

Release Date: November 25, 2025



The East St. Louis/Belleville/St. Clair County Continuum of Care (IL-508) announces the opening of the FY 2025 Local Continuum of Care Competition and the availability of federal funding through the U.S. Department of Housing and Urban Development (HUD) FY 2025 Notice of Funding Opportunity (NOFO).

The CoC welcomes applications from all eligible nonprofit organizations, including faith-based organizations and agencies new to the CoC Program.

Eligible New Project Types

The CoC will consider new projects in the following categories:

- Transitional Housing
- Street Outreach
- HMIS Expansion
- Support Services Only

In addition, new DV bonus projects may be submitted to serve people fleeing domestic violence, dating violence, sexual assault, or stalking. *These projects must be Rapid Re-Housing, Transitional Housing or Coordinated Entry.*

All prospective applicants are strongly encouraged to read the FY 2025 NOFO in full before beginning an application.

- Click [here](#) to access HUD's CoC Competition webpage and download the FY25 NOFO
- Click [here](#) to access local CoC competition info (applications, scorecards and more)

New Project Applicants: Organizations seeking to apply for new funding must:

1. Complete the local "New Project Application" using the instructions provided in the attached packet
2. Submit a full application in HUD's e-snaps system no later than 7 days after the application is available.

Renewal Project Applicants: Organizations applying for renewal funding must:

Renewal applicants must:

1. Complete the local "Renewal Project Application" using the attached instructions
2. Submit the required e-snaps renewal application no later than 7 days after the application is available.

The deadline for application submission is December 12th 2025. Late or incomplete submissions cannot be considered.

HUD Requirements and Threshold Standards

Please note the following HUD requirements for all applicants:

- The Rank & Review Committee must verify that each project meets HUD threshold standards prior to ranking.
- To be accepted, a project must:
 1. Be eligible under the HEARTH Act and the FY 2025 NOFO
 2. Demonstrate clear organizational capacity
 3. Demonstrate need for the project
 4. Participate fully in Coordinated Entry and HMIS (or a comparable database for VSPs)
- Individuals, for-profit and unincorporated organizations are not eligible to apply.
- Questions may be directed to cfernandez@pathwaysmisi.org



An informational meeting to review the requirements of the CoC Local Competition will be held on **Monday, December 1, 2025, at 2:00 pm CST**. The link to join the meeting is here <https://us06web.zoom.us/j/85246337141>

To ensure the most effective use of federal resources, the CoC retains the authority to request modifications to a project's configuration following submission. Any adjustments will be made in consultation with the project applicant to ensure the revised project best meets federal priorities and community needs.

Project Ranking Criteria

The St. Clair County CoC (IL-508) FY 2025 Ranking Tools are modeled after the HUD CoC Program Project Merit Review. Recommended by the CoC Rank and Review Committee and approved by the Executive Committee, the tools use objective, performance-based scoring criteria approved by the CoC to determine the extent to which project outcomes address federal and local policy priorities. HUD has six national priorities:

- Ending the Crisis of Homelessness on Our Streets
- Prioritizing Treatment and Recovery
- Advancing Public Safety
- Promoting Self-Sufficiency
- Improving Outcomes
- Minimizing Trauma

Renewal Project Rating Breakdown

- **Objective Criteria (46 points, 54% of total score)**
 - Exits to Unsubsidized Housing (8 points)
 - Increased Employment Income Leavers and Stayers (8 points)
 - Increased Non-Employment Income Leavers and Stayers (6 points)
 - Returns to Homelessness (4 points)
 - Percentage of Clients in PSH or RRH over the age of 55 (6 points)
 - Percentage of Clients with Physical Disability (5 points)
 - Financial Management (5 points)
 - Adherence to Coordinated Entry Protocols (4 points)
- **Project Design (36 points, 42% of total score)**
 - Treatment and Recovery Integration (10 points)
 - Required Service Participation (10 points)
 - Healthcare/Mainstream Linkages (10 points)
 - Law Enforcement Coordination (6 points)
- **Monitoring Status (2 points)**

New TH Project Rating Breakdown

- **Performance Measures (16 points, 25% of total score)**
 - Self-sufficiency and Exits to Unsubsidized Housing (5 points)
 - New or Increased Income and Earned Income (5 points)
 - Mainstream Benefits/Other Income (5 points)
- **Project Design (46 points,**
 - Treatment and Recovery Integration (15 points)
 - Required Service Participation (15 points)
 - Healthcare/Mainstream Linkages (10 points)
 - Law Enforcement Coordination (6 points)
- **Project Capacity (18 points, 13% of total score)**
 - Experience (8 points)
 - CoC Engagement (2 points)
 - Effective Budgeting (8 points)

New Street Outreach Project Rating Breakdown

- **Performance Measures (16 points, 25% of total score)**
 - Exits to Unsubsidized Housing (5 points)
 - New or Increased Income and Earned Income (5 points)
 - Mainstream Benefits/Other Income (5 points)
- **Project Design (48 points, 75% of total score)**
 - Strategy to Serve People with Histories of Unsheltered Homelessness (15 points)
 - Effectiveness in Helping People Exit Unsheltered Homelessness (10 points)
 - Leveraging Mainstream Resources (15 points)
 - Law Enforcement Coordination (8 points)
- **Project Capacity (18 points, 28% of total score)**
 - Experience (8 points)
 - CoC Engagement (2 points)
 - Effective Budgeting (8 points)

IL-508 East St. Louis/Belleville/St. Clair County Continuum of Care 2025 CoC Application Scoring and Rating Criteria

oriented community process for the solicitation, objective review, ranking and selection of project applications for inclusion with our CoC Collaborative Application package we submit to the US Department of Housing and Urban Development.

To score Continuum of Care project applications, the CoC Ranking and Review panel will use information from the Project Applicant Questionnaire, as well as relevant information from other sources, including but not limited to HMIS, the Coordinated Entry System, CoC Project Applications, SAGE, and Agency Annual Performance Reviews. The Ranking and Review panel will forward the results of the project scoring to the CoC's Executive Committee. Using the defined scoring factors, as well as HUD's CoC rules, regulations and objectives and local objectives, the Committee will make a

FY2025 CoC Competition – Renewal & New Project Score Sheet Overview

Purpose of This Workbook:

- Evaluate projects using standardized metrics aligned with the FY2025 NOFO.
- Ensure scoring reflects required services, treatment integration, and coordination with law enforcement.
- Support data-driven, defensible funding decisions.

Contents:

1. Renewal Project Score Sheet – Evaluates performance, HMIS data, compliance, monitoring, and outcomes.
2. New Project Score Sheet – Evaluates project design, applicant experience, readiness, service structure, treatment integration, and partnerships.

How to Use the Score Sheets:

- Each metric includes max points and a rubric defining full, partial, and minimal points.
- Score based only on evidence provided in the application.
- Use Notes fields to justify scoring.
- Totals calculate automatically.

Reviewer Guidance:

- Apply rubrics consistently.
- Do not assume missing information.
- Ensure required elements for the project type are included.
- Use verified HMIS, APR, and monitoring data for renewal scoring.

Renewal Project Evaluation Tool

Category	Description	Metric	Points	Possible Score	Score
Treatment & Recovery Integration (Section V., pg. 77-80)	Availability and quality of behavioral health, Substance Abuse Disorder, and recovery services integrated into the project.	MOUs with off site behavioral health/medical providers.	5	10	
		On-site or partnered treatment services (mental health, Substance Abuse Disorder, Medically-Assisted Treatment)	10		
Required Service Participation (Section V. pg. 80)	Clarity and enforcement of required services and engagement expectations for participants.	Engagement in supportive services is completely voluntary.	0	10	
		No clear expectations evident in policy documents	3		
		Service participation is expected or recommended. Services are available but not clearly structured as required.	5		
		Written occupancy agreements explicitly require service participation. Requirement applies to all participants with clear expectations spelled out	10		
Healthcare/Mainstream Linkages (Section V., pg. 84-85)	Strength of partnerships and referral pathways to healthcare, Medicaid, Workforce and Mainstream Benefits.	The project references general collaboration with housing or healthcare providers but provides no concrete documentation, and the connections offer limited or	2	10	
		Partnerships are supported primarily by MOUs or narratives, indicating access to housing or healthcare resources, but commitments lack specificity, quantification, or firm documentation	5		
		The project demonstrates at least one meaningful Letter of Commitment plus additional documented partnerships that offer significant housing or healthcare support	10		
Law Enforcement Coordination (Section V., pg. 86-87)	Formalized protocols and working relationships with law enforcement and first responders.	The project shows little to no evidence of working with law enforcement or first responders, with no documented protocols	2	6	
		The project demonstrates some established working relationships with law enforcement or first responders, supported by basic documentation or consistent informal collaboration	4		
		The project provides formal protocols or agreements showing active collaboration with law enforcement and first responders, including referral pathways, and shared engagement practices.	6		
Exits to Unsubsidized Permanent Housing (Section V., pg. 71-72)	HMIS-verified rates of exits to unsubsidized permanent housing based on APR Q23a/b.	<40%	2	8	
		40%-59%	4		
		60%-79%	6		
		80%-100%	8		
Returns to Homelessness (Section V., pg 72-73)	SPM Measure 2 results showing how often households return to homelessness after exit.	<40%	1	4	
		40%-59%	2		
		60%-79%	3		
		80%-100%	4		
Income/Employment Growth (Section V., pg. 73-74)	HMIS APR data (Q19–Q20) reflecting increases in earned income.	<40%	2	8	
		40%-59%	4		
		60%-79%	6		
		80%-100%	8		
Income/ Non Employment Growth (Section V., pg. 74)	HMIS APR data (Q19–Q20) reflecting increases in non-earned income.	<40%	1	6	
		40%-59%	2		
		60%-79%	4		
		80%-100%	6		
Client Demographic Age (Section V., pg. 61)	% of clients in Permanent Housing (PSH or RRH) who are 55 years of age or older	<40%	2	6	
		40%-59%	3		
		60%-79%	4		
		80%-100%	6		

New Project Evaluation Tool

Category	Metric	Points	Possible Score	Score
CoC Participation: Applicant attends CoC meetings, CoC committee meetings, participates in PIT count planning/execution, involved in working with homeless persons that is complementary with CoC.	No	0	2	
	Yes	2		
<p>Applicant Experience: Experience of the applicant and sub-recipient's (if any) in working with the proposed population and in operating TH projects or other projects that helped house individuals within 24 months.</p> <p>Experience to carry out the project as detailed in the project application and the capacity to administer federal funds. Demonstrating capacity may include a description of the applicant with similar projects and with successful administration of federal, state, local, or privately funded programs.</p>	Some experience operating transitional housing but limited detail or outcomes.	2	8	
	Applicant demonstrated experience delivering transitional housing and support services; strong staffing model.	6		
	Applicant describes strong track record with transitional housing and an ability to house individuals within 24 months. Includes highly qualified staff.	8		
Category	Metric	Points	Possible Score	Score
1. Treatment & Behavioral Health Integration: Availability and quality of behavioral health, SUD, and recovery services integrated into the project. (Section V., pg. 77-80)	Applicant shows MOUs with off site behavioral health/medical providers.	7	15	
	On-site or partnered treatment services (mental health, SUD, MAT)	15		
2. Required Service Participation: Clarity and enforcement of required services and engagement expectations for participants, including narrative around their 40-hour work/supportive service requirement plans. (Section V., pg. 80)	Engagement in supportive services is completely voluntary.	0	15	
	No clear expectations evident in policy documents	5		
	Service participation is expected or recommended. Services are available but not clearly structured as required.	7		
	Written occupancy agreements explicitly requires service participation (40-hour per week work/supportive services). Requirement applies to all participants with clear expectations spelled out	15		
3. Healthcare/Mainstream Linkages: Strength of partnerships and referral pathways to healthcare, Medicaid, Workforce and Mainstream Benefits. (Section V., pg. 56)	The project references general collaboration with housing or healthcare providers but provides no concrete	2	10	
	Partnerships are supported primarily by MOUs or narratives, indicating access to housing or healthcare resources, but commitments lack specificity, quantification, or firm documentation	5		
	The project application includes at least one meaningful Letter of Commitment for treatment, detox, recovery services. Partnerships with hospitals, behavioral health clinics	10		

4. Law Enforcement Coordination: Formalized protocols and working relationships with law enforcement and first responders. (Section V., pg. 86-87)	The project shows little to no evidence of working with law enforcement or first responders, with no documented protocols	2	6	
	The project demonstrates some established working relationships with law enforcement or first responders, supported by basic documentation or consistent informal collaboration	4		
	The project has formal protocols with law enforcement, EMS and first responders, including referral pathways, and shared engagement practices. Also safety procedures and crisis response plans	6		
Employment and Income Growth: What is the project's plan to increase the percentage of persons who increase cash from employment and in order to live independently. (Section V., pg 73-74)	Basic employment supports (e.g., referrals, resume help) but no formal partnerships or measurable goals.	2	8	
	Good plan with some partnerships and regular employment services; goals are present but not fully developed.	5		
	Workforce development partnerships (WIOA, employers, training programs) Income-boosting strategies (employment, SSI/SSDI, TANF)	8		
Housing Stability & Exit Strategy: What is the project's plan to increase the percentage of persons who exit to unsubsidized permanent housing. (Section V., pg. 71-72)	Response gives a vague plan to increase permanent housing placements	2	8	
	Response gives a sufficient plan to increase permanent housing placements	5		
	Response gives detailed plan to increase unsubsidized permanent housing placements	8		
Budget & Cost Reasonableness: Is the project's budget reasonable, cost efficient and include adequate staffing resources to fulfill support service requirements? (Section V., pg. 57)	Budget and Budget Narrative reflect effective program administration and costs are allowable.	2	8	
	Budget and Budget Narrative included but the information is unclear.	5		
	Budget and Budget Narrative reflect effective program administration and costs are allowable.	8		

Street Outreach Evaluation Tool

Category	Metric	Points	Possible Score	Score
1. CoC Participation: Applicant is attends CoC meetings, CoC committee meetings, participates in PIT count planning/execution, involved in working with homeless persons that is complementary with CoC.	No	0	2	
	Yes	2		
2. Applicant Experience: Experience of the applicant and sub-recipient's (if any) in working with the proposed population and in providing housing similar to that proposed in the application. Experience to carry out the project as detailed in the project application and the capacity to administer federal funds. Demonstrating capacity may include a description of the applicant with similar projects and with successful administration of federal, state, local, or privately funded programs.	Some outreach experience but limited detail or outcomes.	2	8	
	Applicant demonstrated experience delivering street outreach; strong staffing model.	6		
	Applicant describes strong track record with documented outcomes, fidelity to outreach standards, and highly qualified staff.	8		
Category	Metric	Points	Possible Score	Score
1. Leveraging Mainstream Resources (Section V., pg. 58)	Mentions resource linkages but lacks detail or formalized partnerships.	3	15	
	Applicant identifies at least two strong resource linkages; evidence of coordinated care workflows.	7		
	Applicant shows formal partnerships/MOUs with mainstream health, social and employment programs	15		
2. Strategy to Serve People with Histories of Unsheltered Homelessness (Section V., pg. 58)	General engagement process but not tailored to unsheltered or disengaged individuals.	3	15	
	Clear engagement plan tailored to high-barrier individuals.	9		
	Applicant includes detailed engagement model indicating assertive engagement, trauma-informed, culturally responsive practices. Shows data on past success.	15		
3. Effectiveness in Helping People Exit Unsheltered Homelessness. (Section V., pg. 59)	The applicant provides clear historical performance showing strong rates of exits to permanent housing, shelter, and treatment.	2	10	
	Applicant shows positive exits and increasing trend, even if not perfect.	5		
	Some positive exits but limited data or mixed performance. No specific outcomes.	10		
4. Law Enforcement Coordination: Formalized protocols and working relationships with law enforcement and first responders. (Section V., pg. 58-59)	The applicant has occasional coordination with law enforcement, informal relationships.	2	6	
	Applicant shows active, documented relationships with law enforcement; demonstrates regular	4		
	Formalized partnerships with law enforcement and first responders; co-response protocols; cross-training documented.	6		
Budget & Cost Reasonableness: Is the project's budget reasonable, cost efficient and include adequate staffing resources to fulfil support service requirements? (Section V., pg. 59)	Budget and Budget Narrative reflect effective program administration and costs are allowable.	2	8	
	Budget and Budget Narrative included but the information is unclear.	5		
	Budget and Budget Narrative reflect effective program administration and costs are allowable.	8		

Client Demographic Disability (Section V., pg. 61)	% of clients with a physical disability	<40%	1	5	
		40%-59%	2		
		60%-79%	4		
		80%-100%	5		
Financial Management (Section V., pg. 65)	Budget accuracy, drawdown consistency, and financial controls.	< 60% of awarded funds spent	1	5	
		61% – 74% of awarded funds spent	2		
		75% – 90% of awarded funds spent	4		
		91% – 100% of awarded funds spent	5		
Coordinated Entry (Section III, pg. 18)	Clients entering a project are referred from Coordinated Entry Prioritization List	<40%	1	4	
		40%-59%	2		
		60%-79%	3		
		80%-100%	4		
Audit/Monitoring Status (Section V., pg. 65)	Status of HUD monitoring, audits, and corrective actions.	Non-Compliant: One or more unresolved findings, material weaknesses, questioned costs, or repeat	0	2	
		Compliant: No open findings; or all past findings fully resolved with documentation.	2		