

ALBANY COUNTY COALITION ON HOMELESSNESS (ACCH)

DV Bonus Project RFP 2021

Application may not exceed three (3) pages

1. Applicant/Agency Name: _____
2. Agency Point of Contact: _____
3. Proposed Project Name: _____
4. Please circle the project type you are applying for:
 - A. Permanent Housing-Rapid Rehousing *(project must be housing first)
 - B. Joint TH and PH-RRH-Must be housing first *(project must be housing first)
 - C. Support Services Only-Coordinated Entry Project – if CoC already has a CE project the application must be an expansion.
5. Is the project you are applying for a new or expansion project? **Yes** ___ **No** ___
6. Agencies must have an HMIS-comparable database for capturing client data to be eligible for funding.
Does your agency currently have a system for capturing client data? **Yes**___ **No**___
If you do not currently have one, how will you implement a system for reporting?

7. **Eligible DV bonus project must follow a Housing First approach.** Housing First is a recovery-oriented approach to ending homelessness which allows for rapidly housing individuals without screening out or terminating based on any of criteria listed below. Does the proposed project screen out or terminate based on any of the following? ***If you respond “Yes” to any of the following, your project is not be eligible to apply for this funding.***

	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 found in the project's geographic area.	<input type="checkbox"/>	<input type="checkbox"/>

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8. Is the applicant a current member of the Albany County Coalition on Homelessness (ACCH) Continuum of Care (CoC)? **Yes - 10 points** **No - 0 points**
9. A. Is the agency applying as a current CoC funded grantee? **Yes - 5 pts** **No - 10 pts**
- B. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?
 Yes - 0 points **No - 3 points**
10. Please provide a detailed description of the agency's experience in administering projects dedicated to serving survivors of domestic violence, dating violence and stalking. Please specify the name of current or past programs and note the funding sources (**up to 10 points**)
- 3 points for past experience serving a domestic violence survivor population
 - 3 points for four or more years serving a domestic violence survivor population
 - 3 points for serving more than 25 households in a calendar year (CY)
 - 1 point for listing funding sources
11. Please provide a description addressing the entire scope of your project. Please include an outreach plan to the targeted population. Specify whether the project will be a Rapid Rehousing (PH-RRH) project, Joint TH and PH-RRH component project or a SSO project for Coordinated Entry (SSO-CE) designed to implement policies, procedures and practices to equip the CoC's Coordinated Entry system to better meet the needs of survivors of domestic violence, dating violence, sexual assault or stalking (e.g., policies and procedures that are trauma informed, client centered or to improve the referral process between the CoC's Coordinated Entry and victim service providers Coordinated Entry systems where they are different). Please provide details about Housing First aspects of the project.
(0 - 25 points)
- 10 pts project description
 - 8 pts if a clear and detailed outreach plan is included
 - 2 pts if the project clearly states the number of units/beds requested
 - 2 pts if applying for an SSO-CE project (if a DV CE is not funded)
 - 3 pts for housing first model description
12. Please describe how this project addresses a current gap in services that has been identified in your geographic region. Please quantify this gap and how your project addresses it using an HMIS-comparable database and/or a local data source.
Agency will receive full points if they adequately demonstrate a gap in services that their project addresses using data.
Yes__ 10 points No__ 0 points

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13. Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities?
Yes __ 3 points No __ 0 points
14. How will the agency ensure program participants have the resources they need to prevent transmission of COVID-19? **(up to 3 points)**
- 1 point if the agency has/will have a partnership with a healthcare agency that provides regular health screenings
 - 1 point if the agency will provide PPE/sanitation supplies to staff/program participants as needed
 - 1 point if the agency describes how it will build COVID-19 vaccine confidence
N/A for applications for Coordinated Entry; these questions will be weighted.
15. Please detail the steps your agency takes to ensure the safety of program participants.
(up to 5 points)
- 1 point if agency uses de-identified aggregate data from a comparable database.
 - 2 points if agency has safety, planning, and confidentiality protocols in place for DV project participants.
 - 2 points if agency uses a trauma-informed, victim-centered approach to their project.
16. Will the project be able to start within 12 months? **Yes - 10 pts** **No - 0 pts**
17. Is your agency an active participant in the ACCH Coordinated Entry program?
 Yes - 3 pts **No - 0 pts**

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18. Please provide a 12-month Budget Proposal (required for review):

ACTIVITY	CoC FUNDS REQUESTED	NOTES
A. Rental Assistance (80% total budget less Admin)	\$	
B. Support Services (20% total budget less Admin)	\$	
1. Salaries	\$	
2. Benefits	\$	
3. Other	\$	
C. Operating	\$	
D. Admin	\$	
E. Total Project Costs	\$	
MATCH	AMOUNT	SOURCE
F. 25% Match Requirement	\$	