# Southern Tier Entry to Programs & Services (STEPS)

# Rank & Review Application 2020 Part II – Project / System Performance Narratives

**\*New projects will be weighted during scoring.**

#### PROJECT INFORMATION

*Informational Only*

**1.** Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3.** Application Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4.** Project Type:PSH RRH TH SSO (regular)

**5.** FY19 Funding Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Leasing $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rental Assistance $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supportive Services $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Operations $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Admin $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### PROJECT DESCRIPTION In a separate document, provide a brief project overview clearly describing the project’s unique characteristics. Please include the target population/s and number of participants served, number of contracted beds/units/vouchers and cost per bed, how participants access the project, as well as project goals and achievements. Please explain the primary services provided to participants, as well as any supplementary services available. Please be as descriptive as possible by using data stated in the project application and the project’s Fiscal Year 2019 APR. Response must be 300 words or less.

**1. Utilization (0-20 pts)**If the utilization rate of *both* households and persons in your project was less than 100% in 2019 due to circumstance beyond the project’s control (e.g., natural disaster, pandemic), please explain why in 250 words or less.

**2.** **Coordinated Entry (0-10 pts)** *[Note: This question will be weighted for GPD Projects; CoC CE Lead will verify all responses)*

**2a.** Does your project receive referrals through the Coordinated Entry (CE) process **ONLY**?

**□ Yes 5 pts □ No 0 pts**

**2b.** Do you regularly attend the monthly HMIS/CE meetings? **□ Yes 5 pts □ No 0 pts  
  
OR  
  
2c.** If your agency is a victim services provider (or if you otherwise answered ‘No’ to Q2a) explain barriers to direct participation in CE and how you engage with partners involved (250 words or less). **0-5 pts**

**3. Leveraging and Coordination of Services (0-5 pts)**Describe how your project coordinates services with other funded and non-funded providers to leverage services.How has increased collaboration among providers affected the project’s housing stability and/or impacted participant income growth to include non-cash benefits? You may refer to your FY19 APR to demonstrate specific income growth.(250 words or less)

**4. Local Strategic Plan (0-5 pts)**Note how the project is meeting a noted gap in services (either current or prior; including housing) as noted in the Southern Tier Entry to Services and Programs CoC’s Strategic Plan (which is based on the federal plan, “Opening Doors”). 250 words or less.

**5. Housing First (0-5 pts)**Housing First is a recovery-oriented approach to ending homelessness by rapidly housing individuals **without** screening out or terminating based on any of the below criteria. Does your project screen out or terminate based on any the following? ***Any Yes -*** ***0 All No - 5 pts***

**Yes No**

Having too little or no income

Current or past substance abuse

Criminal record (except for state-mandated restrictions)

History of domestic violence

Failure to participate in supportive services

Failure to make progress on a service plan

Loss of income or failure to improve income

Being a victim of domestic violence

Any other activity not covered in a lease agreement typically

found in the project's geographic area.

**6***.* **Continuum Participation (0-10 pts)**

Does the project or agency staff regularly participate in any of the following CoC standing or ad hoc committees? *(CARES will verify via attendance sheets*) **□ Yes 10 pts □ No 0 pts**

Board  Governance  Membership

Rank & Review  CE  Planning

HHTF  HMIS

**7. Consolidation:** Is this project a newly consolidated project?  **Yes 5 pts**  **No 0 pts**

**8.** **Move on Strategy (0-5 pts)**HUD-defined Move-On Strategy refers to how agencies move participants no longer needing intensive services from CoC funded PSH project to other housing assistance programs (including, but not limited to, HCV and Public Housing) to free up beds for persons experiencing homelessness. Briefly describe your FY20 plan to create a move-on strategy.

**9.Domestic Violence Projects *Only* (0-5 pts)**Outcomes considered positive for DV programs may not be the same as positive outcomes for Permanent Supportive Housing programs. That said, how do you feel your agency contributes to housing stability across the CoC?