FREDERICKSBURG REGIONAL
CONTINUUM OF CARE

Funding Committee Meeting Agenda
March 5, 2025

1. **Call CoC Meeting to Order**

2. **Determination of Quorum**

3. **Approval of the March Funding Committee Agenda** (ACTION ITEM)

4. **Approval of Minutes of the February Funding Committee Meeting** (ACTION ITEM)

5. **Public Comment** - *Comments and questions from members of the public are welcome at this time. Please keep comments to 3 minutes.*
    a. **Public Comment in Person**
    b. **Written Comments Received**

6. **Preparing for Year 2 VHSP Application**

7. **Housing Location Discussion**
    a. **Staff Recommendation**
    b. **Process for Year 2 VHSP application**

Next Meeting: April 2, 2025 at 11AM at GWRC

FREDERICKSBURG REGIONAL
CONTINUUM OF CARE

Funding & Performance Committee

Date: February 5, 2025
Time: 11:00AM
Location: Fredericksburg Library

MEETING CALLED BY	Sam Shoukas (GWRC)
TYPE OF MEETING	Monthly Meeting
NOTE TAKER	Megan Samples
ATTENDEES	**Members** Bailey Thompson (City of Fredericksburg) Brenda McKinney (Haven for Heros) Clay Mihoulides (Chrismarr Properties) Wendy Sneed (Caroline County) (Virtual) Jonathan Franklin (King George DSS) Michelle Patton-Swisher (Spotsylvania County Schools) **Staff** Megan Samples (GWRC) Sam Shoukas (GWRC)
ABSENT	

DISCUSSION	

Call to Order

Approve February 5, 2025 Funding Committee Meeting Agenda

- Michelle Patton-Swisher motioned to approve February 5, 2025, meeting agenda. Bailey Thompson seconded the motion. The motion carried unanimously.

Approve January 2025 Funding Committee Meeting Minutes

- Jonathan Franklin motioned to approve January 2025 meeting minutes. Clay Mihoulides seconded the motion. The motion carried unanimously.

Public Comment

- No public comments were received for this meeting.

HUD CoC Program Allocation

- GWRC staff, Sam Shoukas provided an overview of the HUD CoC Program Allocation breakdown. The group discussed potential funding changes due to program review under new administration.

VHSP Spending Update

- GWRC staff, Sam Shoukas provided an overview of current spending for VHSP from DHCD.

Federal Grant Freeze

- GWRC staff provided updates on the Federal grant freeze under new administration and discussed potential funding challenges associated with future freezes. The CoC is currently evaluating community impact of current and future funding freezes across the CoC.

Next Meeting: Wednesday, March 5, 2025 at 11AM

Action Items	

FY24 FRCoC Application for VHSP Funding

Please complete a separate application form for each outreach, emergency shelter operations, rapid re-housing, and targeted prevention project.

Application Information

Applicant
Applicant Name:
Project Name:

Type of Application (select one):
☐ Renewal (requesting level or reduced funding for existing project)
☐ Renewal with Expansion (requesting increased funding for existing project)

Project Type (Select one) *Submit a different application for each program type.*
☐ Coordinated Entry
☐ Street Outreach
☐ Targeted Prevention
☐ Emergency Shelter
☐ Rapid Rehousing

Line-Item Budget

Please complete line-item budget below. Budget amounts should reflect the VHSP request only.

> *Note: Renewal projects can apply for renewal HMIS and Administration amounts up to the grantee's total FY23 HMIS and Administration amounts regardless of 5% caps. HMIS and Administration amounts across all FY24 project applications will not exceed the allowable 5% caps across the community.*
>
> *Expansion projects can apply for an HMIS expansion up to the amount where the combined renewal/expansion HMIS request is 5% of the combined renewal/expansion project subtotal and an Administration expansion up to the amount where the combined renewal/expansion Administration request is 5% of the combined renewal/expansion project subtotal.*

	Renewal Amount	Expansion Amount
Coordinated Entry/Assessment		
Hardware/Software		
Maintenance		
Occupancy Costs		
Salaries		
Supplies		
Travel		
Utilities		
Other (specify)		

Subtotal		
HMIS (up to 5% of subtotal)		
Computer Costs		
Fees and Licenses		
HMIS Staffing		
Training		
Other (specify)		
Administration (up to 5% of subtotal)		
Administration		
Total		

	Renewal Amount	**Expansion Amount**
Outreach		
Case Management		
Limited Support Services		
Other (specify)		
Subtotal		
HMIS (up to 5% of subtotal)		
Computer Costs		
Fees and Licenses		
HMIS Staffing		
Training		
Other (specify)		
Administration (up to 5% of subtotal)		
Administration		
Total		

	Renewal Amount	**Expansion Amount**
Emergency Shelter Operations		
Case Management		
Limited Support Services		
Maintenance		
Rent		
Security		
Supplies		
Utilities		
Other (specify)		
Subtotal		
HMIS (up to 5% of subtotal)		
Computer Costs		
Fees and Licenses		
HMIS Staffing		
Training		
Other (specify)		
Administration (up to 5% of subtotal)		
Administration		

Total		

	Renewal Amount	**Expansion Amount**
Rapid Re-Housing		
Housing Search & Placement		
Housing Stabilization Case Management		
Housing Stabilization Financial Assistance		
Housing Stabilization Services		
Rent Arrears		
Rent Assistance		
Service Location Costs		
Veteran Housing Stabilization Financial Assistance		
Veteran Rent Arrears		
Veteran Rent Assistance		
Subtotal		
HMIS (up to 5% of subtotal)		
Computer Costs		
Fees and Licenses		
HMIS Staffing		
Training		
Other (specify)		
Administration (up to 5% of subtotal)		
Administration		
Total		

	Renewal Amount	**Expansion Amount**
Targeted Prevention		
Housing Search & Placement		
Housing Stabilization Case Management		
Housing Stabilization Financial Assistance		
Housing Stabilization Services		
Rent Arrears		
Rent Assistance		
Service Location Costs		
Subtotal		
HMIS (up to 5% of subtotal)		
Computer Costs		
Fees and Licenses		
HMIS Staffing		
Training		
Other (specify)		

Administration (up to 5% of subtotal)		
Administration		
Total		

Match

Please indicate sources of match. Match must equal 25% of requested amount and must be spent on eligible VHSP expenses, but does not need to be of the same VHSP Category as the request. Match must be from local or private sources. If the project is requesting partial or full waiver of the match requirement, please explain.

Type	Source	VHSP Category	Amount
Choose an item.		Choose an item.	
Choose an item.		Choose an item.	
Choose an item.		Choose an item.	

Narrative Responses

1. **Certify that the project will adhere to the *FRCoC Coordinated Entry Policies & Procedures,* including the following requirements of the document:**

   ☐ Follow the Housing First model

   ☐ Participate in the FRCoC Coordinated Entry Process and/or the Victim Service Coordinated Entry Process (including coordinated assessment for shelter/prevention and prioritization for rapid re-housing)

   ☐ Adhere to established project standards (including *FRCoC Rapid Re-Housing Policies & Procedures*)

   ☐ Collect data through HMIS or a comparable database

2. **Please indicate the breakdown of household types targeted by this project:**

	Renewal	Expansion
Households with Children	%	%
Households without Children	%	%
Total	**100%**	**100%**

3. **Provide a description that addresses the entire scope of the proposed project.** (Character Limit: 3,000)

4. **If renewal funding is being requested, explain how the project continues to meet a community need. If expansion funding is being requested, explain how the additional funds will increase system capacity and justify the community need for additional capacity. Additionally, please use the table below to provide data that supports your response.** (Character Limit: 3,000)

5. **Describe any significant changes in your application and programming since your FY23 application. Include leadership, staffing, and programming changes as well as point-in-time count data, trends, and any other information you would like to share with the CoC.** (Character Limit: 3,000)

6. **Does the project anticipate fully expending 100% of FY23 funding? If no, explain (Character Limit: 1,000)**
   ☐ Yes ☐ No

7. **Are there any unresolved monitoring or audit findings for any grants operated by the applicant or potential subrecipients? If yes, please explain.** (Character Limit: 1,000)

   ☐ Yes ☐ No

Fredericksburg Regional Continuum of Care
FY23 VHSP Post Allocation Change Form

Agency:
Agency Contact:
Title:
Phone:
Email**:**

Reallocation Determination:

☐ I do not wish to make any changes and accept the allocation as presented.

☐ I wish to reduce or eliminate a project's VHSP allocation as other funding for the project has been secured that can replace all or part of the requested VHSP funding.

☐ I wish to reduce or eliminate a project's VHSP allocation as the project is partially funded and not viable at the partial amount.

☐ I wish to reduce or eliminate a project's VHSP allocation as the agency is no longer able to carry out the proposed project.

☐ I wish to request allocation changes to projects due to COVID-19 and funding needs.

Project Allocations Change Requests

	Initial Allocation	Requested Allocation
Coordinated Entry	$	$
Target Prevention	$	$
Street Outreach	$	$
Emergency Shelter	$	$
Rapid Rehousing	$	$
HMIS	$	$
Administration	$	$
CoC Planning	$	$

Narrative Responses

1. **Briefly describe any changes requested above. Include reasons for the changes, including current need, and any changes in the number of households to be served due to program changes.**

2. **If changes requested are due to COVID-19, briefly describe how changes will support the community's COVID-19 response.**

3. **Describe how programs requesting reduced or eliminated funding will be impacted.**

4. **Describe how programs requesting increased funding will be impacted.**