for the board to determine any discrepancies. If the board unanimously accepts the ranking, any projects that are defunded may appeal; however, no projects were defunded. New projects had their money lowered and cannot appeal. It was then brought up to the team that a presenter to the CoC Board needed to be chosen. The team moved that Ms. Fuller-Hallauer should present the team findings to the board.

Agenda Item 12. Public Comment.
No public comments were made.

The meeting adjourned at 5:35 p.m.