

2019 Schenectady CoC – Project Rank & Review Application

Please generate a CoC Calendar Year 2018 (CY 1/1/18 – 12/31/18) APR (**new format**) from Foothold to complete the Rank and Review Application.

A. PROJECT INFORMATION

Informational Only

A1. Organization Name: _____

A2. Project Name: _____

A3. Application Contact Person: _____

A4. Project Type: PH TH SSO

A5. FY18 Funding Request: \$ _____

Leasing	\$ _____
Rental Assistance	\$ _____
Supportive Services	\$ _____
Operations	\$ _____
Admin	\$ _____

A6. Housing Projects Only: Number of Contracted Units/Beds/Vouchers _____
Support Service Only Projects: Projected persons/households served during an average PIT _____

A7. Total # Participants served (as noted on the most recent APR): _____

A8. What is the cost per bed (divide the number of proposed beds by the total budget): _____

A9. PROJECT DESCRIPTION

In a separate document, provide a short project overview that clearly describes the project’s unique characteristics and achievements. Please include the target population(s) served, the number of participants served, how participants access the project, and project goals and achievements. Please be as descriptive as possible by using data stated in the project application and the CY18 APR. Response must be 250 words or less.

B. LOCAL PRIORITIES AND COMMUNITY IMPACT (TOTAL 120 POINTS)

B1. Project Type. Please note the project type **PH=10, TH=9, SSO=10:** PSH SSO TH

B2. Utilization Rate -Using the project’s most recent Project Application and APR, complete the following chart to calculate the project’s utilization rate. *(B2 and B2.A) Please print and attach the corresponding questions from the Project Application and APR.*

100%=20, 99-90%=16, 89-86%=12, 85-80%=8, 77-75%=4, >75%=0

	Projected households served during an average PIT (Question 5 in Project Application)	Actual number served during PIT (Questions 8 in APR)
		Households

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January	_____ Households	
April		
July		
October		
		Average:

Households: Average Actual _____ / Projected _____ = **Utilization** _____

B2.A -If the utilization rate is under 100%, please explain the reason why. For example were there barriers or specific challenges to achieving 100% capacity? **0 to 10pts**

B3. Leveraging and Coordination of Services. Please describe how your project coordinates services with other funded and non-funded providers in order to leverage services in no more than 250 words. **0 to 5pts**

B4. Local Strategic Plan. Please note how the project is meeting a noted gap in services (either current or previous; including housing) as noted in the Schenectady Strategic Plan which can be found on the CoC’s website <http://caresny.org/continuum-of-care/schenectady-homeless-services-planning-board/> under *Other Documents*. Response must be 250 words or less. **0 to 5pts**

B5. Financial Drawdowns. Does your project draw down funds, at a minimum, quarterly? Please attach the last three (3) LOCCS drawdowns. **Yes=5, No=0**

B6. Funds Spent. Please complete the table below based on information from the project's most recently completed contract. **90-100%=20, 80-89%=16,70-79%=12, 60-69%=8,50-59%=4, >50%=0**

	Amount Awarded (\$)	Amount Expended (\$)	Percentage Spent (Expended/Awarded)
Leasing			
Rental Assistance			
Supportive Services			
Operations			
Admin			
Total			

B6.A Did the project spend at least 90% of total awarded funds? If the project expended less than 90% of total awarded funds, please explain in 250 words or less. **0 to 10 pts**

B7. Priority Populations. Is the project dedicated to one of the following priority populations: This information can be found in the Project Application sections 4B and 5B.

B7.A - Is the project fully dedicated to chronically homeless, youth or veterans?

Yes=10 **No=0**

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B7.B – If the project is not fully dedicated, but has chronically homeless dedicated beds, what percentage of the project is dedicated to chronically homeless? (Number of dedicated beds/total number of beds) **100%=10, 80-99%=8, 50-79%=6, 20-49%=3, 10-19%=1, >10%=0**

B7.C. Effect of Chronic Homeless.

Permanent Supportive Housing Programs: During CY18, the CoC **PSH projects** served a total of 89 chronically homeless individuals. Please refer to Attachment 1 to note the following:

B7.C1. The total number of chronically homeless persons this project served in CY18: _____ (no points)

B7.C2. The percentage of the project total that was chronically homeless: _____

50-100%=10, 30-49%=7, 20-39%=4, 6-19%=1, 0-5%=0

Rapid Rehousing Programs: During CY18, the CoC **RRH projects** served a total of 1 chronically homeless individuals. Please refer to Attachment 1 to note the following:

B7.C3. The total number of chronically homeless persons this project served in CY18: _____ (no points)

B7.C4. The percentage of the project total that was chronically homeless: _____ (0 to 10 points)

50-100%=10, 30-49%=7, 20-39%=4, 6-19%=1, 0-5%=0

Transitional Housing Programs: During CY18, the CoC **TH projects** served a total of 0 chronically homeless individuals. Please refer to Attachment 1 to note the following:

B7.C5. The total number of chronically homeless persons this project served in CY18: _____

B7.C6. The percentage of the project total that was chronically homeless: _____ (0 to 10 points)

50-100%=10, 30-49%=7, 20-39%=4, 6-19%=1, 0-5%=0

B8. Housing First. Does the project screen out or terminate based on any the following?

All checked=10, anything else=0

	Yes	No
Having too little or no income	<input type="checkbox"/>	<input type="checkbox"/>
Active or history of substance abuse	<input type="checkbox"/>	<input type="checkbox"/>
Criminal record with exceptions for state-mandated restrictions	<input type="checkbox"/>	<input type="checkbox"/>
History of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>
Failure to participate in supportive services	<input type="checkbox"/>	<input type="checkbox"/>
Failure to make progress on a service plan	<input type="checkbox"/>	<input type="checkbox"/>
Loss of income or failure to improve income	<input type="checkbox"/>	<input type="checkbox"/>
Being a victim of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>
Any other activity not covered in a lease agreement typically	<input type="checkbox"/>	<input type="checkbox"/>

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found in the project's geographic area.

B9. Continuum Participation. In the last twelve (12) months (May 2018 – May 2019) there have been a total of 2 Membership Meetings and 4 Board Meetings. What percentage of these 6 meetings has the project staff attended, and thereby actively participated in the CoC planning process? This will be verified by the Collaborative Applicant. _____% of meetings were attended by this agency.

75-100%=10, 50-74%=5, 25-49%=1, 0-24%=0

B10. Continuum Participation. In the last twelve (12) months (May 2018 – May 2019), has the project staff actively participated in any CoC committees? This will be verified by the Collaborative Applicant.

2 Committees and 50% attendance=10

1 Committees and 50% attendance=5

0 Committees =0

Please check off any of the following you have actively participated in:

- Continuum of Care Committee
- Governance Committee
- Data Committee
- Strategic Planning Committee of the Board

B11. Coordinated Entry Process. Does your project participate in the Coordinated Entry process as demonstrated by any of the following criteria: Check all that apply? **2 points each**

_____ receive referrals for potential new participants

_____ submit referrals

_____ house referrals

_____ submit weekly openings to CE

_____ has your agency attended at least half of the CE meetings this year

B11.A If not, are you an SSO program? **Yes (5 points)**

B12. Project Monitoring. Project Monitoring: Every project received a 2018 data memo. Were all noted issues addressed by the deadline given? Please attach the follow up feedback email from CARES.

Yes with attachment=10 No=0

C. SYSTEM PERFORMANCE OUTCOMES

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C1. Number of Homeless Persons: Was this project included in the final submission of the 2019 Housing Inventory and Point in Time? This will be verified by the Collaborative Applicant. Yes=10 No=0

C2. Data Quality: On your CY18 APR Question 6: **None checked=5, 1-2 checked=3, 3 or more=0**

	Yes	No
C2.A. Is more than 5% of your PII data missing or null?	<input type="checkbox"/>	<input type="checkbox"/>
C2.B. Is more than 5% of your universal data elements missing or null?	<input type="checkbox"/>	<input type="checkbox"/>
C2.C. Is more than 5% of your Income and Housing data missing or null?	<input type="checkbox"/>	<input type="checkbox"/>
C2.D. Is more than 5% of your Chronic Homelessness data missing or null?	<input type="checkbox"/>	<input type="checkbox"/>

C3. DV Providers Only: The CoC acknowledges that positive outcomes for domestic violence programs may be measured differently than main stream permanent supportive housing programs. With that being said, how does your agency contribute to the housing stability of clients within this CoC funded program? **0 to 5 points**

C4. Youth Providers Only: The CoC acknowledges that additional barriers occur for youth compared to adults when looking at increasing income. With that being said, how do you feel your agency contributes to increasing income for youth within this CoC program? **0 to 5 points**

C5. Move on Strategy: HUD defines Move on Strategy as how programs work to help program participants, who no longer require intensive services, transition from CoC Program funded PSH beds to other housing assistance programs (including, but not limited to HCV and Public Housing) in order to free up CoC Program funded PSH beds to be used for persons experiencing homelessness. Briefly describe what you will be doing in FY19 to work with participants to create strategies and plans for moving on? **0 to 5 points**

Permanent Supportive Housing or Transitional Housing Only

***New projects are excluded from this section and will be weighted.**

Note: Our Youth funded SSO program is excluded from this section.

C6. Housing Stability Performance - Please refer to Attachment 2 and note the project's Housing Stability Performance. The attachment takes into account all outcomes (positive, neutral, negative):

100%=20, 90-99%=15, 80-89%=10, > 80%=0 _____

C6.A. As noted in the Project Application (6A. Standard Performance Measures), please note the Housing Stability Goal: **No points** _____

C6.B– Please comment on any unique circumstances that affected the housing stability goal and affected the housing stability performance: Response must be 250 words or less. **0 to 5pts**

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C6.C– DV Providers Only: Recognizing the unique needs of the Domestic Violence population, please describe how your program works to assist victims of Domestic Violence in their effort to regain and maintain housing stability? Response must be 250 words or less. **0-3pts**

C7. Income Performance - *Please print and attach the corresponding questions from the APR.* Using the APR Question 19a3, please enter the following:

C7.A What percentage of adults gained or increased earned income from employment at entry to follow-up/exit? **100-84%=10, 83-68%=8, 67-52%=6, 51-36%=4, 35-20%=2, >20%=0** _____

C7.B What percentage of adults gained or increased other income from entry to follow-up/exit? _____
100-91%=10, 90-82%=8, 81-73%=6, 72-64%=4, 63-54%=2, >54%=0

C7.C (Optional, unless less than 20%) Please comment on any unique circumstances affecting the income performance measure (e.g., total project size, project type or target population) and/or steps to be taken to improve program outcomes. (250 words or less) **0 to 10 pts**

C8. Non-Cash Benefits of Leavers: Using the APR Question 20, please enter the following):

C8.A What percentage of all leavers exited the program with at least one type of non-cash benefit? Add up all leavers with 1+ sources of non-cash benefits and divide by total number of leavers. _____
70-100%=10, 26-69%=5, >26%=0

C8.B (Optional) Please comment on any unique circumstances affecting the non-cash benefits of leavers (e.g., total project size/type or target population). **0 to 5pts**