

**CITY OF DETROIT
HOUSING AND REVITALIZATION DEPARTMENT
MICHAEL E. DUGGAN, MAYOR
DONALD RENCHER, DIRECTOR**

NOTICE OF FUNDING AVAILABILITY #20DM18638

THE 2020-2021 HOMELESSNESS SOLUTIONS PROGRAM RFP TO APPLY FOR EMERGENCY SOLUTIONS GRANT (ESG), COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) FUNDS, EMERGENCY SOLUTIONS GRANT- CARES FUNDS

The City of Detroit invites homeless service provider organizations to submit proposals for projects to be funded by the 2020-2021 Homelessness Solutions (CDBG/ESG) and ESG-CV program as funded through the U.S. Department of Housing & Urban Development (HUD).

All non-profit organizations that wish to provide homelessness prevention, street outreach, emergency shelter or rapid rehousing services may submit proposals.

In the 2020-2021 program year, all proposals must be prepared and submitted online using the City's "Oracle" system. Proposal applicants must register on Supplier Portal- Oracle before a proposal can be submitted. Proposals must be submitted via Oracle by 4:00 pm on Monday, July 8, 2020. Paper copies of Proposals will not be accepted. To obtain information regarding Supplier Portal- Oracle, go to <https://detroitmi.gov/supplier>

Proposals submitted by Wednesday, July 8, 2020, deadline will be evaluated by city agencies. *Late proposals will not be accepted.* Funding awards will be determined by the Mayor and City Council.

The 2020-2021 Homelessness Solutions proposal packages with the required proposal forms will be available via Supplier Portal- Oracle on Wednesday, June 10, 2020.

VITRUAL WORKSHOP

The Housing and Revitalization Department (HRD) will conduct one live Zoom session to present details and answer questions regarding the Homelessness Solutions RFP. **Interested parties are strongly encouraged to attend this training session.** A second live Zoom Q&A will also be available to potential applicants. The workshops to be held as shown below:

Proposal Virtual
Workshop
Friday, June 19th 2020 from 9:30am to 12pm
Zoom link is below:

<https://umich.zoom.us/meeting/register/tJAlfu6qqT0rHN03vCDy3G9y4N7AQR1b1eDN>

Virtual O&A Session
Tuesday, June 23rd, from 11m to 12pm
Zoom link is below:

<https://umich.zoom.us/meeting/register/tJUkdOCooqzooEt3ADnlWsiS7M66WGrak2na2>

For further information, contact:

Terra Linzner
Housing and Revitalization Department
2 Woodward Avenue Suite 908
Detroit, MI 48226
linznert@detroitmi.gov

Persons with disabilities who require special accommodations, auxiliary aids, or services to participate in these hearings, should contact the Housing and Revitalization Department. Reasonable advance notice of such needs is required.

Notice of Non-Discrimination: The City of Detroit does not discriminate on the basis of race, color, creed, national origin, age, handicap, sex or sexual orientation. Complaints may be filed with the Detroit Human Rights Department, Coleman A. Young Municipal Center, Detroit, Michigan.

CITY OF DETROIT, OFFICE OF CONTRACTING AND PROCUREMENT
ON BEHALF OF THE HOUSING AND REVITALIZATION DEPARTMENT (HRD)

HOMELESSNESS SOLUTIONS AND ESG-CV RFP 2020-2021

NOTICE OF FUNDING AVAILABILITY

RFP#: 20DM18638

Date Released: June 10, 2020

Closing Date: 4pm, July 8, 2020

TABLE OF CONTENTS

Introduction	4
Eligible Activities.....	4
Match Requirements	5
Continuous Improvement Commitment	5
Performance-Based Contracts	5
Definitions	6
Methodology	6
Implementation	9
A. Funding Available	10
1. Estimated Awards	10
2. Subrecipient Grant Term	10
3. Subrecipient Expectations and Requirements	10
B. Program Components and Additional Information.....	11
1. Outreach and Housing Navigation Component	11
Target Population.....	11
Eligible Activities	11
Transportation	12
Emergency Health Services:	12
Services for Special Populations:	12
Scope of Service	13
1. Street Outreach	13
2. Navigation	13
Street Outreach Performance Measures	14
Navigation Performance Measures	14
2. Emergency Shelter and Warming Center Component.....	14
Eligible Activities	14
Case Management:	15
Shelter Operations:	15
Outpatient Health Services	15
Services for Special Populations:	16
Scope of Service	16

Emergency Shelter Performance Measures:.....	16
Warming Center Performance Measures:.....	16
3. Rapid Re-Housing Component	18
Target Population.....	18
Scope of Service	18
Rental Assistance	18
Housing Relocation and Stabilization Services	19
Rapid Re-Housing Program Performance Measures	19
4. Homeless Prevention Component.....	20
Target Population.....	20
Scope of Services	20
Rental Assistance	20
Housing Relocation and Stabilization	20
Prevention Program Performance Measures	21
C. Ineligible Activities for all Components.....	22
D. Review and Scoring of Proposal	23
Renewal Applicants Scoring Grid	24
New Applicant Scoring Grid	25
E. Application Instructions	26
Application Requirements.....	26
Submission Method	26
Timeline	27
Completeness	27
Procurement and Non Discrimination Notice.....	27
Grievance, Appeals, and Termination Procedures	27
A. Application Cover Sheet	28
B. Threshold Requirements.....	29
C. Narrative Questions	30
1. Organizational Experience in Addressing Homelessness	30
2. Financial Capacity	32
3. Implementation Plans by Component.....	33
Implementation Plans by Component.....	48
Threshold	63
Minimum Requirements for All Applicants.....	63

Threshold for New Applicants Only 63

Required Attachments 64

 Organizational Experience in Addressing Homelessness 64

 Financial Capacity..... 64

 Implementation Plans by Component 64

 OPTIONAL: For Applicants Submitting Appeals of Funding Decisions 64

Appendix A: Eligible Program Participants..... 65

Appendix B: “Document Ready” 68

Appendix C: “Running and saving the CoC APR as a PDF” 70

INTRODUCTION

The City of Detroit is committed to making homelessness rare, brief and non-recurring for its residents. As such, we work closely with the Detroit Continuum of Care (CoC), provider organizations, supportive housing developers, and funders to provide a broad array of housing opportunities intended to prevent and end homelessness for households in need. The U.S. Department of Housing and Urban Development (HUD), along with the City of Detroit and its community partners, expects that our system of service makes steady progress toward reducing homelessness, including decreasing the number of people entering the system, shortening the duration of homelessness, and limiting recurrent episodes of homelessness.

In the 2020-2021 program year, the City of Detroit seeks to use its Emergency Solutions Grant (ESG) funds and Community Development Block Grant (CDBG) Homeless Public Service funds to address the urgent needs of residents who are homeless or at imminent risk of homelessness. The City intends to award approximately 4.6 million dollars total in ESG and CDBG Homeless Public Service funds, dependent upon HUD's budget. **The City of Detroit is committed to streamlining processes for subrecipients and as such, publishes a single RFP for ESG and CDBG funds that support homelessness programs. These funds will be referred to as Homelessness Solutions funds.**

In addition to Homelessness Solutions Funds, the City of Detroit was awarded Emergency Solutions Grant Coronavirus Aid, Relief, and Economic Security (CARES) Act (ESG-CV) funds on April 2, 2020. These funds must be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance. Approximately 8 million dollars of CARES ESG-CV funds will be made available through this RFP. The City of Detroit's CARES plan focuses on three main interventions:

- Avert households from entering into homelessness through prevention services;
- Increase the quality of emergency services by improving shelter space, continue to operate isolation shelter(s), and expand street outreach; and
- Quickly move households out of homelessness and into rapid re-housing thus ending their homelessness.

ELIGIBLE ACTIVITIES

Both the Homelessness Solutions and ESG-CV funds must be used for the following activities: Street Outreach and Housing Navigation, Emergency Shelters, Warming Centers, Rapid Re-Housing, and Homelessness Prevention. In order to ensure comprehensive services to those in housing crisis, these funds are to be used in combination with other federal, state, and local funds as part of a community-wide response to homelessness.

The City of Detroit's Homelessness Solutions funds help to build the infrastructure of the coordinated entry system. In keeping with the process we have had in the past, we intend to commit a portion of our total allocation to coordinated entry. As we are not the primary funder of this activity, the City will follow the community's decision-making process for coordinated entry funds. We understand that there is a robust evaluation of our coordinated entry system and its processes, including established performance metrics. If a new organization becomes the lead for coordinated entry, we will provide a commitment of grant funds to support their needs within the scope of allowability.

MATCH REQUIREMENTS

In compliance with HUD's one-to-one ESG match requirements, the City intends to use CDBG Homeless Public Service funds to meet this requirement. However, grantees may need to provide additional match to fulfill this obligation. ESG match must be expended on ESG-eligible activities and funding sources may include: cash contributions expended for allowable expenses and also non-cash contributions including, but not limited to, the value of any real property, equipment, goods, or services committed to support ESG-eligible activities during the period of the subrecipient agreement. Requirements for match funds are described in Section 576.201 of the [ESG Interim Rule](#)¹ and the requirements for documentation are in Section 576.500(o). Please note that ESG-CV funds do not require a match component.

CONTINUOUS IMPROVEMENT COMMITMENT

The City of Detroit is committed to continuous improvement in meeting the needs of residents in a housing crisis. Our community's performance on HUD's identified [System Performance Measures \(SPMs\)](#)² are an important driver of competitive HUD funding. The SPMs provide community level data to assess how well a system is serving those experiencing homelessness. HUD looks at a broad range of metrics, including the number of new households entering homelessness, the length of time households stay homeless, and exits to and retention of permanent housing. The SPM reports use all the data entered into each community's Homeless Management Information System (HMIS) to determine how well the community is serving households experiencing homelessness. Included in Detroit's SPMs is data from clients served by ESG and CDBG programs funded through the City of Detroit. With that in mind, the City of Detroit is focusing intently on subrecipients' performance related to these system measures. The City has identified activities that support these SPMs and has generated community-level benchmarks using HMIS. In the 2019-2020 program year, the City of Detroit moved to performance-based contracts. Similar to last year, agencies will again be expected to evaluate performance on a regular basis and make improvements to meet, maintain, or exceed these benchmarks. Refer to the section below for more information.

PERFORMANCE-BASED CONTRACTS

Despite fluctuations from year to year, it is important to note that since 2015, Detroit has seen an overall 25% reduction in the number of households experiencing homelessness³. This is an outstanding achievement, in large part due to the dedication of our homeless service providers. To support the continued reduction in homelessness, the City of Detroit began evaluating agencies based on performance measures in the 2019-2020 program year. This change aligned with national best practice to use data for objective, transparent, and fair decision making. Shifting to performance based contracts will continue to reduce homelessness by providing clients with high quality services that ensure housing and long-term stability.

¹ www.hudexchange.info/resources/documents/HEARTH_ESGInterimRule&ConPlanConformingAmendments.pdf

² <https://www.hudexchange.info/programs/coc/system-performance-measures/#guidance>

³ In 2015, the Point-In-Time count, an annual snapshot of our homeless population, listed our population at 2,597. By 2019, that number went down to 1,965. More details can be found: www.handetroit.org/reports/

The majority of performance measures are outlined in the 2020 City of Detroit's Policy and Procedure manual, found [here](#)⁴. To establish performance benchmarks for each measure, the City of Detroit, in coordination with the CoC lead, Homeless Action Network of Detroit (HAND), generated HMIS reports for all outreach, shelter, warming center, Rapid Re-Housing, and prevention providers. These reports included all providers in the Detroit CoC, including those who did not receive City of Detroit Homeless Service funding. Certain calculations mirror those of the SPMs and more information about what data were used to calculate exit destinations can be found [here](#)⁵. Despite implementation last year, the City recognizes that this is still a significant change and therefore is implementing this process with providers over the course of a three year period. The 20'21 RFP represents the second year of this process. In line with the City of Detroit's increasing focus on data and outcomes, we will be establishing and tracking performance on key measures for each funded activity. These measures are further outlined in this document.

DEFINITIONS

Performance Measure: Regular measurement of outcomes to review effectiveness of programs.

Performance Baseline: Expected level of performance against which all subsequent levels of performance are compared. These baselines were established using HMIS CoC APR data for calendar years 2018 and 2019, unless otherwise noted.

Performance Benchmark: Expected performance that a subrecipient must meet or exceed.

Annual Performance Report (APR): A reporting tool generated through HMIS to track progress and accomplishments of HUD homeless assistant programs. This report is used by the CoC and by HUD to review data entered by subrecipients for their specific programs.

ESG Allowable Activities: ESG funds may be used for five program components: Street Outreach and Housing Navigation, Emergency Shelter, Homelessness Prevention, Rapid Re-Housing assistance, and HMIS; as well as administrative activities. Each component has specific allowable activities that the City of Detroit has approved to fund as listed in this document.

METHODOLOGY

HAND generated 2018 and 2019 calendar year CoC APRs for all:

- Single Adult Shelter Programs (programs serving primarily adults)
- Family Shelter Programs (programs serving primarily families, but may also serve single adults)
- Youth Shelter Programs (programs serving only youth under age 24)
- Warming Center Programs
- Outreach and Housing Navigation Programs
- Rapid Re-Housing Programs
- Prevention Programs

Using the 2018 and 2019 APRs, the City calculated Performance Baselines using the same method applicants are required to use in the grant application. To review the calculations used to establish the baselines, refer to Form 5. The 2018 and 2019 baselines were then averaged and used to

⁴ <https://detroitmi.gov/media/20416>

⁵ www.hudexchange.info/resources/documents/System-Performance-Measure-7-Housing-Destination-Summary.pdf

determine the Performance Benchmarks for the 2020-2021 grant year. For further information about baseline and benchmark creation, refer to the chart that follows.

	Performance Measure	Source of Baseline Data		19-20 Performance Benchmark	2019 Baseline	Combined Baselines (2018 + 2019)	20-21 Performance Benchmark
Street Outreach	Percent of clients that meet the definition of unsheltered homelessness	HUD Regulatory Requirements		100%	100%	N/A	100%
	Percent of clients with VI-SPDAT completed	N/A		N/A	N/A- Will be determined in the 2020 calendar year		
	Percent of clients who exit to any sheltered destination	CoC APR for all Outreach Programs run by HAND - see 23c - last row TOTAL Percentage Positive exits		70%	84%	67%	85%
Emergency Shelter	Shelter utilization rate according to data reported on CoC APR	N/A		90%	N/A- Performance expectation outlined in City of Detroit Policy and Procedures Manual	N/A	90%
	Percentage of exits to a permanent housing destination	Family	Cap60 CY19 data for exit destinations +CoC APR for COD Family Shelters Provider Group - see 23c last row TOTAL Percentage Positive exits	70%	72%	70%	73%
		Singles	CoC APR for All Single Shelters run by HAND - see 23c last row TOTAL Percentage Positive exits	18%	33%	26%	34%
		Youth	CoC APR for COD Youth Shelters Provider Group - see 23c last row TOTAL Percentage Positive exits	45%	54%	49%	55%
Warming Centers	Shelter utilization rate according to data reported on CoC APR	N/A		90%	N/A- Performance expectation outlined in the City of Detroit Policy and Procedures Manual	N/A	90%
	Percentage of exits to a permanent housing destination	CoC APR for Warming Centers Reporting Group - see 23c last row TOTAL Percentage Positive exits		13%	16%	14%	17%
RRH	Average length of time (days) to move clients into housing from program entry	CoC APR run by HAND for all Rapid-Rehousing programs - see22c		75	63	73	62
	Percent of clients who exit to a permanent housing destination	CoC APR for All RRH run by HAND - see 23c last row TOTAL Percentage Positive exits		94%	91%	92%	92%
	Percent of clients who exit within 180 days of program entry	CoC APR run by HAND for all Rapid-Rehousing programs - see 22a1 (LEAVERS 30 days or less + LEAVERS 31 to 60 days + LEAVERS 61 to 90 days+LEAVERS 91 to 180 days)/ (LEAVERS total)		65%	37%	33%	38%
Prevention	Percent of clients in the program for three months or less	CoC APR for all Prevention programs - 22a1 (LEAVERS 30 days or less + LEAVERS 31 to 60 days + LEAVERS 61 to 90 days)/ (LEAVERS total)		85%	89%	87%	90%
	Percent of clients who exit to a permanent housing destination	CoC APR for all Prevention programs run by HAND - see bottom of section 23c = Total persons exiting to positive housing destinations/ (TOTAL - Total persons whose destinations excluded them from the calculation)		99%	100%	99%	99%

IMPLEMENTATION

To align with best practice and the homeless response system's commitment to data informed decision-making, the City moved to performance-based contracts starting in the 2019-20 contract year. Program outcomes will be used to make funding decisions to ensure high quality services are delivered to those most in need. Hence, outcomes on established performance measures will impact funding allocations. **Understanding that this is new to Homeless Solutions grantees, the City plans to work with grantees to implement this over a three-year period.** The following is the implementation timeline:

YEAR 1

In the 2019-2020 RFP, agencies were required to:

1. Calculate their individual program outcomes using 2018 calendar year data for each performance measure
2. Create an action plan for any outcomes that do not meet the required Performance Benchmark. This action plan must describe what steps the agency will take to increase their performance in order to meet or exceed the benchmark(s).

YEAR 2

This current RFP reflects year 2 of the process. In the 2020-2021 RFP, agencies will:

1. Generate individual program outcomes for all performance measures using 2019 calendar year HMIS data.
2. Create an action plan for any outcomes that do not meet the required Performance Benchmark. This action plan must describe what steps the agency will take to increase their performance in order to meet or exceed the benchmark(s).

HMIS data from the 2019 calendar year will be used to evaluate agency's performance in the 2020-21 RFP. The City recognizes that evaluating 2019 data does not allow agencies an entire year to implement policies and procedures to increase performance. Therefore, while the performance measures will be weighted more heavily than in the previous year's RFP, failure to meet the benchmarks will reduce the overall grant application score, but will not directly decrease funding.

YEAR 3

In the 2021-2022 RFP, agencies will again have to generate individual program outcomes for all performance measures. The City will evaluate agencies on their performance using 2020 calendar year data. At this point, agencies should have implemented procedures and processes in order to meet and/or exceed the benchmarks. Any unmet benchmarks will significantly impact funding, which could include a funding decrease or not receiving a funding award.

PART I: PROGRAM AND APPLICATION REQUIREMENTS

A. FUNDING AVAILABLE

1. ESTIMATED AWARDS

Subrecipient requests should be for a minimum of \$100,000 to operate programs that are in compliance with ESG and CARES funded activities. Funding will be awarded based on the quality and quantity of proposals received. The City anticipates awarding no more than 20 awards for Emergency Shelter, 3 awards for Warming Center, 10 awards for Rapid Re-Housing, 7 awards for Street Outreach, and 4 awards for Prevention.

Disclaimer: The City of Detroit reserves all rights not expressly stated in this RFP, including making no awards, awarding partial funding, increasing funding based on budget availability, and negotiating with any applicant regarding the funding amount and other items of any contract resulting from this RFP.

Agencies are encouraged to include HMIS operations to support costs of contributing data to the HMIS - including expenses such as hardware, staff costs, and related expenses (Section 576.107 of the [ESG Interim Rule](#)). **Please note that while organizations are not required to request funds for HMIS operations, they will be expected to meet data quality expectations regardless of how funds are budgeted. Also, new this year, agencies can request more than 2% of their total budget under Data Collection.**

Agencies must limit the administrative line item to 10% of the total budget.

2. SUBRECIPIENT GRANT TERM

Subrecipient awards are for 12-month grant terms (01/01/21-12/31/21), except in the case of seasonal emergency shelter and warming center programs awards that begin 11/01/20.

3. SUBRECIPIENT EXPECTATIONS AND REQUIREMENTS

Private, nonprofit, tax-exempt organizations that plan to provide Street Outreach, Emergency Shelter, Warming Center, Rapid Re-Housing, and Homelessness Prevention services are eligible to apply. All subrecipients must: a) record all client-related data and activity using the CoC-established HMIS; b) participate in the CoC through CoC membership; c) participate actively in the community-wide coordinated entry, locally called the Coordinated Assessment Model (CAM); and d) provide services consistent with a “Housing First” approach. Subrecipients must also comply with all requirements in their subrecipient agreements and the City of Detroit’s Homeless Programs Policy and Procedure Manual, which can be accessed [here](#).

Organizations that do not currently use the Detroit HMIS system must demonstrate participation in an HMIS system for at least one (1) full year through submission (Form 1a) OR submit a data tracking plan (Form 1b) that demonstrates their ability to use HMIS successfully. See the RFP attachments for form templates. For organizations serving survivors of domestic violence, the City may approve

another comparable tracking client system. The comparable tracking system must be approved upon receipt of award notice.

B. PROGRAM COMPONENTS AND ADDITIONAL INFORMATION

This RFP allows subrecipients to apply for two separate funding sources, Homelessness Solutions funding which is a combination of CDBG and ESG funds as well as CARES ESG-CV funds. Program components remain the same for both sources of funding, however there are specific requirements and allowances for ESG-CV funding. *The City of Detroit requested a waiver of certain HUD regulations for programs operating within the Detroit CoC (MI501). The Waiver went into effect on April 18, 2020. Information regarding City of Detroit's Waiver Request and eligible uses of ESG-CV can be found [here](#).* Applicants must clearly state if they are applying for a) Homelessness Solutions Funds or b) ESG-CV funds.

1. OUTREACH AND HOUSING NAVIGATION COMPONENT

TARGET POPULATION

For the purpose of this RFP, the City is seeking outreach services to unsheltered homeless individuals and families sleeping on the streets, in cars, or in other places not fit for human habitation. Please note that only unsheltered households are eligible for these services. For the definition of unsheltered refer to the [Homeless Definition Final Rule](#).

ELIGIBLE ACTIVITIES

HUD ESG Program allows for six eligible activities funded under Outreach and Housing Navigation, however the City of Detroit focuses the bulk of the awards on three eligible activities: Engagement, Case Management services, and Transportation. Due to COVID-19, the City encourages applicants to apply for Eligible ESG Program Costs for Infectious Disease Preparedness. Eligible costs for regular ESG funds have been added to each activity and are underlined for emphasis. More information can be found [here](#). *Applications should be mindful that their application reflects allowable expenses for these five activities.*

Per the ESG Interim Rule these activities are defined as:

ENGAGEMENT: The costs of activities to locate, identify, and build relationships with unsheltered homeless people and engage them for the purpose of providing immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs. These activities consist of making an initial assessment of needs and eligibility; providing crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; and actively connecting and providing information and referrals to programs targeted to homeless people and mainstream social services and housing programs, including emergency shelter, transitional housing, community-based services, permanent supportive housing, and Rapid Re-Housing programs. Eligible costs include the cell phone costs of outreach workers during the performance of these activities. COVID-19 related engagement services also cover costs of hand sanitizer, soap, tissue packets, masks, disposable gloves, other personal protective equipment to keep staff and consumers safe.

CASE MANAGEMENT: The cost of assessing housing and service needs, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participants. Eligible services and activities include: using the centralized or coordinated assessment system as required under 24 CFR 576.400(d); conducting the initial evaluation required under 24 CFR 576.401(a), including verifying and documenting eligibility; counseling; developing, securing and coordinating services; obtaining Federal, State, and local benefits; monitoring and evaluating program participant progress; providing information and referrals to other providers; and developing an individualized housing and service plan, including planning a path to permanent housing stability. COVID19- related case management services also include coordinating medical care.

TRANSPORTATION: The transportation costs of travel by outreach workers, social workers, medical professionals, or other service providers are eligible, provided that this travel takes place during the provision of services eligible under this section. The costs of transporting unsheltered people to emergency shelters or other service facilities are also eligible. These costs include the following:

1. The cost of a program participant's travel on public transportation.
2. Mileage allowance for service workers to visit program participants, if service workers use their own vehicles.
3. The cost of purchasing or leasing a vehicle for the recipient or subrecipient in which staff transports program participants and/or staff serving program participants. The cost of gas, insurance, taxes, and maintenance for the vehicle.
4. The cost of subrecipient staff time to accompany or assist program participants to use public transportation.
5. COVID-19 related- Train or bus tokens, taxi or rideshare for program participant travel to and from medical care

EMERGENCY HEALTH SERVICES: Eligible costs are for the direct outpatient treatment of medical conditions and are provided by licensed medical professionals operating in community-based settings, including streets, parks, and other places where unsheltered persons are living. ESG funds may be used only for these services to the extent that other appropriate health services are inaccessible or unavailable within the area. Eligible treatment consists of assessing a program participant's health problems and developing a treatment plan; assisting program participants to understand their health needs; providing directly or assisting program participants to obtain appropriate emergency medical treatment; and providing medication and follow-up services.

SERVICES FOR SPECIAL POPULATIONS: ESG funds may be used to provide services for homeless youth, victim services, and services for people living with HIV/AIDS, so long as the costs of providing these services are eligible under paragraphs (a)(1) through (a)(5) of this section. The term victim services means services that assist program participants who are victims of domestic violence, dating violence, sexual assault, or stalking, including services offered by rape crisis centers and domestic violence shelters, and other organizations with a documented history of effective work concerning domestic violence, dating violence, sexual assault, or stalking.

While all the activities listed above are allowable under HUD regulations, the City of Detroit's primary focus is engagement and case management to link unsheltered households with shelter, permanent housing, and other services.

SCOPE OF SERVICE

The City will fund two different services components under Outreach and Housing Navigation: 1. Street Outreach and 2. Navigation, which are expected to be compliant with the eligible activities listed above. Each service has its own specific components and performance goals. Applicants can apply for one or both service components. If separate agencies are funded for different service components the City will require that agencies enter into a Memorandum of Understanding with each other to help clarify coordination expectations.

1. STREET OUTREACH

Services are provided in the streets with a majority of the services provided outside of normal business hours. The goal of Street Outreach is primarily engagement in order to develop relationships with unsheltered individuals and connect them with resources including shelter or shelter access points, substance abuse or mental health treatment, and/or mainstream benefits. Thus, Street Outreach providers must have at least one team conducting outreach in the community during the majority of their shift. *A competitive application will include outreach activities for a minimum of 5 days a week.* Outreach teams must demonstrate active participation in the [chronic by-name-list \(CBNL\) process](#) and be proactive in coordinating with the Detroit Police Department Neighborhood Police Officers in the areas of service, as well as work with police to provide services to individuals in encampments as necessary. Outreach teams must coordinate with agencies funded under the Navigation service component as well as CAM. To meet the need, the City will negotiate hours of operation for the programs, but applicants should plan that at least 50% of the team's regular operations must be outside of normal business hours (between 5pm and 8am) and occur a minimum of 5 days a week. In addition, applicants must be available to respond to individuals experiencing unsheltered homelessness at any point during their scheduled shifts. Finally, applicants are expected to mobilize a code blue response during extreme cold conditions defined as:

- a. The temperature drops below 20 degrees Fahrenheit or the wind chill below 0 degrees
-OR-
- b. Ice storms or freezing rain
-OR-
- c. Snowstorm greater than 6 inches

2. NAVIGATION

Services are provided to individuals and families identified through the [chronic by-name-list \(CBNL\) process](#). This year, Navigation will also be allowed to provide case management services to literally homeless individuals, although the bulk of clients must be from the CBNL. Navigation teams provide case management services to work with unsheltered households to get them "document ready" and move them into permanent housing. "Document ready" is defined as assisting clients with obtaining all documentation needed for obtaining permanent housing. Refer to Appendix B for further information. This may require working with households on the streets or in drop in centers. Agencies funded under Navigation must coordinate with teams funded under the Outreach Service component, as well as CAM. Applicants must submit a proposal for operating hours spanning a

minimum of 5 days a week. The majority of that time should focus on providing case management with an established client list. However if an unsheltered individual needs outreach during a time that Street Outreach is not available, the Navigation team must respond. In addition, navigation services must occur in a location that is agreed upon by both the consumer and staff.

STREET OUTREACH PERFORMANCE MEASURES

The City will require that all Street Outreach providers track their performance on the following measures:

- 100% of clients will meet the definition of unsheltered homelessness;
- Percentage of clients who complete all CAM required assessments; and
- Percentage of clients who exit to any sheltered destination (excluding jail/prison, hospitals, or residential project/halfway house).

NAVIGATION PERFORMANCE MEASURES

The City will require that all Navigation providers track their performance on the following measures:

- 100% of clients will meet the definition of unsheltered homelessness;
- Percentage of client who become “document ready”; and
- Percentage of clients who exit to a permanent housing destination.

For purposes of this RFP, “document ready” is defined as when a client has obtained all required documents needed for obtaining permanent housing. Refer to Appendix B for a more detailed description.

2. EMERGENCY SHELTER AND WARMING CENTER COMPONENT

TARGET POPULATION

Funds under the Emergency Shelter component may be used to provide short-term emergency housing and/or drop in centers for homeless families, single men and women, and youth population experiencing homelessness, as defined by all categories of the [Homeless Definition Final Rule](#).

The Warming Center component funds short-term emergency shelter that operates as a first line of defense to freezing temperatures for those experiencing homelessness from November to March. The city will award *no more than three (3) grants for Warming Centers* to carry out eligible activities for families and/or single adults.

Funded Emergency Shelters and Warming Centers are expected to meet Emergency Shelter’s Performance Goals as outlined below.

ELIGIBLE ACTIVITIES

HUD ESG Program allows a number of eligible activities as part of the essential services for individuals and families experiencing homelessness and residing in emergency shelters. For a comprehensive list of all eligible activities, please refer to the City of Detroit’s Policy and Procedure manual found [here](#). Due to COVID-19, the City encourages applicants to apply for Eligible ESG Program Costs for Infectious Disease Preparedness. Eligible costs for regular ESG funds have been added to each activity and are underlined for emphasis. More information can be found [here](#). *The*

Note: City of Detroit prioritizes case management that helps households obtain permanent housing over other services.

CASE MANAGEMENT: The goal of emergency shelter is to provide a safe environment for those in housing crisis AND to ensure that services and support are provided that ensure a person's time in housing crisis is both rare and brief. While HUD defines “essential services” widely, the City of Detroit requires all emergency shelters to provide the coordination of or direct case management services to all persons in housing crisis being served by their agency. The cost of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant is eligible. Case management activities consist of:

- Using the centralized or coordinated assessment system as required under §576.400(d)
- Conducting the initial evaluation required under § 576.401(a), including verifying and documenting eligibility;
- Counseling;
- Developing, securing, and coordinating services and obtaining Federal, State, and local benefits;
- Monitoring and evaluating program participant progress;
- Providing information and referrals to other providers;
- Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking;
- Developing an individualized housing and service plan, including planning a path to permanent housing stability; and
- Proof of case management services, such as housing plans and case notes, must be documented in the client’s chart and HMIS when applicable.

SHELTER OPERATIONS: Eligible costs are the costs of maintenance (including minor or routine repairs), rent, security, fuel, equipment, insurance, utilities, food, furnishings, and supplies necessary for the operation of the emergency shelter. Shelters may also submit costs associated with maintaining a sanitary shelter environment will help to keep staff and participants healthy. Please refer to [Shelter Management During an Infectious Disease Outbreak](#) for additional guidance. Eligible items include cleaning supplies such as bleach, disinfectant wipes, scrubbers, mops; protective equipment such as masks, disposable gloves; program participant needs such as bed linens, towels, hand sanitizer, soap, tissue packets; cots, room dividers; washers, dryers, portable handwashing stations; train or bus tokens, taxi or rideshare for program participant travel to and from medical care.

Outpatient Health Services: Eligible costs are for the direct outpatient treatment of medical conditions that are provided by licensed medical professionals. ESG funds may be used only for these services to the extent that other appropriate health services are unavailable within the community. Eligible treatment consists of assessing a program participant’s health problems and developing a treatment plan; assisting program participants to understand their health needs; providing directly or assisting program participants to obtain appropriate medical treatment, preventive medical care, and health maintenance services, including emergency medical services; providing medication and follow-up services; and providing preventive and non-cosmetic dental care.

SERVICES FOR SPECIAL POPULATIONS: ESG funds may be used to provide services for homeless youth, victim services, and services for people living with HIV/AIDS, so long as the costs of providing these services are eligible under paragraphs (a)(1)(i) through (a)(1)(x) of 24 CFR 576.102. The term victim services means services that assist program participants who are victims of domestic violence, dating violence, sexual assault, or stalking, including services offered by rape crisis centers and domestic violence shelters, and other organizations with a documented history of effective work concerning domestic violence, dating violence, sexual assault, or stalking.

SCOPE OF SERVICE

The City of Detroit seeks applications for an array of different shelter programs that provide a continuum of homeless services system and make up Detroit's overall social safety net. The goal of the shelter system as a whole is to provide a safe, accessible place to stay for those experiencing homelessness and to move them towards and into appropriate and stable permanent housing. Shelters achieve this ultimate goal by connecting homeless households with appropriate permanent housing options as well as other services and community resources that will help them obtain or maintain housing. The City will provide funding under the Emergency Shelter component to shelters and seasonal warming centers for eligible activities associated with the provision of essential services shelter operations as outlined in the City of Detroit's Policy and Procedure manual found [here](#).

Please note: In this RFP, the City will not accept application for major renovation/rehabilitation projects. Organizations with renovation or rehabilitation needs are encouraged to apply through the City of Detroit's Public Facility Rehab RFP, which is expected to be released in the summer of 2020.

EMERGENCY SHELTER PERFORMANCE MEASURES:

The City will require that Emergency Shelter providers track their performance on the following measures:

- 100% of clients must be screened by CAM. It is the shelter's responsibility to connect the client to CAM within 48 hours if the shelter served as the initial point of entry;
- Shelter utilization must be at 90% according to the CoC APR;
- Percentage of exits to a permanent housing destination;
- Percentage of HMIS client files that have a housing related case management notes once every 30 days; and
- 100% of clients referred from the CAM will have a referral outcome in HMIS.

WARMING CENTER PERFORMANCE MEASURES:

The City will require that Warming Center providers track their performance on the following measures:

- 100% of clients must be screened by CAM. It is the warming center's responsibility to connect the client to CAM within 48 hours if the program served as the initial point of entry;

- Warming Centers utilization rate must be at 90% according to the CoC APR;
- Percentage of exits to a permanent housing destination;
- Percentage of HMIS client files that have housing related case management notes once every 30 days. and
- 100% of clients referred from the CAM will have a referral outcome in HMIS.

For additional information regarding these Performance Goals, please refer to the [City of Detroit Policies and Procedures Manual](#) for ESG Programs.

3. RAPID RE-HOUSING COMPONENT

TARGET POPULATION

The Rapid Re-Housing component is designed to serve individuals and families experiencing homelessness, as defined by categories 1 and 4 of the [Homeless Definition Final Rule](#), who score for Rapid Re-Housing using the CoC's common assessment tool, the Vulnerability Index- Service Prioritization Decision Assistance Tool (VI-SPDAT). Rapid Re-Housing programs must only serve clients referred by the CAM lead agency. It is important to note that not all households who qualify for Rapid Re-Housing assistance will receive it and that [prioritization criteria](#)⁶ has been established by the community to prioritize limited resources. *Please note that the City of Detroit requested a waiver of certain HUD regulations for programs operating within the Detroit CoC (MI501). The Waiver went into effect on April 18, 2020. Information regarding City of Detroit's Waiver Request and eligible uses of ESG-CV can be found [here](#).* Agencies must take care to ensure proper documentation is obtained and store with agency and client files. **All eligible clients must be served without any additional participation requirements, targeting, or entry criteria.**

Please note: Agencies are no longer allowed to transfer clients into City of Detroit Rapid Re-Housing programs with the following exceptions:

1. MSHDA ESG transfers
2. City of Detroit Rapid Re-Housing programs that are closing and are transitioning their clients into another City of Detroit Rapid Re-Housing program.

All transfers must follow the transfer procedure outlines in the [City of Detroit Policies and Procedures Manual](#).

SCOPE OF SERVICE

Emergency Solutions Grant funds may be used for operating and financial assistance expenses associated with the two (2) Rapid Re-Housing activities described below:

RENTAL ASSISTANCE

Funds will be used to provide short and medium-term rental assistance to assist persons with moving from a homeless situation into permanent, stable housing as indicated below. Please note that there has been a change in maximum length of assistance as reflected in the Detroit program standards:

- Short-term rental assistance (up to 3 months)
- Medium-term rental assistance (4-12 months)
- Payment of rental arrears (one-time payment, up to 6 months) including any late fees on those arrears
- Any combination of the above, as outlined in the [Community Rapid Re-Housing Policies and Procedures](#).

⁶ <http://www.handetroit.org/cocrapidre-housing>

All organizations providing Rapid Re-Housing will need to follow local expectations outlined in the [Community Rapid Re-Housing Policies and Procedures](#), including policies on length of service provided (a maximum of 12 months effective January 1, 2020) and rental payments for program participants. The City of Detroit Rapid Re-Housing programs will no longer accept client transfers (see note above).

HOUSING RELOCATION AND STABILIZATION SERVICES

Funds will be used to support staff who will work with persons and/or households who are homeless, and provide them with the necessary assessment and services to assist them with locating, moving into, and maintaining permanent housing. These funds may also be used to provide direct financial assistance to assist households who are experiencing homelessness with moving into housing as described in the chart below:

Financial Assistance	Services	Other Eligible Costs
<ul style="list-style-type: none"> ● Rental application fees ● Security deposit ● Last month’s rent ● Moving costs ● Utility deposits ● Utility payments 	<ul style="list-style-type: none"> ● Housing search and placement ● Housing stability case management ● Mediation ● Legal services ● Credit repair 	<ul style="list-style-type: none"> ● Staff and facility cost ● Related financial assistance associated with provision of Rapid Re-Housing

RAPID RE-HOUSING PROGRAM PERFORMANCE MEASURES

The City will require that Rapid Re-Housing providers track their performance on the following measures:

- Rapid Re-Housing programs must attempt to contact client within three days of referral;
- Rapid Re-Housing clients must move into housing within 60 days of program entry so long as funds are available;
- Rapid Re-Housing staff will engage in face-to-face case management services with clients at least every 30 days;
- Rapid Re-Housing participant home visits will be made once every 90 days, at a minimum;
- Percentage of client that exit to a permanent housing destinations; and
- Percentage of client who exit within 180 days.

In addition to the Performance Goals above, the City of Detroit will evaluate the agency’s adherence to federal regulations and local guidance in regard to eligibility as set forth in the Policy Procedure manual found [here](#).

4. HOMELESS PREVENTION COMPONENT

TARGET POPULATION

The Homelessness Prevention component provides eligible financial assistance and support services to prevent homelessness for qualified program participants who are considered homeless, as defined by categories 2, 3 and 4 of the [Homeless Definition Final Rule](#), or who are at-risk of becoming homeless and have an annual income at or below 30% of median family income for the area as determined by HUD. *Please note that the City of Detroit requested a waiver of certain HUD regulations for programs operating within the Detroit CoC (MI501). The Waiver went into effect on April 18, 2020. Information regarding City of Detroit's Waiver Request and eligible uses of ESG-CV can be found [here](#).* Agencies must take care to ensure proper documentation is obtained and store with agency and client files.

SCOPE OF SERVICES

Homeless Prevention assistance is only allowable to the extent that the assistance is necessary to help program participants regain stability in their current permanent housing or achieve stability by moving into other permanent housing. The City of Detroit's preference is for provider to serve clients with a "light touch," in order to reach more households in housing crisis. This means that rental assistance or arrears should be **limited to three months** except when additional assistance is absolutely necessary. Eligible homeless prevention support services activities or programs are designed to prevent an incidence of homelessness. City funds may be used for the operations and direct financial assistance associated with the two Homeless Prevention activities described below:

RENTAL ASSISTANCE

Rental Assistance funds may be used to provide short and medium-term rental assistance to assist persons with maintaining their current housing or securing alternative housing without becoming homeless. The City of Detroit has elected to limit the length of assistance beyond HUD's regulatory guidance. To familiarize yourself with local expectations please refer to the [City of Detroit Policies and Procedures Manual](#). Rental assistance funds that may be provided can include:

1. Short-term rental assistance (up to 3 months);
2. Medium-term rental assistance (3-18 months);
3. Payment of rental arrears (one-time payment, up to 6 months) including any late fees on those arrears; or
4. A combination of short or medium-term rental assistance and rental arrears, as outlined as allowed by the [City of Detroit Policies and Procedures Manual](#)

HOUSING RELOCATION AND STABILIZATION

Housing Relocation and Stabilization funds may be used to support staff who work with participants who are eligible to receive homeless prevention assistance, as defined above; and to provide them with the necessary assessment and services to assist them in retaining their current housing or locating and moving into alternative permanent housing. Funds may also be used to provide direct financial assistance to assist people with moving into housing as outlined in the chart below:

Financial Assistance	Services	Other Eligible Costs
<ul style="list-style-type: none"> • Rental application fees • Security deposit • Last month's rent • Moving costs • Utility deposits • Utility payments 	<ul style="list-style-type: none"> • Housing search and placement • Housing stability case management • Mediation • Legal services • Credit repair 	<ul style="list-style-type: none"> • Staff and facility cost • Related financial assistance associated with provision of Prevention

Based upon assessed local need and identified local priority, the City will require that Homelessness Prevention providers:

- Coordinate with mainstream prevention services, including but not limited to Wayne Metropolitan Community Action Agency, The Heat and Warmth Fund (THAW), Michigan Department of Health and Human Services (MDHHS), and the 36th District Court;
- Conduct Housing Quality Standard (HQS) and habitability inspections, as well as lead compliance as required; and
- Serve all eligible clients without additional entry criteria or participation requirements.

Additional HUD requirements emphasized by the City include the following:

- Assistance **must** be provided in accordance with the housing relocation and stabilization services requirements in 24 CFR 576.105, the short and medium-term rental assistance requirements in 24 CFR 576.106, and the written standards and procedures established under 24 CFR 576.400;
- Program participants receiving rental assistance must have a legally binding written lease for the rental unit, unless the assistance is solely for rental arrears. Lease must be in participant's name and participant must retain the lease in the same name once they exist the program; and
- Subrecipients are required to have a rental assistance agreement with owners of the units housing program participants. Subrecipients may make rental assistance payments only to an owner with whom the recipient or subrecipient has entered into a rental assistance agreement.

PREVENTION PROGRAM PERFORMANCE MEASURES

The City will require that all Homeless Prevention providers track their performance on the following measures:

- Percentage of clients in the program for 3 months or less;
- Percentage of clients who exit to a permanent housing destination; and
- Percentage of clients that enter into homelessness within 1 year of program exit.

C. INELIGIBLE ACTIVITIES FOR ALL COMPONENTS

It is also important to note those activities and expenses that are NOT deemed eligible for reimbursement under the Homelessness Solutions program. These include:

- Staff recruitment;
- Facilities/equipment depreciation;
- Costs associated with the operation of the parent organization other than those associated with funded CDBG specific program;
- Costs associated with organizational outreach, advertisements, pamphlets, surveys, etc.;
- Staff training, entertainment, conferences or retreats;
- Public relations, advertising or fundraising expense;
- Payments for bad debts/late fees;
- Mortgage assistance/payments for program participants;
- Subrecipient mortgage/debt service;
- Indirect organizational costs, if an Indirect Cost Plan has not been accepted by the City prior to execution of the contract; and
- Rental assistance in any unit in which the subrecipient or subsidiary has one percent or more ownership interest in the property.

D. REVIEW AND SCORING OF PROPOSAL

Renewal and new applicants can use the appropriate review and scoring grids on the following pages to understand how submitted proposals will be reviewed and scored. A reminder that funding is subject to availability.

Important Note: Competitive applications are those that score above 80 total points. Applications scoring 70 total points or lower will not be considered for funding. The total points scored on an application will be considered for funding based on the following:

- **90-100 points-** may be considered for increased funding
- **70-80 points-** may be considered for reduced funding
- **0-70 points-** will not be considered for funding

RENEWAL APPLICANTS SCORING GRID

RENEWAL APPLICATION SECTION & SCORING CRITERIA <i>(scoring criteria in italics)</i>	POINTS POSSIBLE
<p>1. Organizational Experience in Addressing Homelessness</p> <p>a. Organizational background and services provided: <i>Response provides history, experience, and a detailed description of all organizational services. If new to homeless services, response describes current population served and steps to engage those experiencing homelessness</i></p> <p>b. Vacant Board positions: <i>Response provided includes steps to fill any vacant board positions, including expected completion date</i></p> <p>c. Characteristic data of the population served based on 2019 data: <i>Demographic chart completed in full. Identified if the data is agency level or from specific programs. If agency operated multiple programs, the data was combined</i></p> <p>d. HMIS Capacity</p> <p>i. Experience in HMIS (or comparable database for DV agencies ONLY): <i>Described in detail the agency's experience with HMIS (or comparable database for DV agencies only), including capacity to enter data accurately and timely. If no experience with HMIS, response clearly outlines a plan to onboard HMIS.</i></p> <p>ii. Universal Data Elements Threshold (Attachment #12): <i>Organization meets the 90% Universal Data Elements quality threshold required per the HMIS APR or comparable database report included. Verified by 252 report provided by CoC HMIS Lead - HAND.</i></p>	25
<p>2. Financial Capacity</p> <p>a. Financial management processes, procedures, and staff in place to oversee grant operations and administration: <i>Comprehensively describes the financial management processes, procedures, and staff in place to oversee CDBG and ESG funded operations and administration</i></p> <p>b. Subrecipient ability to submit timely payment packets and expenditure of grant: <i>Submitted monthly payment packets by the 15th of the month at least 90% of the time in 2019; Previously awarded grant(s) were fully expended by contract deadline</i></p> <p>c. Match requirements: <i>Answered in a detailed manner; agency understands the match requirement and provided a detailed plan for obtaining the required cash/non-cash match</i></p> <p>d. Tax and audit history: <i>Score based on number of findings, seriousness of finding(s), and resolution to finding(s)</i></p>	20
<p>3. Application Budget and Narrative</p> <p><i>Budget and narrative is complete, only eligible expenses are requested, and calculations are accurate. Narrative provides a description of the line item and how it relates to the program. Budget reflects the program as described in the application. The projection of cost per household seems reasonable and in line with past grant awards/ performance or if different, budget narrative provides a justification as to why the cost per household has increased.</i></p>	10
<p>4. Implementation Plans by Component</p> <p>Questions vary by component (Refer to Part II)</p> <p><i>Responses are complete, detailed, and answer all parts of the question. <u>For questions that require a policy and procedure:</u> Policy and procedure is attached and correctly states the regulation and process to adhere to it.</i></p>	30 pts. per component/ program
<p>5. Substantiated Grievances and Contract Violations</p> <p><i>1 Points will be subtracted from application score for each substantiated grievances specific to the program or contract violations in 2019 (not to exceed 5 points)</i></p>	0
<p>6. Performance Benchmarks</p> <p><i>Application will be scored based on 2019's ability to meet the performance benchmarks. Varies by program type.</i></p>	5
<p>7. Attachments</p> <p><i>All required attachments are uploaded, complete, and labeled correctly.</i></p>	10
TOTAL POSSIBLE POINTS	100

NEW APPLICANT SCORING GRID

NEW APPLICATION SECTION & SCORING CRITERIA <i>(scoring criteria in italics)</i>	POINTS POSSIBLE
<p>1. Organizational Experience in Addressing Homelessness</p> <p>a. Organizational background and services provided: <i>Response provides history, experience, and a detailed description of all organizational services. If new to homeless services, response describes current population served and steps to engage those experiencing homelessness</i></p> <p>b. Vacant Board positions: <i>Response provided includes steps to fill any vacant board positions, including expected completion date</i></p> <p>c. Characteristic data of the population served based on 2019 data: <i>Demographic chart completed in full. Identified if the data is agency level or from specific programs. If agency operated multiple programs, the data was combined</i></p> <p>d. HMIS Capacity</p> <p>i. Experience in HMIS (or comparable database for DV agencies ONLY): <i>Described in detail the agency's experience with HMIS (or comparable database for DV agencies only), including capacity to enter data accurately and timely. If no experience with HMIS, response clearly outlines a plan to onboard HMIS.</i></p> <p>ii. Universal Data Elements Threshold (Attachment #12): <i>Organization meets the 90% Universal Data Elements quality threshold required per the HMIS APR or comparable database report included. Verified by 252 report provided by CoC HMIS Lead - HAND.</i></p>	30
<p>2. Financial Capacity</p> <p>a. Financial management processes, procedures, and staff in place to oversee grant operations and administration: <i>Comprehensively describes the financial management processes, procedures, and staff in place to oversee CDBG and ESG funded operations and administration</i></p> <p>b. Subrecipient ability to submit timely payment packets and expenditure of grant: <i><u>New and current subrecipients:</u> Response clearly states process to submit timely payment packets and plan to expend grant by contract deadline. <u>Current subrecipients:</u> Submitted monthly payment packets by the 15th of the month at least 90% of the time in 2019; Previously awarded grant(s) were fully expended by contract deadline</i></p> <p>c. Match requirements: <i>Answered in a detailed manner; agency understands the match requirement and provided a detailed plan for obtaining the required cash/non-cash match</i></p> <p>d. Tax and audit history: <i>Score based on number of findings, seriousness of finding(s), and resolution to finding(s)</i></p>	20
<p>3. Application Budget and Narrative</p> <p><i>Budget and narrative is complete, only eligible expenses are requested, and calculations are accurate. Narrative provides a description of the line item and how it relates to the program. Budget reflects the program as described in the application. The projection of cost per household seems reasonable and in line with past grant awards/ performance or if different, budget narrative provides a justification as to why the cost per household has increased.</i></p>	10
<p>4. Implementation Plans by Component Questions vary by component (Refer to Part II)</p> <p><i>Responses are complete, detailed, and answer all parts of the question. <u>For questions that require a policy and procedure:</u> Policy and procedure is attached and correctly states the regulation and process to adhere to it.</i></p>	30 pts. per component/ program
<p>5. Attachments</p> <p><i>All required attachments are uploaded, complete, and labeled correctly.</i></p>	10
TOTAL POSSIBLE POINTS	100

E. APPLICATION INSTRUCTIONS

APPLICATION REQUIREMENTS

In order for an application to be accepted, the application **MUST**:

- Meet threshold criteria (as outlined in Part II, Section B)
- Include the submission of Part II of this application
- Include all applicable Forms and Attachments (listed in the Checklist section of this document)
- Meet the required deadline of July 8, 2020 by 4pm

Please note: The City will require only one application per organization, even when applicants are seeking funding for multiple components. **Applications that do not meet threshold criteria (see Part II, Section B) or that do not meet the deadline will not be accepted.**

Applicants must upload attachments and forms per the following instructions. Failure to upload and/or use the correct naming convention will result in a 5 point total reduction in score.

- Each form and attachment must be uploaded individually
- Each form and attachment must be clearly marked with the form or attachment number and document title as written on the attached document checklist (e.g. “A3 IRS Letter”)
- Each form and attachment’s file name must follow the same naming convention (e.g. A3 IRS Letter).
- The RFP must be uploaded in Microsoft Word Format
- Form 4 and Form 5 must be uploaded in Microsoft Excel Format

Important: Failure to follow these instructions will result in a 5 point total reduction in score. Any missing threshold attachments will result in the application not being accepted and scored, while any other missing attachments will result in a 5 point deduction per attachment.

SUBMISSION METHOD

New this year, agencies must submit their proposals through Oracle. To register through Oracle please go [here](#). A tutorial on this process can be found [here](#). Additional instructions for Oracle can be found on the City’s website- <https://detroitmi.gov/supplier>. Please note that you must use Firefox or Chrome web browser- the Supplier Portal does NOT work well with Internet Explorer.

Proposals must be uploaded into the Oracle system and time stamped no later than 4pm on July 8, 2020. Applicants are strongly encouraged to submit applications ahead of time to allow for any technical difficulties. Late submissions will not be accepted.

TIMELINE

2020-2021 Homelessness Solutions RFP Application Submission Deadline is July 8th at 4pm in Supplier Portal- Oracle at <https://ebkk.login.us8.oraclecloud.com/>. **Proposals will not be accepted after this time and date.** Mailed, faxed or emailed copies of the proposal will not be accepted.

COMPLETENESS

1. **The City will not contact organizations for missing information.** All applications meeting threshold will be reviewed and scored “as is.” Missing and/or incomplete information will negatively impact the overall application score and/or result in total disqualification of an application.
2. Organizations are encouraged to begin uploading all required documents prior to deadline to ensure adequate time to address any technical challenges.
3. Any questions regarding application content or process must be submitted via <https://ebkk.login.us8.oraclecloud.com/>.
4. Please review the 2020-2021 Homelessness Solutions RFP FAQ document *prior* to submitting questions. The City will provide two technical assistance workshops upon release of the RFP.

PROCUREMENT AND NON DISCRIMINATION NOTICE

The City Office of Contracting and Procurement solicitations meets 24 CFR Part 85.36 standards for procurement by competitive proposals. The City does not discriminate on the basis of race, color, creed, national origin, age, disability, sex or sexual orientation. Complaints may be filed with the [Civil Rights, Inclusion, & Opportunity Department](#), Suite 1240 Coleman A. Young Municipal Center Detroit, MI 48226 (313) 224-4950, crio@detroitmi.gov.

GRIEVANCE, APPEALS, AND TERMINATION PROCEDURES

The City Council/HRD Homelessness Solutions Appeal Hearing will serve as a formal opportunity for applicants to appeal the funding recommendations made to City Council. All applicants who applied for funding will receive notification of the date, time, and location for the Appeals Hearing. Appeals may only be made by those organizations that were not recommended for funding. Appeals are to be made in writing using the attached form (**Form 6**). The form is to be submitted on the day of the hearing at the registration table. Organizations are asked to retain a copy of the form for your records. Final decisions will not be made on the day of the appeal, but they will be addressed during the City Council's subsequent deliberations. Any applicant making an appeal after The Hearing of Appeals or desiring to appeal the subsequent decisions of the City Council may make such an appeal in writing through the office of the City Clerk utilizing the normal petition process.

The City may terminate awards or subrecipient contracts at any time if subrecipients violate program requirements as outlined in this RFP, the City's policies, and/or the subrecipient agreement. The termination will follow due process to protect subrecipients' rights based on the City's Grievance and/or written policies, subject to the department director's approval.

PART II: AGENCY INFORMATION

A. APPLICATION COVER SHEET

1. Applicant Organization Legal Name:
2. Applicant Mailing Address:
3. DUNS Number:
4. Federal ID Number:
5. Contact Person:
6. Telephone Number:
7. Email:
8. Website:
9. Is this Organization a 501(c) (3)? Yes No
10. Is your organization a faith-based entity? Yes No
11. Number of employees:
12. Number of employees that reside in the City of Detroit:
13. Program Component(s) for which you are applying (check all that apply):
 - Outreach-Street Outreach
 - Outreach- Navigation
 - Emergency Shelter
 - Emergency Shelter- Warming Center
 - Rapid Re-Housing
 - Homelessness Prevention
14. Check the funding source(s) you are willing to operate (check all that apply):
 - Homelessness Solutions Funding (ESG/CDBG)
 - ESG-CV

B. THRESHOLD REQUIREMENTS

The Application must meet the following basic eligibility requirements in order for an application to be accepted and considered for funding. *If the application does not meet the following threshold requirements, the application will not be reviewed or scored.*

1. Submission of a complete application *on time* in response to this RFP for FY 2020-2021 funding. Note: Your application's timestamp will be reviewed once submitted in Oracle to verify this threshold item.
2. Demonstrate at least 1 person who has experienced homelessness is represented on applicant agency's Board of Directors or agree to comply if awarded funds. This person must be clearly marked on the Board of Directors' Roster, evidenced in **Attachment 1**. (See checklist below for details)
3. Board of Directors meeting schedule for the 2020 calendar year as **Attachment 2**.
4. Current participation in the Detroit HMIS system OR if organization has participated in another HMIS system verifying at least 1 year of participation (See **Form 1a**) OR a data management plan if your organization has no HMIS experience (See **Form 1b**).
5. Proof of financial capacity to pay for expenses upfront (**Form 2**).

For new applicants ONLY: Has this agency applied for City of Detroit funds before? If no, agencies must submit the following documentation:

1. Private nonprofit corporation under state and local law with a current tax exemption ruling from the IRS, voluntary board of directors, with no part of its earnings inuring to its members, founders or an individual. If this is your organization's first time applying for Detroit public service funds, provide evidence in **Attachment 3** (see checklist for details).
2. At least two (2) years of experience serving vulnerable populations with public funding. If this is your organization's first time applying for CDBG Homeless Public Service or ESG funds, demonstrate through a submission of an award letter(s). **Attachment 4** (see checklist for details).

C. NARRATIVE QUESTIONS

All applicants must complete questions 1-2 in this section and applicable component questions in questions 3-4. Each response must be 200 words or less; failure to do so will result in a reduction in points.

1. ORGANIZATIONAL EXPERIENCE IN ADDRESSING HOMELESSNESS

- a. Provide background on your organization's history and experience serving those at risk of or experiencing homelessness. Outline ALL services provided by the organization to this population.

If you have not served this population in the past, please describe what services your agency provides to your current population as well as outlining the steps you will take to engage people experiencing homelessness, including participation in the Continuum of Care, as well as including your most recent Annual Report as **Attachment 6**.

- b. Are there any vacant positions on your Board of Directors? If so, what is your plan and timeline to fill those vacancies?

- c. Input the demographic information below. All applicants are required to complete this question.

- i. If you were previously funded for a CDBG and/or ESG program you must complete the chart below with 2019 calendar year (CY) data. If you are funded for multiple CDBG or ESG programs, combine the data from multiple programs.

OR

- ii. If you were not funded with CDBG and/or ESG funds in 2019, you must complete the section below with agency wide demographic data for all clients served.

Identify if the data is from all persons served by the agency or specific programs:

Agency wide data

Program Specific Data- If so, identify what program(s): _____

Total clients served (adults and children): _____

Single Adult households: _____

Households with Children: _____

Males: _____

Females: _____

Other Gender (Transgender or Gender Non-conforming): _____

Children served 17 and under: _____

Adults served aged 18-24: _____

Adults served aged 24-61: _____

Adults served aged 62 and older: _____

Chronic Households: _____

Veterans: _____

d. HMIS Capacity (agencies with prior HMIS experience must answer both questions):

i. Experience in HMIS (or comparable database for DV agencies)

Describe experience with HMIS (or comparable database for DV agencies), including capacity to enter data accurately and timely. If you are a new applicant, please complete **Form 1b** to describe your HMIS onboarding process to ensure accurate data entry.

ii. Universal Data Elements Threshold

To meet threshold, organizations must meet 90% Universal Data Elements (UDE) quality. Applicants must attach HMIS APR report for the homeless service program for which funding is being applied for in this RFP that your organization operated and entered HMIS data for during the 2019 calendar year. This report must be attached and labeled **Attachment #12** . Refer to Appendix C for further instructions.

2. FINANCIAL CAPACITY

<p>a. Describe the financial management processes, procedures and staff in place to oversee CDBG and ESG funded operations and administration.</p>
<p>b. Describe how you will ensure timely submission of complete monthly payment packets as well as expenditure of your grant by the contract deadline. Current subrecipients will be scored based on their previous performance in this area. If you are not a current subrecipient, please state so in your answer.</p>
<p>c. The City intends to meet HUD ESG match requirements with CDBG, however in some instances this may not be possible. In the event that you do not receive CDBG funds to match your ESG allocation, explain what cash and/or non-cash funds you will use for match.</p>
<p>d. Include any audit or audit findings that have arisen in the past five (5) years and their subsequent resolution or status.</p> <p>Check all that is applicable:</p> <p><u>Behind on 990 Filings:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><u>Unresolved IRS Findings:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><u>Any outstanding Federal or State Audit Findings, regardless of funding source, or closed audit findings that demonstrate significant fraud or misuse of funds.</u></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><u>Overdue corrective action responses from the City of Detroit HRD or Office of the Control audits.</u> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*If the answer was “Yes” to any of the items above, explain below. Attach supporting documentation in Attachment 10 to demonstrate resolution of the situation.</p> <p>If the organization has expended more than \$750K in federal funds within the last year, submit documentation of the completed single audit as Attachment 8 with application submission.</p>
<p>e. Other Financial Attachments: Organizations are also required to submit their current year budget, program budget for current housing crisis/shelter program services, and most recent Profit and Loss Statement- refer to Attachment 9 for more information.</p>

PART III: RENEWAL APPLICATION



This section should be completed by applicants who are applying for renewal funding ONLY. Renewals are defined as having an existing program funding through the City of Detroit through December 31, 2020, at minimum.

If you want to apply for a new program or a program that you are not currently operating with City of Detroit Funding, skip this section and complete Part IV- New Program Application.

3. IMPLEMENTATION PLANS BY COMPONENT

(30 Total Points Possible per component/program proposed)

Important: Applications requesting funding for several shelter programs or locations must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

The response should include a timeline to show how the program will stay on track with spending and billing.

Component #1- Outreach and Housing Navigation- Renewal Projects ONLY

Outreach and Housing Navigation

Check what services you are applying for:

- Street Outreach Only
- Navigation Only

Street Outreach Only (limit each question to 200 words or less)- Renewal Projects ONLY

Program Name: _____

**Applications requesting funding for more than one Street Outreach program must include a separate response for each program. Copy and paste the questions and grid and then clearly label the response by the program name.*

<p>a. Demonstrate a clear understanding of the needs and challenges of the unsheltered homeless population.</p>
<p>b. List the program days and hours of operations. Will the street outreach be available to conduct outreach during all hours of operations? If not, please explain and list timeframes when street outreach teams will not be available for field work. Programs that are available for a minimum of 5 days a week, 8 hours a day, will be awarded a higher number of points.</p>
<p>c. Do you have any Peer supports employed on your current outreach team and if so, how many? If not, do you plan on incorporating peer supports into your team model?</p>
<p>d. How will you coordinate with CAM and City-funded Navigation teams in order to move clients into a sheltered or permanent housing living situation?</p>
<p>e. How will you mobilize and respond during Code Blue situations? Please refer to the Program Components and Additional Information section of this RFP on page 14 for the definition of Code Blue.</p>
<p>f. Yes or No: Over the 2019 calendar year, did you have staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings. __Yes __No</p> <p>If yes, which workgroup did program staff participate in?</p>
<p>g. HMIS Component In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.</p>

Outreach- Street Outreach

OUTREACH- STREET OUTREACH PERFORMANCE MEASURES	2019 -2020 PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients that meet the definition of unsheltered homelessness	100% per HUD regulatory requirements			100% per HUD regulatory requirements
#2- Percent of clients who complete all CAM required assessments	<i>N/A- Will be determined in the 2020 calendar year</i>	N/A	N/A	<i>N/A- Will be determined in the 2020 calendar year</i>
#3- Percent of clients who exit to any sheltered destination	70%			85%

For each measure that did not meet the required benchmark, describe what changes you will make to ensure that your program will meet the required Performance Benchmarks in the 20-21 grant year:

Navigation Only (limit each question to 200 words or less)- Renewal Projects ONLY

Program Name: _____

*Applications requesting funding for more than one Navigation program must include a separate response for each program. Copy and paste the questions and grid and then clearly label the response by the program name.

<p>a. Demonstrate a clear understanding of the needs and challenges of the unsheltered homeless population.</p>
<p>b. List the program days and hours of operations. Will the entire or partial Navigation team be available to provide client services in the field during all hours of operations? In addition, please state if your program will be available to conduct street outreach as needed.</p>
<p>c. Indicate your staff to client ratio.</p>
<p>d. Describe what methods or techniques will be used to help clients become document ready for permanent housing?</p>
<p>e. Describe how you will directly connect persons served to housing providers to ensure the client successfully moves into permanent housing?</p>
<p>f. Yes or No: Over the 2019 calendar year, did you have staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings. __Yes __No</p> <p>If yes, which workgroup did program staff participate in?</p>
<p>g. HMIS Component</p> <p>In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.</p>

Outreach- Navigation

OUTREACH-NAVIGATION PERFORMANCE MEASURES	2019 -2020 PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients that meet the definition of unsheltered homelessness	100% per HUD regulatory requirements			100% per HUD regulatory requirements
#2- Percent of clients who become “document ready”	<i>N/A- Will be determined in the 2020 calendar year</i>	N/A	N/A	<i>N/A- Will be determined in the 2020 calendar year</i>
#3- Percent of clients who exit to a permanent housing destination	<i>N/A- Will be determined in the 2020 calendar year</i>	N/A	N/A	<i>N/A- Will be determined in the 2020 calendar year</i>

Component #2- Emergency Shelter- Renewal Projects ONLY

Emergency Shelter ONLY (Warming Center- see next section) (limit each question to 200 words or less).

Please note: If you are applying for renewal funding for several shelter programs or location, **you must submit a separate response for each program or location.** Clearly label the response by program, copy and paste the table below, along with the Performance Measures Grid, and answer the set of questions **for each program.**

Program Name: _____

*Applications requesting funding for several shelter programs or locations must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Shelter Name and Location:
b. Provide the purpose and objective of the program, the target population, the number of beds, and the number of clients served over the 2019 calendar year.
c. How many beds are in your shelter? How many of these beds will be funded in part or whole by City of Detroit funds?
d. Describe the full package of services to be provided by case management staff.
e. How will your shelter operate with a Housing First and Low Barrier approach? Your response should mirror the language found in your agency policy and procedure manual. Please provide your agency's Policy and Procedure regarding Housing First and Low Barrier as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Housing First and Low Barrier is discussed. Failure to do so will result in a loss of points.
f. How will your shelter adhere to the Equal Access Rule? Address both involuntary family separation and shelter placement for individuals that identify as transgendered. Please provide your agency's Policy and Procedure regarding Equal Access as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Equal Access discussed. Failure to do so will result in a loss of points.
g. Provide a staff to client ratio for your facility when it is operating at 100% occupancy. Provide different ratios for case management and security staff.

<p>h. Describe your walk-in policy and procedure if a household presents for emergency shelter after CAM hours have closed. How do you connect those clients with CAM?</p>
<p>i. All emergency shelters must allow households who present after CAM hours, as long as space permits. In order to streamline evening and weekend referrals, the City is seeking out a minimum of one single adult shelter and one family shelter that can be designated as an overflow shelter. Households that present after hours would still be referred to CAM the next business day. Please state if your agency is interested in being a designated overflow shelter and ensure that your budget justification reflects any additional staff.</p> <p><input type="checkbox"/> Yes, (insert shelter name) is willing to be a designated after hour referral shelter- please adjust your budget accordingly.</p> <p><input type="checkbox"/> No, (insert shelter name) is not willing to be a designated after hours referral shelter</p>
<p>j. Yes or No: Do you require sobriety and/or test for substance use or alcohol? __Yes __No</p>
<p>k. Yes or No: Do you have written policies and procedures that detail termination, including when it is appropriate to ban clients? __Yes __ No</p> <p>If yes, please provide your agency’s termination and ban policy and procedure as part of Attachment 11. Indicate the policy name and page number in this section. Failure to do so will result in a loss of points.</p>
<p>l. Yes or No: Over the 2019 calendar year, did you have staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings. __Yes __No</p> <p>If yes, which workgroup did program staff participate in?</p>
<p>m. HMIS Component-</p> <p>In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.</p>
<p>n. Describe how you will ensure that all clients served for 30 or more days will have a housing case plan documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.</p>

Emergency Shelter

EMERGENCY SHELTER PERFORMANCE MEASURES	2019-2020 PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Emergency Shelter utilization rate according to data reported CoC APR	90% Utilization			90%
#2- Percentage of exits to a permanent housing destination	Family Shelters: 70% Single Shelters: 18% Youth Shelters: 45%	Family Shelters: Single Shelters: Youth Shelters:	Family Shelters: Single Shelters: Youth Shelters:	Family Shelters: 73% Single Shelters: 34% Youth Shelters: 55%

Warming Center (limit each question to 200 words or less).

Please note: If you are applying for renewal funding for several warming center programs or location, **you must submit a separate response for each program or location.** Clearly label the response by program, copy and paste the table below along with the Performance Measures Grid and answer the set of questions **for each program.**

Program Name: _____

*Applications requesting funding for several warming center programs or locations must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Warming Center Name and Location:
b. Provide the purpose and objective of the program, the target population, the number of beds, and the number of clients served over the 2019 calendar year.
c. Describe your walk-in policy and procedure if a household presents for warming center after CAM hours have closed. How do you connect those clients with CAM?
d. How will your warming center operate with a Housing First and Low Barrier approach? Your response should mirror the language found in your agency policy and procedure manual. Please provide your agency's Policy and Procedure regarding Housing First and Low Barrier as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Housing First and Low Barrier is discussed. Failure to do so will result in a loss of points.
e. How will your shelter adhere to the Equal Access Rule? Address both involuntary family separation and shelter placement for individuals that identify as transgendered. Please provide your agency's Policy and Procedure regarding Equal Access as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Equal Access discussed. Failure to do so will result in a loss of points.
f. Provide a staff to client ratio for your facility when it is operating at 100% occupancy. Provide different ratios for case management and security staff.
g. Considering that the warming center is a seasonal program, describe how you will gear up to ensure your program is operational on the first day. Also, describe your ramping down plan, specifically addressing how you will move people out of the warming center and into other housing options.

<p>h. Yes or No: Do you require sobriety and/or test for substance use or alcohol? __Yes __No</p>
<p>i. Yes or No: Do you have written policies and procedures that detail termination, including when it is appropriate to ban clients?</p> <p>If yes, please provide your agency’s termination and ban policy and procedure as part of Attachment 11. Indicate the policy name and page number in this section. Failure to do so will result in a loss of points.</p>
<p>j. Yes or No: Over the 2019 calendar year, did you have program staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings.</p> <p>If yes, which workgroup did program staff participate in?</p>
<p>k. HMIS Component-</p> <p>In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.</p>
<p>l. Describe how you will ensure that all clients served for 30 or more days will have a housing case plan documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.</p>

Warming Center

WARMING CENTER PERFORMANCE MEASURES	2019-2020 PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Warming Center utilization rate according to data reported CoC APR	90%	Warming Centers:	Warming Centers:	90%
#2- Percentage of exits to a permanent housing destination	13%	Warming Centers:	Warming Centers:	17%

For each measure that did not meet the required benchmark, describe what changes you will make to ensure that your program will meet the required Performance Benchmarks in the 20-21 grant year:

Component #3- Rapid Re-Housing- Renewal Projects ONLY

Please note: If you are applying for renewal funding for several rapid re-housing programs or locations, you **must** submit a separate response for each project. Clearly label the response by program.

Program Name: _____

*Applications requesting funding for several Rapid-Re-Housing programs must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

<p>a. Provide a description of the services to be provided and details on how your organization provides housing-based case management.</p>
<p>b. What is the projected number of people to serve with the grant request?</p>
<p>c. What is the program’s case manager to client ratio? How will you ensure that the case manager to client ratio does not exceed 1:25?</p>
<p>d. How does your organization coordinate with landlord to ensure timely placement in quality housing?</p>
<p>e. Of the clients that were eligible for Housing Choice Vouchers (HCVs) in 2019, what percentage leased up using that subsidy and exited out of Rapid Re-Housing within 12 months? How will your program ensure that clients who qualify for HCVs lease up using this subsidy? Please describe the steps your agency takes to ensure clients are on the HCV waitlist, recertify for the waitlist, gather required documents, attend a briefing, and lease up?</p>
<p>f. Yes or No: Over the 2019 calendar year, did you have program staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings. If yes, which workgroup did program staff participate in?</p>
<p>g. Describe how you will ensure that all clients served for 30 or more days will have a case management services documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.</p>
<p>h. Describe how you will ensure that all clients served for 90 or more days will have a home visit documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.</p>
<p>i. HMIS Component- In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.</p>

Rapid Re-Housing

RAPID REHOUSING PERFORMANCE MEASURES	2019-2020 PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Average length of time to move clients into housing from program entry	75 days			62 days
#2- Percent of clients who exit to a permanent housing destination	94%			92%
#3- Percent of clients who exit within 180 days of program entry	65%			38%
<p>For each measure that did not meet the required benchmark, describe what changes you will make to ensure that your program will meet the required Performance Benchmarks in the 20-21 grant year:</p>				

Component #4- Prevention- Renewal Projects ONLY

Homelessness Prevention (limit each question to 200 words or less)

Program Name: _____

*Applications requesting funding for several prevention programs must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Provide a description of the services to be provided and details on how your organization provides housing-based case management.
b. How will your program ensure it is targeting households at imminent risk of homelessness as defined by HUD?
c. What is the projected number of people to be served with the grant request? Provide a justification for that number.
d. How do you determine how much financial assistance to provide households in order to maintain their housing stability?
e. HMIS Component In the grid below, provide outcomes achieved specific to the service you are applying for using data from the 2019 calendar year. You must attach your HMIS APR as Attachment 12 as well as Form 5- Outcome Calculation Workbook that was used to populate the grid below. 2019 Calendar Year Outcomes listed as N/A reflect data not listed in the CoC APR, therefore the City does not expect you to complete those fields.
f. Describe the measures your program will put in place to ensure clients remain housed within one year of program exit.

Prevention

PREVENTION PERFORMANCE MEASURES	PERFORMANCE BENCHMARKS	2019 CALENDAR YEAR PROGRAM PERFORMANCE	DID THE PROGRAM PERFORMANCE MEET OR EXCEED THE BENCHMARK? (Y/N)	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients in the program for three months or less	85%			90%
#2- Percent of clients who exit to a permanent housing destination	99%			99%

For each measure that did not meet the required benchmark, describe what changes you will make to ensure that your program will meet the required Performance Benchmarks in the 20-21 grant year

PART IV: NEW PROJECT APPLICATION



This section should be completed by applicants who are applying for new project funding ONLY. This section applies to agencies who may currently have City of Detroit Homeless Solutions funding, but would like to apply for a program activity that they are not currently operating, regardless if they have operated the program in the past. For instance, agency Elm Street operated a Rapid Re-housing program that ended in 2019. They are not currently operating a Rapid Re-Housing program and therefore would apply under Part IV: New Project Application.

If you want to apply for renewal funding, skip this section and complete Part III- Renewal Application.

IMPLEMENTATION PLANS BY COMPONENT

(30 Total Points Possible per component/program proposed)

Important: Applications requesting funding for several shelter programs or locations must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

The response should include a timeline to show how the program will stay on track with spending and billing.

Component #1- Outreach and Housing Navigation- New Projects ONLY

Outreach and Housing Navigation

Check what services you are applying for:

- Street Outreach Only
- Navigation Only

Street Outreach Only (limit each question to 200 words or less)- New Projects ONLY

Program Name: _____

*Applications requesting funding for more than one Street Outreach program must include a separate response for each program. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Describe your experience operating this program component.
b. List the program days and hours of operations. Will the street outreach be available to conduct outreach during all hours of operations? If not, please explain and list timeframes when street outreach teams will not be available for field work. Programs that are available for a minimum of 5 days a week, 8 hours a day, will be awarded a higher number of points.
c. How will your agency coordinate with both City and non-City funded Outreach teams to prevent duplicate services?
d. Demonstrate a clear understanding of the needs and challenges of the unsheltered homeless population.
e. What evidence-based practices and approaches will you use to engage with the unsheltered homeless population? Examples include harm reduction, motivational interviewing, and housing first.
f. Provide the staff qualifications for each position you are requesting funding for. What training has or will be provided to your staff aligned with the best practices you outlined in the previous question?
g. Do you have any Peer supports employed on your current outreach team and if so, how many? If not, do you plan on incorporating peer supports into your team model?
h. How will you coordinate with CAM and City-funded Navigation teams in order to move clients into a sheltered or permanent housing living situation?
i. How will you mobilize and respond during Code Blue situations? Please refer to the Program Components and Additional Information section of this RFP on page 14 for the definition of Code Blue.
j. How do you track, evaluate and improve program throughout the year? For instance, if you are not meeting your expected performance measures, how will you adjust?
k. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different than the outreach workers, how will information be communicated between the different personnel?

- l. **Yes or No:** Over the 2019 calendar year, did you have program staff that actively participated in CoC workgroup meetings? Actively participated is defined as attending at least half of all regularly scheduled meetings. If yes, which workgroup did program staff participate in?
- If no, please identify which staff person would be responsible for attendance these monthly or bimonthly meetings.
- m. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.

Outreach- Street Outreach

OUTREACH- STREET OUTREACH PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients that meet the definition of unsheltered homelessness	100% per HUD regulatory requirements
#2- Percent of clients served with completed all CAM required assessments	<i>N/A- Will be determined in the 2020 calendar year</i>
#3- Percent of clients who exit to any sheltered destination	85%

Navigation Only (limit each question to 200 words or less)- New Projects ONLY

Program Name: _____

*Applications requesting funding for more than one Navigation program must include a separate response for each program. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Describe your experience operating this program component.
b. List the program days and hours of operations. Will the entire or partial Navigation team be available to provide client services in the field during all hours of operations? In addition, please state if your program will be available to conduct street outreach as needed.
c. Demonstrate a clear understanding of the needs and challenges of the unsheltered homeless population.
d. What evidence-based practices and approaches will you use to engage with the unsheltered homeless population? Examples include harm reduction, motivational interviewing, and housing first.
e. Provide the staff qualifications for each position you are requesting funding for. What training has or will be provided to your staff received on the best practices you outlined in the previous question?
f. Indicate your staff to client ratio
g. How will you work with both City and non-City funded Outreach teams, the CAM Lead Agency, and the managers of the Chronic By-Name-List to identify clients for Navigation?
h. Describe what methods or techniques will be used to help clients become document ready for permanent housing?
i. Describe how you will provide clients a direction connection to housing providers to ensure each client successfully moves into permanent housing?
j. How do you track, evaluate, and improve program throughout the year? For instance, if you are not meeting your expected performance measures, how will you adjust?

- k. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different than the outreach worker, how will information be communicated between the different personnel?
- l. How will you ensure that program staff actively participate in CoC workgroup meetings during the 2020/2021 contract year?
- m. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.

Outreach- Navigation

OUTREACH- NAVIGATION PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients that meet the definition of unsheltered homelessness	100% per HUD regulatory requirements
#2- Percent of clients who become “document ready”	<i>N/A- Will be determined in the 2020 calendar year</i>
#3- Percent of clients who exit to a permanent housing destination	<i>N/A- First time the City is funding Navigation; a benchmark will be established in the following year</i>

Component #2- Emergency Shelter- New Projects ONLY

Emergency Shelter ONLY (Warming Center- see next section) (limit each question to 200 words or less)

Please note: If you are applying for funding for several shelter programs or locations, **you must submit a separate response for each program or location.** Clearly label the response by program, copy and paste the table below, along with the Performance Measures Grid, and answer the set of questions **for each program.**

Program Name: _____

*Applications requesting funding for several shelter programs or locations **must** include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Shelter Name and Location:
b. Describe your experience operating this program component.
c. Provide the purpose and objective of the program, the target population, number of beds, and the number of clients served over the 2019 calendar year if program was operational.
d. How many beds are in your shelter? How many of these beds will be funded in part or whole by City of Detroit funds?
e. Describe the full package of services to be provided by case management staff.
f. What evidence-based practices and approaches will work with people experiencing homelessness? Examples include harm reduction, person-centered planning, and motivational interviewing.
g. How will your shelter operate with a Housing First and Low Barrier approach? Please provide your agency's policy and procedure regarding Housing First and Low Barrier as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where this topic is discussed. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.

<p>h. How will your shelter adhere to the Equal Access Rule? Address both involuntary family separation and transgender shelter placement. Please provide your agency's policy and procedure regarding Equal Access as part of the required documents for Attachment #11, indicating the name of the policy name and page number. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.</p>
<p>i. How many people do you anticipate serving if your application is awarded?</p>
<p>j. Provide a staff to client ratio for your facility when it is operating at 100% occupancy. Provide different ratios for case management and security staff.</p>
<p>k. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different from the shelter staff, how will information be communicated between the different personnel?</p>
<p>l. Provide a narrative or staffing chart to demonstrate staff qualifications and roles. What training has or will be provided to your staff on Housing First, Low Barrier, and any other relevant topics?</p>
<p>m. Describe how you ensure that all intakes come from CAM and that anyone entering shelter after CAM hours connects clients with the CAM within 48 hours.</p>
<p>n. Yes or No: Do you require sobriety and/or test for substance use or alcohol? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>o. Yes or No: Do you have written policies and procedures that detail termination, including when it is appropriate to ban clients? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please provide your agency's termination policy and procedure as Attachment 11. If yes, please provide your agency's termination and ban policy and procedure as part of Attachment 11. Indicate the policy name and page number in this section. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.</p>
<p>p. Describe your walk-in policy and procedure if a household presents for emergency shelter after CAM hours have closed.</p>

q. All emergency shelters must allow households who present after CAM hours, as long as space permits. In order to streamline evening and weekend referrals, the City is seeking out a minimum of one single adult shelter and one family shelter that can be designated as an overflow shelter. Households that present after hours would still be referred to CAM the next business day. Please state if your agency is interested in applying to an overflow shelter and ensure that your budget justification reflects any additional staffing.

- Yes, (insert shelter name) is willing to be a designated after hour referral shelter- please adjust your budget accordingly.
 No, (insert shelter name) is not willing to be a designated after hours referral shelter

r. How will you ensure that program staff actively participate in CoC workgroup meetings during the 2020/2021 contract year?

s. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.

t. Describe how you will ensure that all clients served for 30 or more days will have a housing case plan documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.

Emergency Shelter

EMERGENCY SHELTER PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Shelter utilization rate according to data reported on CoC APR	90% Utilization
#2- Percentage of exits to a permanent housing destination	Family Shelters: 73% Single Shelters: 34% Youth Shelters: 55%

Warming Center (limit each question to 200 words or less)- New Projects ONLY

Please note: If you are applying for funding for several warming center programs or location, **you must submit a separate response for each program or location.** Clearly label the response by program, copy and paste the table below along with the Performance Measures Grid and answer the set of questions **for each program.**

Program Name: _____

*Applications requesting funding for several warming center programs or locations must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Warming Center Name and Location:
b. Describe your experience operating this program component.
c. Provide the purpose and objective of the program, the target population, and the number of beds.
d. Describe how you will connect clients, specifically those who enter after hours, with CAM.
e. How will your warming center operate with a Housing First and Low Barrier approach? Please provide your agency's Policy and Procedure regarding Housing First and Low Barrier as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Housing First and Low Barrier is discussed. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.
f. How will your warming center adhere to the Equal Access Rule? Address both involuntary family separation and transgender shelter placement. Please provide your agency's Policy and Procedure regarding Equal Access as part of the required documents for Attachment #11. In addition, indicate the name of the policy name and page number where Equal Access discussed. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.
g. How many people do you anticipate serving if this application is awarded?
h. Provide a staff to client ratio for your facility when it is operating at 100% occupancy. Provide different ratios for case management and security staff.

<p>i. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different than the warming center staff, how will information be communicated between the different personnel?</p>
<p>j. Provide a narrative or staffing chart to demonstrate staff qualifications and roles. What training has or will be provided to your staff on Housing First, Low Barrier, and any other relevant topics?</p>
<p>k. Considering that the warming center is a seasonal program, describe how you will gear up to ensure your program is operational on the first day. Also, describe your ramping down plan, specifically addressing how you will move people out of the warming center and into other housing options.</p>
<p>l. Yes or No: Do you require sobriety and/or test for substance use or alcohol? __Yes __No</p>
<p>m. Yes or No: Do you have written policies and procedures that detail termination, including when it is appropriate to ban clients?</p> <p>If yes, please provide your agency's termination and ban policy and procedure as part of Attachment 11. Indicate the policy name and page number in this section. Failure to do so will result in a loss of points. If you do not yet have a policy regarding this, please state when such policy would be in place.</p>
<p>n. How will you ensure that program staff actively participate in a CoC workgroup meetings for the 2020/2021 contract year?</p>
<p>o. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.</p>
<p>p. . Describe how you will ensure that all clients served for 30 or more days will have a housing case plan documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.</p>

Warming Center

WARMING CENTER PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Warming Center utilization rate according to data reported CoC APR	90%
#2- Percentage of exits to a permanent housing destination	17%

Component #3- Rapid Re-Housing- New Projects ONLY

Please note: If you are applying for funding for several rapid re-housing projects, you **must** submit a separate response for each program or location. Clearly label the response by program.

Rapid Re-Housing (limit each question to 200 words or less)

Program Name: _____

*Applications requesting funding for several Rapid-Re-Housing programs must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Describe your experience operating this program component.
b. Provide a description of the services to be provided and details on how your organization provides housing-based case management.
c. What evidence-based practices and approaches will work with people experiencing homelessness? Examples include harm reduction, person-centered planning, and motivational interviewing.
d. Provide the staff qualifications for each position you are requesting funding for. What training has or will be provided to your staff received on the best practices you outlined in the previous question?
e. How will your program operate with a housing first approach?
f. What is the projected number of people to serve with the grant request?
g. What is the program's case manager to client ratio? How will you ensure that the case manager to client ratio does not exceed 1:25?
h. How does your organization coordinate with landlord to ensure timely placement in quality housing?
i. Of the clients that were eligible for Housing Choice Vouchers (HCVs) in 2019, what percentage leased up using that subsidy and exited out of Rapid Re-Housing within 12 months? How will your program ensure that clients who qualify for HCVs lease up using this subsidy? Please describe the steps your agency takes to ensure clients are on the HCV waitlist, recertify for the waitlist, gather required documents, attend a briefing, and lease up?

j. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different than the direct program staff, how will information be communicated between the different personnel?
k. How will you ensure that program staff actively participate in a CoC workgroup meetings for the 2020/2021 contract year?
l. Describe how you will ensure that all clients served for 30 or more days will have a case management services documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.
n. Describe how you will ensure that all clients served for 90 or more days will have a home visit documented. Provide detail on how you will ensure staff will record this information in HMIS following guidance provided in CY 2020 training.
o. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.

Rapid Re-Housing

RAPID REHOUSING PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Average length of time to move clients into housing from program entry	62 days
#4- Percent of clients who exit to a permanent housing destination	92%
#5- Percent of clients who exit within 180 days of program entry	38%

Component #4- Prevention- New Projects ONLY

Homelessness Prevention (limit each question to 200 words or less)

Program Name: _____

*Applications requesting funding for several prevention programs must include a separate response for each program or location. Copy and paste the questions and grid and then clearly label the response by the program name.

a. Describe your experience operating this program component.
b. Provide a description of the services to be provided and details on how your organization provides housing-based case management.
c. How will your program ensure it is targeting households at imminent risk of homelessness as defined by HUD?
d. What is the projected number of people to serve with the grant request and provide a justification for that number?
e. What is the program's case manager to client ratio and provide a justification for that ratio?
f. How does your organization coordinate with mainstream services to address the full spectrum of households needs for those who are served?
g. How does your organization coordinate with landlords, utility companies, and/or the courts to keep people in housing?
h. How do you determine how much financial assistance to provide households in order to maintain their housing stability?
i. Provide a narrative or staffing chart to demonstrate staff qualifications and roles. Identify best practices your staff are trained on, including person-centered planning, and motivational interviewing.
j. Identify the staff role(s) that will be responsible for all HMIS data entry. If this role is different than the direct program staff, how will information be communicated between the different personnel?
k. Describe the measures your program will put in place to ensure clients remain housed within one year of program exit.
l. Provide information on why you believe your organization is qualified to serve this population and meet the expected outcomes for the program year. Discuss how you will ensure you will meet the performance benchmarks.

Prevention

PREVENTION PERFORMANCE MEASURES	2020-2021 PERFORMANCE BENCHMARKS
#1- Percent of clients in the program for three months or less	90%
#2- Percent of clients who exit to a permanent housing destination	99%

D. Checklist of Forms and Attachments

The checklist below indicates the forms and attachments that must be submitted with the application. Indicated Yes (Y) or No (N) in the “Attached” Column to indicate if a document is attached. *Each Attachment document must be titled with the appropriate number and title (for example - “A3 IRS letter”). Please insert the title at the top of the first page of each attachment as well as label each attachment’s files name using the same naming convention. See bolded text under “Document Description” for document number and title. Any missing attachments will result in a 5 point reduction per missing attachment.*

Attachment or Form #	Document Description <i>(bold lettering indicates number and title of document)</i>	Attached? Y/N
THRESHOLD (applications must meet threshold to be considered for funding)		
MINIMUM REQUIREMENTS FOR ALL APPLICANTS		
Attachment 1	A1: Board Participation of a Person with Lived Experience of Homelessness - verification of the participation of a board member who is or has experienced homelessness	
Attachment 2	A2: Board of Directors 2019 Meeting Schedule	
Form 1a	F1a: HMIS Certification - only for those applicants who do not currently participate in Detroit’s HMIS but have participated in another jurisdiction’s HMIS for at least 1 year.	
Form 1b	F1b: HMIS Onboarding Plan - only for those applicants that do not currently participate in any HMIS system	
Form 2	F2: Cash on Hand Certification	
THRESHOLD FOR NEW APPLICANTS ONLY		
Attachment 3	A3: IRS letter verifying tax-exempt 501(c)(3) status	
Attachment 4	A4: Proof of 2 years of experience operating programs with public funding as demonstrated by funding letter(s)	

REQUIRED ATTACHMENTS

ORGANIZATIONAL EXPERIENCE IN ADDRESSING HOMELESSNESS		
Attachment 5	A5: Organizational chart - including positions and key roles	
Attachment 6	A6: Annual Report (only for agencies who have not served the homeless population prior)	
Form 3	F3: Certifications and Assurances	
FINANCIAL CAPACITY		
Attachment 8	A8: CPA prepared Financial Statements for most recent year-end and Single Audit	
Attachment 9	A9: Budgets - Current year organizational budget, program budget for housing crisis/shelter program services, and most recent Profit and Loss Statement	
Attachment 10	A10: Resolution of Findings - Documentation showing status/resolution of any City, HUD and/or IRS findings	
IMPLEMENTATION PLANS BY COMPONENT		
Form 4	F4: Application Budget and Narrative - excel document must be completed for each program/component for which you are applying (Form in separate excel document posted with RFP). If applying for multiple shelter programs, please submit a separate shelter budget for each.	
Attachment 11	A11: Policies and Procedures for each applicable component	
Attachment 12	A12: HMIS CoC APRs used to complete 2019 Outcomes	
Form 5	F5: Outcome Calculation Workbook	
Attachment 13	A13: Certificate of Occupancy (Shelters only)	
Attachment 14	A14: Emergency Shelter License , copy of 1 st page of Emergency Shelter License stamped by consumer affairs department, or copy of receipt indicating payment of app fee for License (Shelters only)	
OPTIONAL: FOR APPLICANTS SUBMITTING APPEALS OF FUNDING DECISIONS		
Form 6	F6: Appeal Form	

APPENDIX A: ELIGIBLE PROGRAM PARTICIPANTS

Homeless or at-risk status must be documented by subrecipients for each program participant.

Definition (per Homeless Definition Final Rule)			Eligible Component
Category 1	Literally Homeless	Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: i) Has a primary nighttime residence that is a public or private place not meant for human habitation; 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 or 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.	Emergency Shelter Rapid Re-Housing Street Outreach and Navigation
Category 2	Imminent Risk or Homelessness	Individual or family who will immediately lose their primary nighttime residence, provided that: i) Residence will be lost within 14 days of the date of application for homeless assistance 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	Emergency Shelter Homelessness Prevention

<p>Category 3</p>	<p>Homeless Under Other Federal Statutes</p>	<p>Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> i) Are defined as homeless under the other listed federal statutes; ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application; iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers 	<p>Emergency Shelter</p> <p>Homelessness Prevention</p>
<p>Category 4</p>	<p>Fleeing/ Attempting to Flee Domestic Violence</p>	<p>Any individual or family who:</p> <ul style="list-style-type: none"> i) Is fleeing, or is attempting to flee, domestic violence ii) Has no other residence; and iii) Lacks the resources or support networks to obtain other permanent housing 	<p>Emergency Shelter</p> <p>Rapid Re-Housing</p> <p>Homelessness Prevention</p>

“At Risk” Homeless Definitions (Homeless Definition Final Rule)		Eligible Component
Individuals and Families	<p>An individual or family who:</p> <ul style="list-style-type: none"> i) Has an annual income <u>below 30% of median family income</u> for the area; AND ii) Does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the “homeless” definition; AND iii) Meets one of the following conditions: <ul style="list-style-type: none"> A) Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR B) Is living in the home of another because of economic hardship; OR C) Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR D) Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for low-income individuals; OR E) Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR F) Is exiting a publicly funded institution or system of care; OR G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved Con Plan 	Homelessness Prevention
Unaccompanied Children and Youth	A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute	Homelessness Prevention
Families with Children and Youth	An unaccompanied youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him/her.	Homelessness Prevention

APPENDIX B: “DOCUMENT READY”

Client Information Face Sheet and Audit List Permanent Supportive Housing

Audit Checklist: Please place a checkmark in the first column for documents that are included in this packet. For each item please check off.

Required (HoH):

Navigator	Admin	Documentation
		PSH Face Sheet
		Photo ID <input type="checkbox"/> State issued driver’s license or Identification Card <i>or</i> <input type="checkbox"/> Passport <i>or</i> <input type="checkbox"/> City of Detroit ID (not accepted by all programs) <i>or</i> <input type="checkbox"/> Service Point ID (not accepted by all programs)
		Social Security Cards (or copy of Social Security Administration receipt of application)
		Disability Verification (VOD) <input type="checkbox"/> Verification of Disability Form (signed by a person who is licensed to diagnose and treat the disability) <i>or</i> <input type="checkbox"/> Written verification of disability from the Social Security Administration <i>or</i> <input type="checkbox"/> Receipt of Disability Check from the Social Security Administration
		Verification of Homelessness (dated within 30 days of submission)
		Verification of Chronicity (if applicable) <input type="checkbox"/> 9 months verified <input type="checkbox"/> 4 or more months self-certified (not accepted by all programs)

For each child under the age of 18:

		Birth Certificate(s)
--	--	----------------------

If a minor child is not in HoH’s legal custody: proof must be provided that custody will be obtained with housing stability

For each additional household member (age 18 and older):

		Photo ID
		Social Security Cards (or copy of Social Security Administration receipt of application)

If Available:

		Proof of income for all household members
		DTE documentation
		Supporting disability documentation <input type="checkbox"/> Psychiatric Evaluation and/or <input type="checkbox"/> HIV/AIDS status and/or <input type="checkbox"/> Medical records of physical disability and/or <input type="checkbox"/> Substance use disorder diagnosis

Uploaded or Entered into HMIS:

		VI-SPDAT
		Full SPDAT
		Referral to CAM
		ROI (uploaded and electronically entered)
		Photo ID
		Birth Record(s)
		Verification of Homelessness
		Verification of Chronicity
		Verification of Disability
		Proof of Income

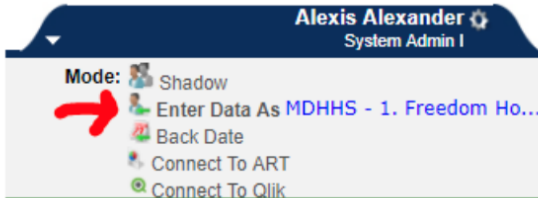
√: Included in packet O: Missing or Insufficient N/A: Not Applicable

APPENDIX C: “RUNNING AND SAVING THE CoC APR AS A PDF”

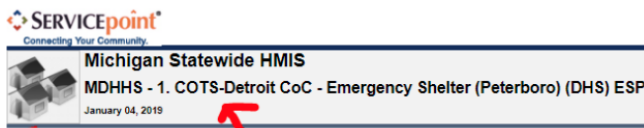
Agencies currently using HMIS to document clients served should refer to steps 1-4 on pages 1-2 and page and step 14 on page 11 of the job aide found [here](#).

Running and Reviewing the CoC APR

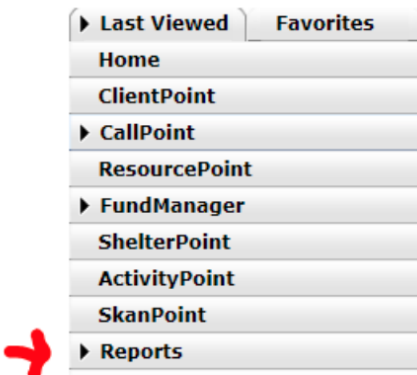
1. EDA as the project you are running the report for.



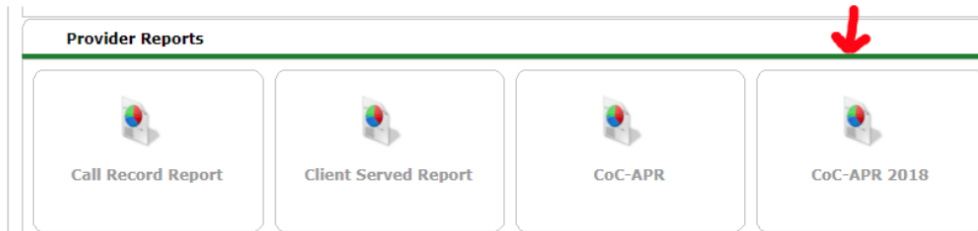
Note: Some staff may automatically default to this project and can skip this step after checking the program listed in the upper right corner of their ServicePoint login home screen.



2. On the left-hand side of your screen, go to the “Reports” module



3. Under “Provider Reports” click the tile labeled “CoC APR 2018”



4. Complete the prompts for the project you are running the report for. *Make sure the provider matches the page you may have EDA'd into in step 1 above.* Once prompts are completed, select "build report". For **program date range**, you will likely want to match this up with your project's grant term if another set of reporting parameters is not provided by the entity requesting your APR. Once prompts are completed, select **build report**.

Report Options

Provider Type Provider Reporting Group

Provider* Mariners Inn-45 Day Residency Program - Detroit CoC (184)

This provider AND its subordinates This provider ONLY

Program Date Range* 02 / 01 / 2018 to 01 / 30 / 2019

Entry/Exit Types* Basic Basic Center Program Entry/Exit HUD PATH Quick Call RHY Standard Transitional Living Program Entry/Exit VA HPRP (Retired)

14. If you wish to save a PDF copy of your APR, this can be done by:
 - a. Right clicking inside of the report. Then selecting "print" → save as PDF → Save. *Note: You may wish to include the project in the file name.*

The screenshot shows a web browser interface. On the left, a table with the header 'ghlight Clients' is visible. A right-click context menu is open over the table, with the 'Print...' option selected. To the right of the table, a print dialog is displayed. The dialog shows 'Print' with 'Total: 15 pages'. The 'Destination' is set to 'Save as PDF'. The 'Pages' section has 'All' selected. The 'Layout' is set to 'Portrait'. A red arrow points to the 'Save' button in the print dialog.

- b. OR by printing a copy directly from your internet browser and then scanning it to save as a PDF.