

**ALBANY COUNTY COALITION ON
HOMELESSNESS (ACCH)
New Project RFP 2021
(Reallocation and/or Bonus Projects)**

Application not to 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 Supportive Housing that is either DedicatedPLUS OR has 100% of beds dedicated to persons experiencing chronic homelessness.
 - B) Permanent Housing-Rapid Rehousing
 - C) Joint TH and PH-RRH (project must be housing first)
 - D) HMIS (HMIS Lead Only)
 - E) Support Services Only-Coordinated Entry Project
5. Is the project you are applying for a new or expansion project? **Yes** ____ **No** ____
6. Does your agency currently report in the CoC's HMIS system or will you implement HMIS to ensure HUD reporting compliance for CoC funds?
Yes _____ **No** _____
7. Is the applicant a current member of the Albany County Coalition On Homelessness (ACCH) Continuum of Care (CoC)? **Yes - 10 points** **No - 0 points**
8. A. Is the agency applying a current CoC funded grantee?
 Yes - 0 points **No - 5 points**
B. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC?
 Yes - 0 points **No - 3 points**
9. Is your agency an active participant in the ACCH Coordinated Entry?
 Yes - 3 pts **No - 0 pts**
10. Please provide a detailed description of the agency's experience in administering projects dedicated to serving an underserved population (i.e. your target population). Please specify the name of current or past programs and note the funding sources. (up to 10 points)

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11. Priority Population

What percentage of beds are dedicated to a priority population?

- 100% Chronically Homeless (CH), Youth, Veteran, or Victims of DV = **10 pts**
- ≥ 50% CH, Youth, Veteran or Victims of DV = **5 pts**
- No priority population = **0 pts**

12. Please provide a project description that addresses the entire scope of your project. Please include the target population that will be served and the outreach plan. If the proposed project follows a Housing First model, please specifically detail Housing First aspects. (0 – 20 points)

- 10 points if you outline a detailed strategy that will be used to help participants regain and maintain housing stability.
- 1 point if the project clearly states the number of units/beds requested
- 2 points if an outreach plan is noted
- 2 points if the budget notes at least 80 percent of the requested funds are dedicated to housing
- 5 points if the narrative details how the project will implement the housing first model

13. Housing First (10 pts)

Housing First is a recovery-oriented approach to end homelessness by rapidly housing individuals **without** screening out or terminating consumers based on any of the criteria below. Does your project screen out or terminate consumers based on any the following?

	<i>Any Yes - 0 All No - 10 pts</i>	
	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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14. Both HUD and the local community prioritize projects that provide healthcare services to program participants. Does your project (or will your project by the time of CoC Application submission) have a written commitment with a health care organization that ensures the value of assistance being provided will:

In the case of a substance abuse treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services, OR

An amount that is equivalent to 25 percent of the funding being requested for the project will be covered by the healthcare organization. Value of the commitment and dates of services must be included in the written commitment.

Yes __ 10 points No __ 0 points

N/A for applications for Coordinated Entry; these questions will be weighted.

15. Both HUD and the local community prioritize projects that incorporate PSH or RRH units using funds other than CoC or ESG (i.e. ESSHI, NYSSHP, private sources such as CDPHP).

Will your project expand upon an awarded or existing PSH or RRH project not funded through CoC or ESG? **Yes __ 10 points No __ 0 points**

N/A for applications for Coordinated Entry; these questions will be weighted.

Please note: *projects must attach letters of commitment, contracts, or other formal written documents that demonstrate the number of subsidies or units being provided to support the project, exemplifying the existing resources provide for at least 25% of the units proposed for the expanded project.*

16. How will your program identify and connect clients with wrap-around services they require (e.g., mental and/or physical health care, peer support or other services for formerly incarcerated persons and for those aging out of the foster care system, etc.)?
(0-5 Points)

17. Will the project be able to begin within 12 months? **Yes- 5 points** **No - 0 points**

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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	\$	