

Fulton County FY2022 Local HUD Continuum of Care Competition Renewal Project Application

The Fulton County Continuum of Care (FCCoC) is requesting applications for the renewal of current United States Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funded projects.

The FCCoC currently anticipates approximately *\$2,463,319 of funding and \$296,470 in Domestic Violence bonus funding to apply for in the local COC competition.

The FCCoC will provide more specifics on the funding of projects and application submission during the Technical Assistance Workshops.

Note: Projects selected by FCCoC for inclusion in the collaborative application do not guarantee the application will be funded by HUD.

* Estimate based on FY 2021 funding

A. Project Information Project Name (agency name+ project name):		
Total HUD Request (cannot exceed F	2021 award amount): \$	
 UEI number:	eral <u>indirect cost rate</u> , or plans to use the <u>10% de minimis rate</u> that should be a shou	
	B. Recipient Contact Information	
Name:		
Address:		
City:	Zip Code:	
Telephone:		

ail:			
ditic	onal Email(s):		
C . '	Timeline		
•	August 12: CoC releases New Supportive Hou	using Project Applications	
•	August 19: Mandatory Technical Assistance S	Sessions	
	 Session 1: 9:00 a.m. to 10:30 pm 		
•	 Session 2: 1 pm to 2:30 pm August 29: 5 pm, deadline to supplication ap 	polication	
•	September 7: Applicants are Notified of Deci	•	
•	September 7: Applicant Appeal process start	• • •	
•	September 14: Applicant Appeal process end	ds	
•	September 14: Deadline to submit application	on in E-Snaps	
co ap bo	ver different topics based on attendee's interest plication submission are strongly encouraged t th. Below are links to register for the <u>remote</u> in u receive the links to join the remote meetings		ttend
	Information Session 1	Information Session 2	
	August 19, 2022: 9 a.m. to 10:30 a.m. https://zoom.us/meeting/register/tJwvf-	August 19, 2022: 1 p.m. to 2:30 p.m. https://zoom.us/meeting/register/tJEtdOyrrDg	
	CrpjkqHdRinALjWV7-G7mSgFAOoDv2	jHtlCW10iJpvpLPoYqN2qmuQt	
	Application Please answer your program capacity based of the contracted back:	on your program types: Total households served last year:	
		Dedicated Plus beds:	
2.		ss Management Information System (HMIS) trained	- 2 □ Vas
۷.		is intallagement information system (minis) trained	: 🗀 163
	If yes, please provide the name of the staff		
	If "No", are you planning on having staff com		
3.	Have you had unexpended HUD funds at the	expiration of grant terms in the past 3 years?	
	☐ Yes ☐ No If yes, how much? FY2020: \$ FY 2019: \$		

	FY 2018: \$ How much did you spend on your current contract as of 6/31/2022?
	If you have unspent funds in the past 3 years or anticipate having unspent funds in this contract year, please explain. (Attach explanations and title and label the document Question 3a-c)
	a. The reasons for unspent funds: b. What you did do to reduce unspent funds: c. What's your current contract spending rate:
4.	Do you provide person centered services to ensure clients' overall wellness, especially during the pandemic? Yes No Wellness could include emotional, social, spiritual, physical, environmental, and other aspects. (Attach explanations and title and label the document Question 4)
5.	HUD and the CoC value racial equity and incorporate people with lived experience in the decision-making process. How do you incorporate clients you serve in the program design and improvement process? Please provide concrete examples if you have made modifications to the program based on client feedback. (Attach explanations and title and label the document Question 5)
6.	Covid has caused an increase in staff turnover. When there is staff turnover, what procedures do you have to ensure clients receive quality service? (Attach explanations and title and label the document Question 6)
7.	Do you have a client appeal or complaint process developed? ☐ Yes ☐ No If so, is this information readily available to clients? ☐ Yes ☐ No (Attach client appeal complaint document label the document Question 6)
8	Based on your FY2021 budget list the following budget items that apply to your grant. You can use the

Based on your FY2021 budget, list the following budget items that apply to your grant. You can use the
document below as a template or use a similar format in excel. (Attach the budget and label the
document Budget and Question 8)

Budget Item	Description	CoC Request(\$)	Other Funding(\$)	Total Budget
Leasing cost	e.g. 3 * 1 br			
Supportive Services	Should include			
	staff description			
(e.g.)-employment	e.g.1FTE			
(e.g.)case	e.g. 1 FTE			
management				
Operating				
HMIS				
Admin				
Total				

Please provide the name and position of the staff who are funded through this grant, as well as their salary/hourly wage: _____

F. Scoring and Threshold Criteria

Renewal projects must certify (X) all threshold and scoring criteria in their application for it to be considered.

Project must demonstrate its ability to pass <u>all</u> the threshold criteria for the project to be reviewed. Provide appropriate documentation to:

<u> </u>	- - -	
	a)	Certify the project will use HMIS. For DV providers, certify use of a comparable database for survivors of domestic violence.
	b)	Certify the project will follow Coordinated Entry policy and procedure
	c)	Certify the project will use Housing First and low barrier approach.
	d)	Certify the applicant has no outstanding delinquent federal debts; no debarments and or
		suspensions from doing business with the federal government.
	e)	Certify the applicant has an accounting system that meets federal standards as described at 2 CFR 200.302.
	f)	Certify commitment to compliance with HUD's Equal Access and Fair Housing Rules and
		commitment to ongoing training on both regulations that include implementation strategies.
	g)	Describe Trauma-Informed Care approach and how TIC will be demonstrated in practice in the
		project.
	h)	Target population must meet HUD homeless definition of Category 1 or 4. Identify which target
		and priority population(s) will be served by the project.
	i)	Demonstrate in the project budget that no more than 10% of the total COC program budget is
		for administrative costs.
	j)	Demonstrate in the project budget that all COC funds requested are matched with an amount
		that is at least 25% of the COC funds requested (excluding any amount in the leasing budget line
		item) with cash or in-kind resources. Demonstrate clearly that all matching funds are COC eligible
		expenses.
	k)	Certify an agency representative will annually participate in a minimum of four CoC membership
		meetings.

Scoring Criteria:

- A project will be awarded points up to the maximum amount listed below for its ability to demonstrate the expectations of the scoring criteria.
- There are a total of 103 points available.

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I. Performance Measurement	Scoring Methodology	Scoring Key
A. Housing Performance	(15 Points Maximum)	(Response/answer will be pulled from information providing during the 2022 monitoring)
1. % of leavers + stayers stably housed at contract year end (HUD System Performance Measures 1,3,7)	From APR: (Q5a. total number of clients – (Q23c + Q5a.8) ÷ Q5a.1. Review by the HMIS Lead.	·

2. % of PSH beds dedicated to chronically homeless people	From APR Q) Actual Bed & Unit Inventory, CH beds ÷ (total) Beds. Review by the HMIS Lead.	 74%-60% = 2 points 59%-25%= 1 point less than 25%=0 points Pro-rated by % CH dedication 100% =5 pts 50% = 2.5 pts
3. Cost Per PSH Outcome	Measured by total project expenditures (project expenditures + match) ÷ total number of successful stable housing outcomes (Retention of or Placement into PSH). Review by CoC's Collaborative Applicant.	 Costs/successful outcomes are equal or below average in comparison to like programs=5 points within 5% in comparison of like programs=4 points within 10% in comparison of like programs=3 points within 15% in comparison of like programs=2 points within 20% in comparison of like programs = 1 point exceeds 20 % in comparison of like programs=0 points
B. Income Performance	(20 Points Maximum)	(Response/answer will be pulled
		from information providing during the 2022 monitoring)
Clients exiting with increased income	From APR Q19 New and or Increase Income – leavers, number of adults with Earned Income ÷ Q5a. Review by the HMIS Lead.	• 100% = 5 pts
2. % increased income from employment from program entry to exit (HUD System Performance Measure 4)	From HMIS APR Q19a.1+2) Number of Adults with Earned Income: New or Increased. Review by the HMIS Lead.	 50% of participants exit PSH to a HUD defined permanent housing option or remaining in housing =5 points 49%-35% = 4 points 34%-25% = 3 points 24%-15% = 2 points 14%-5%= 1 point Less than 5 % = 0 points
3. % increased income from sources other than employment (HUD System Performance Measure 4)	From HMIS APR Q19a. 1+2) Number of Adults with Other Income. Review by the HMIS Lead.	 70% and higher of participants exit PSH to a HUD defined permanent housing option or remaining in housing =5 points 50-69% = 4 points 49 - 30% = 3 points 29%-15% = 2 points 14%-5%= 1 point less than 5%=0 points
4. Mainstream resources: % of clients accessing mainstream	From APR: (1 - (Q20b. Number of Non- Cash Benefit Sources, Adults with No	• 100 to 51% = 5 pts

Resources (HUD System Performance Measure 4)	sources) ÷ Q5a., total number of adults. Review by the HMIS Lead.	• 50% = 2.5 pts
C. Housing First	(16 Points Maximum)	(Response/answer will be pulled from information providing during the 2022 monitoring)
Housing First Practice and Implementation	Full points awarded for compliance with Responses to Housing First Questionnaire and Fidelity Tool. Review by the Collaborative Applicant.	 10 points if answer yes on questionnaire 5 points if answer no on any questions on questionnaire
2. Collaboration with Coordinated Entry	Percentage of participants referred from Coordinated Entry. Review by the HMIS Lead.	 6 pts – 100% of accepted thru CE 4 pts- 80-89% of accepted thru CE 2 pts – 70-79% of accepted thru CE 0 pt – Less than 70% accepted thru CE
D. Local Priorities	(9 Points Maximum)	(Response/answer will be pulled from information providing during the 2022 monitoring)
Alignment with Consolidated Plan goals	2020-2024 Consolidated Plan (3 point)	Full pts for detailed examples of collaboration in each
Evidence of Project's collaborations with partners	Evidence of SSI/SSDI benefits advocacy. (3 point)	component
3. Evidence of current practice to prioritize chronically homeless or otherwise medically compromised for permanent housing. (Ex: low or no income, mental illness, history of domestic or substance abuse)	Evidenced by agency work in ClientTrack or other evidence-based databases. (5 points)	
F. Agency Management & Capacity	(40 Points Maximum)	(Response/answer will be pulled from information providing during the 2022 monitoring)
1. Financial/Audit: process, timeliness; findings/management letter, overall fiscal health	Review of financial documents by the CoC's Collaborative Applicant	 5 pts: No findings, timely audit, etc. 3 pts: Findings in past 3 years, late audit 1 pts: Lack of audit
2. CoC APR Review – accuracy and timeliness of reporting.	Review of APR by the CoC's Collaborative Applicant	 5 pts: timely submission & no inaccuracy of reporting 4 pts: 2-3 errors in submission 2 pts: late submission 3+ errors

Spend down of funds/match	Review of APR by the CoC's Collaborative Applicant.	 5 pts: full spenddown 4 pts: 85-99% spend 3 pts: 75-84% spend 2 pts: 65-74% 0-1pts: < 65%
3. Cultural Competency and Client/Lived Experience Feedback Process	Review of cultural competency questionnaire & Project Monitoring Questionnaire. Review by the CoC's Collaborative Applicant.	 5 pts for having a client advisory board, full explanation on procedures, all forms submitted 3 pts no advisory board, explanation of procedures, all forms submitted 1 point submission of forms
4. Data-informed program research; use of HMIS & other local data to guide program development & delivery (including efforts made to address racial equity and potential barriers to participation for persons of color). Use of documented best practices; outcomes information is used as an indicator of how well the project is accomplishing its goals	Program & Agency Monitoring Questionnaire responses. Review by the CoC's Collaborative Applicant.	 5 points for complete description of data informed practices 3 points for partial description that did not include efforts made to address racial equity and some evidence of the use of data to guide the program delivery 1 point general description and use of data to inform program delivery
5. Change management & Institutionalization of Knowledge: Procedures are in place to ensure transmission of program and grants management knowledge when staff changes take place.	Program & Agency Monitoring Questionnaire responses. Review by the CoC's Collaborative Applicant.	 5 points for a plan and procedure and evidence of implementation. 3 points for a plan and procedure and no evidence of implementation. 1 point lack of form procedures.
6. High data quality and timeliness of assessments.	Use of data. Review by HMIS Lead.	There are three Criteria: A. Universal Data Elements (Name, SSN, DOB, gender, race & ethnicity) are at least 95% complete. B. Assessment date is entered in HMIS 5 days or less after assessments are administered. C. Data validation reports from HMIS have 2 or fewer errors. 10 points full criteria met 5 points criteria mostly met — Universal Data Elements, 85% complete; Assessment date is

entered in HMIS in 6 to 10
days; data validation reports
from HMIS have 3 to 5 errors.
3 points criteria somewhat
met- Universal Data Elements,
84% or less complete;
Assessment date is entered in
HMIS in 11 or more days; data
validation reports from HMIS
have 6 or more errors

Domestic Violence Projects Only (3 Points Maximum)		(Response/answer will be pulled from information providing during the 2022 monitoring)
Describe safety planning and process used with clients	Project Narrative	Clearly defines how survivors are assisted in safety planning = 3 Application shows basic understanding of safety planning process= 2 Application gives vague description of safety planning = 1

Conditional vs. Unconditional Renewal

Once projects have been scored, a threshold for unconditional renewal will be established <u>at 80%.</u> Projects scoring below the threshold will be asked to develop a plan to address performance issues, or to voluntarily give up award moneys to be reallocated to a new project.

G. Submission Details

The application and attachments must be submitted as a PDF electronically to the homelessinfo@fultoncountyga.gov on or before 5 pm, August 29, 2022, Eastern Daylight Time.

- A successful application (section E) will not exceed 10 double-spaced pages (does not include required attachments) with 1-inch margins and 12-point font.
- **Threshold criteria** in accordance with the lettering convention used in the Threshold Criteria section of this APPLICATION.
- **Scoring Criteria** in accordance with the lettering convention used in the Scoring Criteria section of this APPLICATION.
- Project Budget (not included in 10-page limit for the narrative): Budget with clear delineation of COC costs and matching costs. Administrative costs are capped at 10%. Please submit the budget as an attachment. (Excel format preferred for this attachment only).
- Most recent audited financial statement.
- Most recent HUD monitoring report.

H. Award Notification

 All applicants will be informed via email if their project was selected to be submitted as part of Fulton County's Collaborative Application for COC funding or rejected.

- Accepted/selected email notifications will include a total approved project budget. All project selections are pending final approval from HUD and may be amended per feedback FCCoC and from HUD.
- Applicants with projects that are rejected for funding may appeal the decision by submitting an appeal in writing to HomelessInfo@fultoncountyga.gov on or before the appeals deadline in the timeline.

I. Assurances

To the best of my knowledge and belief, all information in this application is true and correct. I am fully aware that my agency is solely responsible for compliance with all HUD rules and regulations. The governing body of the applicant has duly authorized this document, and the applicant will comply with the following:

- Applicant will complete the HUD Project Application forms with the same information as contained in this
 application unless the Project Selection Committee has made adjustments during the rating/ranking
 process.
- Applicant understands that Fulton County, as the CoC lead, coordinates the local application process, and
 it was necessary to begin the process during the July 2022 monitoring of renewal projects before HUD
 releases the 2022 Notice of Funding Opportunity (NOFO). Any changes that need to be made by the
 projects will supersede this document.
- Applicant agrees to participate fully in Homeless Management Information System (HMIS). Information in HMIS should be entered timely and accurately.
- Applicant agrees to abide by all CoC Written Standards applicable to the project that funding is requested.
- Project agrees to participate in the Fulton County Coordinated Entry (CE) system.
- Applicant understands that HUD CoC funded homeless projects are monitored by Fulton County as the CoC lead. This can include an annual site visit, annual submission of the applicant's most recent APR submitted to HUD, and submission of the most recent audited financial statement.
- If awarded funding, the applicant agrees to inform Fulton County when the following occur:
 - ✓ The organization has staff vacancies that could affect the projected number of participants served or result in HUD funds not being fully expended.
 - ✓ There are changes to an existing project that are significantly different than what the funds were originally approved for, including any budget amendments/modifications submitted to HUD.
 - ✓ There is an increase/decrease of other funding to the project that could affect the projected number of participants served, services provided, ability to meet matching or leveraging requirements, etc.
 - ✓ There are significant delays in the start-up of a new project.

Name:	
(please type)	
Title:	
Phone:	
Email:	
Signature: (if application is scanned)	
Electronic signature authorization:	☐ I agree that by checking this box it is the legal equivalent of my manual signature on this agreement. I confirm that I have reviewed and agree with the conditions above.
Date:	