

2025 COC NOFO [VTBOS]
Proposed - New HUD CoC Program
“VSHA Transitional Housing Program (THP)”

Subject: We are seeking responses from Vermont non-profit organizations who are interested in partnering with the VT State Housing Authority on a new CoC Transitional Housing Program (estimated 3-8 project sites) serving medically vulnerable adults.

Contact:

Vermont State Housing Authority
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Project Type: TRANSITIONAL HOUSING – up to 24 months of assistance in units leased (entire/partial building or scattered-site) by a subrecipient who would provide services (case management/service planning & coordination, vocational, health services, housing search, etc.) to medically vulnerable households experiencing homelessness.

Examples of Housing Types:

- Medical Respite/Recuperative Care
- Mental Health Transitional Housing
- Recovery Residences
- Stabilization Beds for People Experiencing Unsheltered Homelessness including, but not limited to, older adults
- Other comparable temporary supported housing

Examples of Provider Types:

- Certified Community-Based Integrated Health Centers
- Designated Agencies, Special Status Agencies
- Substance Use Treatment Providers
- Hospitals/Federally Qualified Health Centers
- Community Action Agencies
- Homeless Service Providers
- Other comparable service providers

Examples of Partner Types:

- Coordinated Entry Agencies
- Law Enforcement (Situation Tables, Street Outreach)
- Agencies on Aging
- Peer & Advocacy Organizations
- Housing Providers
- Other related providers

General Description: The Vermont State Housing Authority (VSHA) proposes a new THP project that would be funded by the HUD Continuum of Care Program and serve households who are **medically vulnerable** AND **experiencing homelessness**.

VSHA is seeking to collaborate with multiple local service agencies [subrecipients] who would operate leased project sites [transitional housing] throughout the VT BoS geographic area and provide supportive services funded by match from other sources (Medicaid Case Management Billing, Fee for Service, etc.), as well as possible CoC funds. Eligible households would be required to participate in services, including vocational training and accessing employment options, to achieve economic independence and/or long-term assistance (i.e., assisted living/nursing home, permanent voucher, etc.).

VSHA would act as the recipient and administrator to provide reimbursement of CoC expenses, ensure eligible costs/documentation, provide technical assistance and oversee grant compliance/performance/quality control. VSHA would determine initial eligibility of program participants and determine Rent Reasonableness and Housing Quality Standards/NSPIRE compliance for leased buildings and/or units. VSHA would be responsible for administering federal portals (VT BoS CoC Project Ranking Process, ESNAPS, eLOCCS, Sage, GIW, etc.).

Subrecipients would act as the local project site/program administrator, as well as service provider/case manager. Subrecipients would provide a match that must equal at least 25 percent of the total grant request (Supportive Services, Operating Budget, Rural Costs, Project Administration), *excluding* the Leasing budget line item. Subrecipients would support participants in the development of Individual Service Plans with a primary goal of economic independence and transitioning to permanent housing. Subrecipients would enter participant data into the CoC-approved Homelessness Management Information System/HMIS (Bit Focus - Clarity) and complete/submit reports and other grant requirements as requested by VSHA/HUD. VSHA Transitional Housing sites must coordinate with local street outreach projects and receive referrals from local Coordinated Entry.

Geographic Area: A VSHA CoC THP project must be located within the VT Balance of State geographic area, which includes all VT counties – *excluding Chittenden*. An eligible project must be located close to mainstream services and employment opportunities; sites will be selected based upon local need, provider expertise and capacity, and partnerships.

Funding Amount: This is FFY2025 CoC funding and dependent upon approval by the VT BoS CoC and HUD, possibly **\$2,500,000** total (AMOUNT IS YET TO BE DETERMINED).

If awarded, VSHA will enter into subawards with individual subrecipient organizations for local VSHA THP project sites. Each project site will have a budget that is pro-rated based upon the number of participants served/units and other eligible CoC-funded expenses.

Projects may be renewable on an annual basis through the CoC Program Notice of Funding Opportunity (NOFO) Competition.

Local Project Site Budget– *ESTIMATED* (amounts/activities may vary) = \$319,000

Leasing: \$160,000

10/1-bedroom apts x 2025 HUD FMR \$1,082/unit – Washington County *example only*)

- 12 Months of Lease Amount = \$129,840
- 2 months of security deposit x 10 units x \$1,082 = \$21,640
- Conducting Rent Reasonableness & HQS/INSPIRE unit inspections = \$8,520 (*VSHA*)

Operating Costs: \$65,000 or less

- Utilities not covered by the master lease
- Maintenance and repair for a property or unit's upkeep, including structural
- Furniture (office/apartment) that remains with the project; mattresses are also eligible costs, even if they remain with the program participant
- Office equipment and appliances that remain with the project
- Security for a housing if 50%+ of the units or building area are CoC-funded
- Staff time spent carrying out the above eligible operating activities

Supportive Services: \$65,000 or less

- Case Management (salary, fringe, mileage, phone, etc.)
- Participant supports - Food, Dental Care, Child Care, Transportation, etc.

Project Administration: \$29,000

- Up to 10% of the above CoC funding
- Costs related to overall program management, not participant services
- Shared 50/50 between grant recipient (*VSHA*) and subrecipients

25% Match Requirement: \$50,000 – example based upon above CoC costs, minus leasing

- Substance Abuse Treatment Services
- Outpatient Health Services
- Mental Health Services
- Other eligible CoC service match funds

Targeted Populations:

1. Individuals and/or households referred by the CoC Coordinated Entry (preferably as part of a Street Outreach Strategy) and meet at least one of the following:

- a. Category 1 “Literal Homelessness”- lacks a fixed, regular, and adequate nighttime residence
 - i. Has a primary nighttime residence that is a public or private place not meant for human habitation; **or**
 - ii. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); **or**
 - iii. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

AND/OR

- b. Category 2 “Imminent Homelessness”- An individual or family who will imminently lose their primary nighttime residence, provided that:
 - i. Residence will be lost within 14 days of the date of application for homeless assistance; *and*
 - ii. No subsequent residence has been identified; *and*
 - iii. The individual or family lacks the resources or support networks needed to obtain other permanent housing.

Note: Includes individuals and families who are within 14 days of losing their housing, including housing they own, rent, are sharing with others, or are living in without paying rent.

AND/OR

- c. Category 4 “Fleeing Domestic Violence” –
 - i. Is fleeing, or is attempting to flee, domestic violence; and
 - ii. Has no other residence; and
 - iii. Lacks the resources or support networks to obtain other permanent housing

Note: “Domestic Violence” includes dating violence, sexual assault, stalking, and other dangerous or life-threatening conditions that relate to violence against the individual or family member that either takes place in, or him or her afraid to return to, their primary nighttime residence (including human trafficking).

AND

2. *Medically Vulnerable Populations* – such as individuals with a history of frequenting emergency rooms and inpatient hospital settings with one or more of the following conditions:
 - a. Chronic illnesses like diabetes, cardiovascular disease, acute respiratory tract infections, traumatic brain injuries, wound care, etc.
 - b. Acute Psychiatric Disorders
 - c. Substance Use Disorders

AND

3. *Household Composition* – one or more of the following: Individuals, Couples, and/or Adult(s) with children

Leasing: Subrecipients will lease entire or partial buildings or individual units, from unaffiliated property owners, with lease costs (*not to exceed 100% HUD Fair Market Rent*) that are comparable to unassisted space, as determined by VSHA staff. Utilities, repairs, furniture and appliances may be paid with CoC Operating Costs, if not included in lease.

Subrecipients may pay the landlord up to 2 months of security deposit and an advanced payment of last month's rent, in addition to first month's rent. Participants will enter into Occupancy Agreements with Subrecipients, who may require participants to pay Occupancy Charges and rent (in accordance with 578.77), may be used as match.

Funds may not be used for units or structures owned by the recipient (or related organization – subrecipient, etc.) unless HUD authorizes an exception. The lease of a unit or structure must be between the subrecipient and the owner (not the participant).

Supportive Services: The majority of services – *such as mental health, substance treatment, or other healthcare* - will be provided by the subrecipient in the form of a match from other sources (i.e., Medicaid Case Management Billing, Fee for Service, grants, private funds, other eligible).

Otherwise, VSHA THP may reimburse for some services not covered by the match: case management, food, dental care, childcare, transportation, aftercare, etc.

HUD CoC Program Interim Rule -

<https://www.ecfr.gov/current/title-24/subtitle-B/chapter-V/subchapter-C/part-578>