

Rockland County Continuum of Care (RCCC) New Project RFP 2022 (Reallocation and/or Bonus Projects)

Application not to exceed five (5) pages.

Please note: if your project is selected to move forward in applying for CoC funding, you will need to submit an application in Esnaps. Being selected through the Rank & Review process does not guarantee funding; rather it allows the project to apply for CoC funding to HUD, which is a competitive process.

Applicant/Agency Name: _____

Agency Point of Contact: _____

Proposed Project Name: _____

Which of the below eligible project types are you applying for?

- a. Permanent Supportive Housing (must be DedicatedPlus or 100% dedicated to chronically homeless)
- b. Rapid Rehousing
- c. Joint Transitional Housing-Rapid Rehousing
- d. HMIS
- e. Coordinated Entry

Is the project you are applying for an expansion project? Yes ___ No ___

Is the project you are applying for a new project? Yes ___ No ___

1. Is the applicant a current member of the Rockland County Continuum of Care? Continuum of Care (CoC)? Yes – 10 points No – 0 points

2. Is the agency applying a current CoC funded grantee?

a. If yes, are there any unresolved monitoring or audit findings from HUD or the CoC? **Yes – 0 points** **No – 5 points**

b. Within the past 2-years have any of the CoC funded projects for which your agency administers given money back to HUD? Please attach your last 2-years eLOCCS closeouts. Please only consider projects that are the same project type you are applying for. **Yes - 0 points** **No - 5 points**

3. Is your agency an active participant in the RCCC Coordinated Entry?

Yes – 5 points **No - 0 points**

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4. Does your agency currently report in the CoC's HMIS system?

Yes – 1 pts No - 0 pts,

4 a. If not, how will you implement HMIS for this project? (0- 3 pts,) if agency details how HMIS implementation will be accomplished?

5. Agency Experience

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.

(0-10 points)

- 4 pts for detailing past experience serving and underserved population 2 points for explaining how you have connected clients to supportive services
- 2 points for providing an example of how your agency has moved clients from assisted housing to housing they could sustain—and how the agency will address housing stability after the housing subsidy ends
- 2 points for describing how you prioritize program participant choice

6. 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

7. Project Description

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.

(0 – 15 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 and specifies how the project will conduct targeted outreach to persons least likely to apply and/or traditionally underserved populations (i.e. BIPOC, LGBTQ+ community)
- 2 points if the budget notes at least 80 percent of the requested funds are dedicated to housing OR *a description that the project is asking for more than 20% Support Services because they are serving the hardest to serve.*

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8. Housing First (0-25 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?

Any Yes - 0 All No -25 pts

	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"/>

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

10 . Does your agency have a policy focused on ensuring equitable services and program outcomes across participants of all races and ethnicities? Please attach policy to this application.

Yes __5 points No __0 points

HUD NOFO Priorities 2022

11. Does your agency have someone with lived experience of homelessness within its Executive Leadership, who are involved with programmatic and funding decisions?
 Yes- 1 points **No – 0 points**

12. Does your agency have a racially and ethnically diverse group of stakeholders who are responsible for making programmatic and funding decisions?
 Yes- 4 points **No – 0 points**

12a. If not, how does your agency plan to incorporate the views of a diverse set of stakeholders into reviewing your policies, procedures, and funding decisions?
 (0-3 points)

3pts if applicant can identify a plan for incorporating diverse stakeholder views in the future

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13. System Performance

How will this project reduce the average length of time homeless for project participants?
(0-2pts)

- 2pts if applicant describes how their project will serve those with the longest lengths of time homeless and strategies for reducing length of time homeless.

14. Unsheltered Services

Describe the support services your agency has tailored to serve persons coming from an unsheltered situation. (0-2pts)

15. Leveraging Agreements with Housing/Healthcare/Workforce Development

Does your agency have relationships/partnerships with any of the below?
Check all that apply. (1 pt for each checked box)

- Public/Private Healthcare Organizations
 PHAs, local housing organizations, or other non-CoC/ESG funding streams
 Local Workforce Development Sectors

If you checked partnerships above, please respond to 15a-c as appropriate

15a. Healthcare Organization - If you checked Public/Private Healthcare Organizations, does your agency have a written commitment from a health care organization with the value of the commitment and the date(s) the healthcare resources will be provided, or can you procure one by September 15th if your project is chosen to move forward*?

- Yes- 5 points** **No – 0 points**

**Please note, this commitment will be submitted with the CoC's full CoC Application so the CoC is awarded additional points.*

15b. PHA Partnership- If you checked PHAs, local housing organizations, or other non-CoC/ESG funding streams, will your project utilize housing subsidies or subsidized housing units not funded through the CoC or ESG by: **providing at least 25 percent of the units** included in the project; or in the case of a rapid re-housing project, **serve at least 25 percent of the program participants** anticipated to be served by the project*?

- Yes- 5 points** **No – 0 points**

**Please note, this commitment will be submitted with the CoC's full CoC Application so the CoC is awarded additional points.*

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15c. Local Workforce Partnership- If you checked Local Workforce Development Sectors, do you have a written commitment or other document demonstrating your partnership, or could you procure one if your project is chosen to move forward?

Yes- 5 points **No – 0 points**

16. Coordination with LGBTQ Population

Does your organization partner with other organizations with expertise in serving the LGBTQ+ population? If yes, how will you leverage those partnerships to serve your project participants? (0-4 points)

- 2 points if applicant identifies specific organizations that they partner with
- 2 points if applicant describes how they will leverage the partnership(s) for project clients

17. 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	\$	