

Consolidated Funding Application

REQUEST FOR PROPOSALS

CITY FISCAL YEAR 2024

JULY 1, 2023 – JUNE 30, 2024

Release date: February 8, 2023

Application Deadline: March 17, 2023 at 4:00pm



MAYOR'S OFFICE OF
HOMELESS SERVICES

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Introduction

The Mayor’s Office of Homeless Services is requesting new and renewal project proposals from qualified non-profit organizations to provide services to individuals and families who are: (1) at-risk of homelessness, (2) currently homeless, and/or (3) low-income and living with HIV or AIDS.

Providers may submit application for program(s) and be considered for multiple eligible sources of funding that are administered by the Mayor’s Office of Homeless Services (MOHS), listed in the table below. While the exact amount of available funding has not yet been confirmed, MOHS anticipates funding and has provided estimates based on prior funding cycles. Programs receiving funding under this Request for Proposals will perform service(s) during the City Fiscal Year (CFY) 2024 beginning July 1, 2023 through June 30, 2024.

| Funding Source | Anticipated Funding** |
|--|-----------------------|
| U.S Department of Housing and Urban Development - Emergency Solutions Grant (ESG) | \$1,881,169.00 |
| State of Maryland - Homelessness Solutions Program (HSP) | \$3,297,802.00 |
| Baltimore City Department of Social Services (DSS) | \$314,128.00 |
| U.S. Department of Housing and Urban Development - Housing Opportunities for Persons with AIDS/HIV (HOPWA) | \$6,629,108.00 |
| Maryland Department of Health (MDH) – State Special Funds | \$690,249.00 |
| Baltimore City General Funds* | \$7,633,938.00 |

* Please note that this is a new funding opportunity through the Consolidated Funding Application process. Recipients that have received General Funds in FY 2023 (July 1, 2022-June 30, 2023) will need to apply for funding in this grant cycle.

** Amounts above are estimates only. MOHS will fund sub-recipients based on the actual availability of funds in FY 2024.

CFA Timeline

Please review the table below for key dates.

| Consolidated Funding Application CFY 2024 Timeline | |
|--|---|
| February 8, 2023 | Consolidated Funding Application (CFA) RFP is released |
| February 15, 2023 12:00 pm | Bidder’s Conference Webinar at 12:00 pm: Zoom link Recommended for all new and renewal applicants. A recording and slide deck will be posted on the CFA Competition page found through the MOHS Grant Opportunities website. |
| March 17, 2023 4:00 pm | Application Deadline of 4:00 pm – All applications must be submitted electronically to HSPApplications@baltimorecity.gov |
| March 20-April 7, 2023 | Application review period |
| April 2023 | Notice of conditional awards |
| May 2023 | Contract development begins |
| July 1, 2023 | Grant term begins for all selected projects |

Funding Priorities and Context

The CFY 2024 CFA prioritizes projects that meet the needs of persons experiencing homelessness, particularly projects that address goals that align with the following three key objectives:

1. Reduce the rate of first-time homelessness;
2. Reduce the time individuals and households remain homeless; and to
3. Reduce returns to homelessness.

To help accomplish this goal, the CFA funds a full spectrum of housing and services to prevent and end homelessness, including eviction prevention, day centers, emergency shelter, transitional housing, street outreach, rapid rehousing, permanent housing supportive services, and housing and services for people living with HIV or AIDS. Review the Eligible Project Activities and Costs Section to understand the different grant opportunities. The CFA will continue to emphasize both individual project performance and strategic allocation of resources to meet the community goal of reducing the amount of time households are homeless and quickly connect them to permanent housing.

Our work is guided by the HEARTH Act, which calls on communities to work together to solve the issue of homelessness. The HEARTH Act recognizes that homelessness is not a problem that exists in isolation and that the response to homelessness cannot be unilateral. To accomplish this goal, the HEARTH Act has several key provisions:

- To codify the membership requirements and function of the Continuum of Care, requiring the establishment of a collective body to guide the work of homelessness and housing assistance in each community.
- To mandate the creation of a coordinated entry system for each community to better target resources and ensure clients receive the most appropriate services and housing options, and sets the expectation that each individual program will be evaluated on their contribution toward achieving system-level outcomes to reduce the incidence and duration of homelessness.

The HEARTH Act shifts the focus from looking at each individual program separately to evaluating the collective impact of all available community services in a given area. From this broader view of a systems approach to homelessness, local leaders can plan and tailor homeless services programming in a way that leads to improved service coordination, better use of resources, and better outcomes for clients. The HEARTH Act asks communities, specifically local units of government and each individual service provider, to see themselves as active players in ending homelessness in their community. The objectives of the HEARTH Act are reflected in the *Journey Home – Baltimore City Continuum of Care Action Plan* and the *YHDP Coordinated Community Plan*.

Eligible Projects

To determine if your project and/or activities are eligible for funding through the Consolidated Funding Application, start by identifying the type of project you plan to operate. Please note that some project types have several potential eligible funding sources, and some project types are only eligible for renewal applications. If the project is approved for funding, MOHS will assign the most appropriate funding source according to the project's proposed activities. Please refer to Appendix for additional details.

| Project Type | Application | | Funding Source, with full descriptions in the section below | | | | | |
|---|-------------|---------|---|---------------|-----|-------|-----|---------------|
| | New | Renewal | ESG | HSP/HSP Youth | DSS | HOPWA | SSF | General Funds |
| Street Outreach | X | X | X | X | | | | X |
| Emergency Shelter | X | X | X | X | X | | | X |
| Rapid Re-Housing | X | X | X | X | | | | |
| Housing Stabilization & Homelessness Prevention | X | X | X | X | | | | |
| Housing and Services for People with HIV/AIDS | X | X | | | | X | X | |
| Support Services for Permanent Supportive Housing | | X | | X | | | | |
| Transitional Housing | | X | | X | | | | |

Funding Sources

The Consolidated Funding Application (CFA) awards funds from six sources that operate with separate funding guidelines and restrictions on eligible activities. Project grants from the CFA typically fall between \$25,000.00 and \$150,000.00.

- Emergency Solutions Grant Program (ESG)** – Of the estimated \$1,881,169.00 available in ESG funds, 7.5% for the program’s administrative costs are allocated to MOHS. Approximately **\$1,740,081.00** will likely be available to fund projects with eligible street outreach activities, the operation of emergency shelters, homelessness prevention services, rapid re-housing programs, and essential services for people in emergency shelters and day resource center programs. Street outreach and emergency shelter activities combined cannot exceed 60 percent of the full grant. MOHS utilizes a portion of ESG funds to build system capacity and operate the City’s Homeless Management Information System (HMIS) and Coordinated Access. Activities must conform to the [ESG Program Interim Rule](#).
- State of Maryland Homelessness Solutions Program (HSP)** – Of the estimated \$3,297,802.00 of available State of Maryland funds, approximately 10% for the program’s administrative costs are allocated to MOHS. Approximately **\$2,968,022.00** will be available to fund projects with eligible street outreach activities, the operation of emergency shelters, essential services for people in emergency shelters and day center programs, homelessness prevention services, and rapid re-housing programs. DHCD annually announces minimum and maximum activities, therefore activities such as homeless prevention and rapid re-housing may be prioritized to meet the regulatory requirements. Approximately **\$150,000.00** of the available funds will be dedicated to unaccompanied youth and young adults experiencing homelessness or at risk of homelessness. Activities must conform to the [State’s Policy Guide](#).

- **Department of Social Services (DSS)** – Approximately \$314,128.00 will be available to provide nightly emergency shelter and supportive services for up to twenty-five (25) individuals and family households experiencing homelessness.
- **Housing Opportunities for Persons With AIDS Program (HOPWA)** – Of the estimated \$6,629,108.00, approximately **\$200,000.00** will be available for short-term rent, mortgage, and utility (STRMU) services, permanent housing placement (PHP), employment and education assistance services, childcare services (only to support those utilizing employment and education services), and life skills management and legal services that serve persons living with HIV or AIDS, as they conform with the [HOPWA Program Regulations](#). The remainder of the funds are allocated the Baltimore-Towson Eligible Metropolitan Statistical Area and Maryland counties.
- **Maryland Department of Health - State Special Funds (SSF)** – Of the estimated \$690,249.00, approximately **\$200,000.00** will be available for housing case management and housing services (short- and medium-term housing) for low income persons living with HIV/AIDS. These activities must conform with [Ryan White HIV/AIDS Program Services: Eligible Individuals and Allowable Uses of Funds \(Policy Clarification Notice 16-02\)](#).
- **General Funds** – Approximately \$7,633,938.00 will be available in Baltimore City General Funds for new and renewal applicants. Please note that this is a new funding opportunity through the 2024 CFA. MOHS is soliciting applications for street outreach and emergency shelter. All recipients of FY 2023 General Funds must apply for funding through the CFA process in FY 2024.

PLEASE NOTE: If a project is approved for funding, MOHS will assign the project to the most appropriate funding source. All awards made under the CFA allocation process will be conditional awards and subject to change until executed grant agreements are received by MOHS from the State of Maryland and the U.S. Department of Housing and Urban Development (HUD) and a contract between MOHS and the recipient agency is fully executed by the Board of Estimates. Conditional allocations are made based on the assumption that funding streams will remain steady. Please note that we cannot guarantee level funding from cycle-to-cycle, as these programs have experienced significant funding reductions in previous years.

Participant & Homeless Eligibility

Please review the program participant eligibility requirements for each project type in the chart below, followed by a full description of each eligibility criteria. These definitions of homelessness will apply to all eligible program participants who participate in CFA-funded programs, excluding programs funded by HOPWA or Ryan White/State Special Funds. See: [Full HEARTH Act Homeless Definition](#).

| Project Type | Program Participant Eligibility | | | | |
|---|---|--|---|--|--|
| | Homeless Category 1: Literally Homeless | Homeless Category 2: Imminent Risk of Homelessness | Homeless Category 4: Fleeing/ Attempting to Flee DV | At-Risk Category 1: Individuals and Families | At-Risk Category 2: Unaccompanied Children and Youth |
| Street Outreach | X | | X | | |
| | <i>Individuals and families must also be living on the streets (or other places not meant for human habitation) and be unwilling to access services in emergency shelter.</i> | | | | |
| Emergency Shelter | X | X | X | | X |
| Rapid Re-Housing | X | | X | | |
| | <i>If eligible for category 4, the individual must also meet the criteria for Category 1</i> | | | | |
| Housing Stabilization & Homelessness Prevention | | | | X | X |
| | <i>May only serve individuals and families that have annual income below 30% of Annual Median Income.</i> | | | | |

Homeless Category 1 – Literally Homeless: An individual or family who lacks a fixed, regular and adequate nighttime residence;

- i. An individual or family with a primary nighttime residence that is a public or private place not meant for human habitation.
- ii. Is living in a publicly or privately-operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); **or**
- iii. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Homeless Category 2 – Imminent Risk of Homelessness: An individual or family who will imminently lose their primary nighttime residence, provided that:

- i. Residence will be lost within 14 days of the date of application for homeless assistance;
- ii. No subsequent residence has been identified; **and**
- iii. The individual or family lacks the resources or support networks needed to obtain other permanent housing.

Homeless Category 3 – Homeless under other Federal statutes: Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition. **PLEASE NOTE: No projects may serve a family under Category 3.**

Homeless Category 4 – Fleeing/ Attempting to Flee DV: Any individual or family who:

- i. Is fleeing, or is attempting to flee, domestic violence;
- ii. Has no other residence; **and**
- iii. Lacks the resources or support networks to obtain other permanent housing.

Continuum of Care Policies

1. Coordinated Access

In the *2012 CoC Program Interim Rule*, HUD mandated that every Continuum of Care develop a Coordinated Access System, to create rapid, effective, and consistent client-to-housing and service matches. The Interim Rule mandated that as part of Coordinated Access, CoCs must implement:

- Entry points into the CoC system of care that are clearly defined, easily accessible, and well-advertised
- A standardized and comprehensive assessment protocol and tool that is used to identify and document the needs of all individuals and families seeking housing or services
- A standardized referral process for all programs receiving funding through the CoC that consistently refers individuals and families to the most appropriate housing and service interventions and ensures that limited resources are used most effectively

All shelters and permanent housing programs receiving funds are required to fill their program vacancies through the Continuum of Care's Coordinated Access system. Street outreach programs, drop-in/day centers, and shelters should designate agency staff to become Coordinated Access navigators. Navigators assist individuals experiencing homelessness with applying for permanent housing through the Coordinated Access System.

2. Housing First

Housing First is an approach that offers permanent, affordable housing as quickly as possible for individuals and families experiencing homelessness, and then provides the supportive services and connections to the community-based supports people need to keep their housing and avoid returning to homelessness.

The Housing First approach is rooted in these basic principles:

- Homelessness is first and foremost a housing problem and should be treated as such;
- Housing is a right to which all are entitled;
- Issues that may have contributed to a household's homelessness can best be addressed once they are housed;
- People who are homeless or on the verge of homelessness should be returned to or stabilized in permanent housing as quickly as possible without preconditions of treatment acceptance or compliance for issues such as mental health and substance use; and
- The service provider working with the individual should connect the client to robust resources necessary to sustain that housing, and participation is achieved through assertive engagement, not coercion

Renewal projects that agreed to operate under a Housing First model in a previous funding competition must continue to do so.

New projects applying for funding through this RFP are required to utilize a Housing First approach in their program design by incorporating the above principles, reducing barriers to client eligibility and program admission (especially as it relates to mental health, substance use, and "housing readiness" requirements), and to the extent possible, providing and documenting assertive service engagement with clients instead of implementing a program discharge. Projects may not require participants to be sober or seek mental health treatment as a condition of housing and/or services.

Programs receiving funding through the CFA will be monitored for compliance with Housing First requirements and may be asked to modify their program policies and procedures as a condition of funding.

EACH APPLICANT MUST SIGN AND RETURN THE HOUSING FIRST AGREEMENT IN THE APPLICATION PACKET TO BE CONSIDERED FOR FUNDING.

3. Fair Housing Compliance

All shelter and housing programs funded through this RFP must be compliant with federal, state, and local laws in the delivery of their services and housing projects, which include ensuring equal opportunity and access to housing for protected class statuses. Programs will be monitored for compliance with fair housing laws, and if found in violation, MOHS may require corrective action up to and including termination of funds. MOHS reserves the right to require sub-recipients to change program policies or requirements that may unnecessarily limit access to housing.

EACH APPLICANT MUST SIGN AND RETURN THE FAIR HOUSING AGREEMENT IN THE APPLICATION PACKET TO BE CONSIDERED FOR FUNDING.

4. HMIS Participation

The Homeless Management Information System (HMIS) is used by the City of Baltimore Continuum of Care to track client services, program outcomes, and city-wide data on homelessness. Use of an HMIS system is required by the Department of Housing and Urban Development (HUD), and HMIS data is used by service providers and the City of Baltimore to measure system and project-level performance, coordinate service delivery, verify client eligibility for services, and fulfill reporting requirements for a variety of funders, including the federal government, state government, and philanthropic partners. HMIS is used by more than 40 organizations which provide homeless services at more than 140 programs in the City.

All providers receiving funding through the CFA process must agree to participate in the HMIS system, have staff complete all required HMIS trainings, and ensure that data entry into HMIS meets quality standards set by MOHS. Data entry will include conducting an intake assessment with each client, completing bed check-ins each night the client accesses shelter, and conducting an exit assessment with each client when they stop accessing services.

For more information about HMIS program requirements, please see:

<https://homeless.baltimorecity.gov/hmis>.

5. Local Hiring

All contracts that exceed \$300,000.00 are subject to the City's Local Hiring requirements as established in Article 5, Subtitle 27 of the Baltimore City Code. This Code requires that the selected organization (should the project meet the contracting threshold) work with the Mayor's Office of Employment Development (MOED) to review the staffing needs created by the project.

The selected organization will need to:

- Meet with MOED within two (2) weeks after contract execution to complete an Employment Analysis;
- Post new jobs created by the project with MOED for seven (7) days;
- Utilize MOED's City resident recruitment services for new hires;

- 51% of all new hires for City funded contracts must be City residents;
- Submit monthly employment reports with information on the number of current workers, new workers, and the number of Baltimore City residents working on the project.

More information on Local Hiring requirements is available at <https://moed.baltimorecity.gov/employer-services/hiring-strategies-local>.

6. Employ Baltimore

The Employ Baltimore Executive Order, issued in December 2013, is applicable to city contracts greater than \$50,001 and up to \$300,001 (except for emergency and professional services).

Organizations are required to:

- Contact MOED to schedule a workforce meeting within two (2) weeks after the contract award;
- Post new jobs with MOED only for a period of seven days;
- Utilize MOED’s recruitment services for new hires; and
- Submit bi-annual employment reports – submit placement reports as people are hired.

7. Baltimore City Audit Policy

At any time during business hours and as often as the City may deem necessary, there shall be made available to the City for examination, the organization’s records with respect to the activities awarded through this RFP. The organization shall permit the City to audit, examine and make excerpts or transcripts from such records, and to make audits of all contracts, invoices, materials, records of personnel, conditions of employment and other data relating to matters covered by this Agreement.

The organization shall be responsible for repayment of all applicable audit exceptions, which may be identified by City, State, or federal auditors or their designated representatives, and reviewed by the Provider.

8. Required Insurance Coverage

The selected organization must currently carry or be willing to obtain the following insurance coverage as part of the project:

- Professional Liability Errors, and Omissions Insurance (minimum \$3 million policy)
- Worker’s Compensation Coverage
- General Commercial Liability Insurance (minimum \$3 million policy)
- Business Automobile Liability Insurance (minimum \$1 million policy)
- Fidelity Coverage
- Cyber Liability Insurance (minimum \$1 million policy)

Providers awarded funds through the CFA process must submit evidence of the required insurance coverage to MOHS prior to contract execution in order to receive funding.

9. Single Audit Requirements

Agencies that expend more than \$750,000 annually in Federal awards are required to comply with the audit requirements in [2 CFR Part 200.501](#).

Guidelines for Submitting Applications

1. Eligible Organizations:

- A Non-Profit 501(c)(3) tax-exempt organization or another city government agency
- In Good Standing with the State of Maryland (certification of Good Standing must be within 30 days of receipt of the application and can be obtained through the [Department of Taxation](#) website.)
- Last two years of financial reports:
 - Project recipients who expend \$750,000 or more in 1 year in federal awards must submit most recent single audit or independent financial audit for the last two years in accordance with the provisions of 2 CFR part 200, subpart F.
 - Project recipients who expend less than \$750,000 in 1 year in federal awards and are not subjected to the provisions of 2 CFR part 200, subpart F must submit financial reports or statements that include detailed information about the recipient's fiscal management system for the last two years.
- Organization must be a Continuum of Care member agency if applying as a renewal project. New applicants must become a Continuum of Care member if awarded funds. Information on how to become a member is available on the [Journey Home website](#). Please note that there are no membership fees. Agencies that complete the membership commitment form agree to participate actively and collaboratively with the Continuum of Care.
- Applicants must be registered with <https://www.sam.gov/SAM> before submitting their application. In addition, applicants must maintain an active SAM registration with current information while they have an active Federal award or an application or plan under consideration by HUD.
- DUNS Number Requirement: applicants must provide a valid DUNS number, registered and active at <https://www.sam.gov/SAM>, in the application. DUNS numbers may be obtained for free from Dun & Bradstreet.
- Applicants may submit joint applications in response to this RFP, with one as the lead agency recipient and another as a subrecipient. Joint applications should submit an MOU reflecting the role of project partners and specify funding for each organization in the budget section.
- Organization shall maintain written grievance procedures for termination and denial of benefits based on the regulatory information provided. These policies will be reviewed annually during the HSP funding competition. The grievance policy should include the following requirements:
 - Participants have the right to file a client grievance if they applied for or received services from applicant and feel that they were not treated fairly or that a concern was not resolved in a satisfactory manner.
 - Participant must complete the grievance form and submit it to staff within five (5) working days from the day the incident occurred.
 - Participant should be able to obtain a copy of the grievance form from any case management staff.
- Applicant must retain all records pertaining to each fiscal year of funding for at least 5 years after the closeout of the grant. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.
 - Records will be retained as required by law and destroyed when appropriate. If retention requirements differ among federal, state and local standards, the longer period will prevail.

| Item | Retention minimum |
|---|-------------------|
| Financial records, including bank statements, financial statements, general ledgers, Accounts Payable, Accounts Receivable, cancelled checks, payroll records, timecards, W2s | 5 years |
| Employee personnel records | 5 years |
| Case management client files (after completion) | 5 years |
| Legal claims and litigation | 5 years |
| Contracts and leases (after expiration) | 7 years |
| General correspondence | 3 years |

The following are to be kept permanently by the organization:

- Articles of incorporation, by-laws
- Audited financials and supporting workpapers
- Deeds, mortgages and titles
- 990 Federal Tax returns
- Board meeting minutes
- Property records

Destruction will be done annually or as needed under the authority of the Executive Director by means of shredding and disposal by a professional document destruction firm.

2. Submission Requirements:

No paper or faxed applications will be accepted. All applications must be submitted electronically with the supporting documents to HSPApplications@baltimorecity.gov:

- Application Cover Sheet & Narrative (PDF Format only)
- Project budget workbook (Excel format only) –Renewal projects should utilize the budget template that corresponds to their current funding source. New projects should use the project budget template that matches their project type.
- Supporting documents (all listed in application packet checklist)

FAILURE TO ADHERE TO THESE INSTRUCTIONS MAY RESULT IN THE PROPOSAL NOT BEING REVIEWED OR CONSIDERED FOR FUNDING. Questions regarding the CFA application can be directed to HSPApplications@baltimorecity.gov. As questions are received and answered, they will be added to a Frequently Asked Questions document posted on the Mayor’s Office of Homeless Services’ website under Grant Opportunities.

Application Review and Scoring

Project proposals received through the Consolidated Funding Application (CFA) process undergo a two-step threshold review to assess eligibility and completeness prior to being evaluated on the project’s design and performance outcomes.

Project proposals that do not meet the requirements of the threshold review (Steps 1 and 2) will receive notification via email. Projects that do not pass the threshold review, either partially or fully, and would like to appeal for reconsideration, may contact HSPApplications@baltimorecity.gov. The project

applicant should detail the specific item they are appealing, and include any supporting documentation necessary. Applicants will be notified of a final decision within thirty (30) day of receiving the appeal.

Step 1: Application Completeness Review

- i. **Timeliness:** The application must be received by **4:00 pm on March 17, 2023**. Applications received after the deadline will be ineligible for funding.
- ii. **Thoroughness:** All required documents and attachments must be included in the application submission by emailing HSPApplications@baltimorecity.gov. Each submission is reviewed for completeness. If an item is missing, MOHS will notify the project applicant upon review of the application and points will be deducted from applications missing items or documents. MOHS will not permit project applicants to submit any revised materials for issues related to project eligibility, content, writing, or any other errors.

Step 2: Eligibility Review

- i. **Eligible Activities and Costs:** The application’s proposed activities and costs are evaluated for eligibility according to the rules, regulations, and guidance established by each funding source for the CFA (ESG, HSP, HOPWA, SSF, DSS, and General Funds). Proposed activities and costs must fit into at least one of the funding sources (in some cases projects may be eligible for more than one source of funding). Only eligible activities and costs will be considered for CFA funding. Additionally, proposals will be reviewed to ensure the description of the project proposal matches the description of the proposed budgets. Projects that are misaligned may not be considered for funding.
- ii. **Financial Health Risk Assessment:** The project’s financial audits submitted with the application are evaluated on several factors, including, but not limited to:
 - Fiscal health; financial statements; expenditures
 - Material weaknesses or deficiencies
 - Findings and disclosures
 Project proposals that have insufficient financial health or significant findings in their audit may be deemed ineligible for CFA funding or asked to submit additional documentation.

Step 3: Project Scoring

After passing the threshold review, each new project is evaluated using Category 1 Scoring Criteria and each renewal project application is evaluated using Category 2 Scoring Criteria. Each section below shows the weighted scoring.

| | | |
|--|---|--|
| Category 1 Scoring Criteria: Applies to All New Projects | | |
| New Projects are scored based on the five categories detailed below. Due to the number of applications received each year and funding constraints, not all new projects that achieve the minimum score may receive funding. Each section below shows the weighted scoring. | | |
| 1. | Need & Project Scope 15% | <input type="checkbox"/> Fills what would otherwise be a gap in the system for the specific population or area. Aligns with funding priorities. <input type="checkbox"/> Demonstrates a clear need for the requested funding, and the level of funding is appropriate for the work to be accomplished with CFA dollars. |

| | | |
|----|---|--|
| 2. | Approach & Performance 50% | <input type="checkbox"/> Project approach is contributing to the Journey Home’s strategic priorities and the HEARTH Act’s key objectives of reducing 1) first time homelessness, 2) length of stay in the homelessness system, and/or 3) the rate of returns to homelessness. <input type="checkbox"/> Includes proven methods and/or innovative practices to enhance the organization’s ability to address the stated needs. That includes best practices for housing first and low-barrier sheltering/support services. <input type="checkbox"/> Goals, outcomes, and budget seem reasonable for the scope of services to be provided and the one-year timeframe of the funding. Proposed performance goals are realistic and aligned with strategic priorities. <input type="checkbox"/> Review of supporting documents specific to the project’s policies and procedures. |
| 3. | Organizational Capacity 25% | <input type="checkbox"/> Applicant is experienced in providing services to persons experiencing homelessness. <input type="checkbox"/> Applicant organization has the experience and wherewithal to provide appropriate leadership and management for the specific project. <input type="checkbox"/> Applicant demonstrates the necessary administrative capacity to provide program oversight and meet regulatory requirements of the funding stream. <input type="checkbox"/> Project funding is diversified so that in the case that federal and state funding continues to be diminished, the project will remain sustainable. |
| 4. | Collaboration 5% | <input type="checkbox"/> Project compliments other activities in this area of homelessness assistance/prevention. <input type="checkbox"/> Applicant participates in local coordinated efforts with other providers to minimize duplication of services, maximize resources available, and is responding collectively to system/community needs (including level of participation or interest in CoC activities). |
| 5. | Overall Quality of Proposal 5% | <input type="checkbox"/> Applicant provides narratives that are well constructed and easy to read and understand. <input type="checkbox"/> Applicant pays close attention to the details requested in each section of the application. <input type="checkbox"/> Applicant demonstrates an understanding of project types and eligibility. |

Category 2 Scoring Criteria: *Applies to All Renewal Projects*

Renewal Projects that did not spend 100% of funds allocated for CFY 2023, or are significantly underspending in CFY 2024 may see a reduction or discontinuation of project funding regardless of their overall application score. Each section below shows the weighted scoring.

| | | |
|----|---|--|
| 1. | Need & Approach 15% | <input type="checkbox"/> Fills what would otherwise be a gap in the system for the specific population or area. aligns with funding priorities. <input type="checkbox"/> Demonstrates a clear need for the requested funding, and the level of funding is appropriate for the work to be accomplished with CFA dollars. <input type="checkbox"/> Project approach is contributing to the Journey Home’s strategic priorities and the HEARTH Act’s key objectives of reducing 1) first time homelessness, 2) length of stay in the homelessness system, and/or 3) the rate of returns to homelessness. <input type="checkbox"/> Includes proven methods and/or innovative practices to enhance the organization’s ability to address the stated needs. That includes best practices for housing first and low-barrier sheltering/support services. <input type="checkbox"/> Review of supporting documents specific to the project’s policies and procedures. |
| 3. | Organizational Capacity 10% | <input type="checkbox"/> Applicant is experienced in providing services to persons experiencing homelessness. <input type="checkbox"/> Applicant organization has the experience and wherewithal to provide appropriate leadership and management for the specific project. <input type="checkbox"/> Applicant demonstrates the necessary administrative capacity to provide program oversight and meet regulatory requirements of the funding stream. <input type="checkbox"/> Project funding is diversified so that in the case that federal and state funding continues to be diminished, the project will remain sustainable. |
| 4. | Collaboration 10% | <input type="checkbox"/> Project compliments other activities in this area of homelessness assistance/prevention. <input type="checkbox"/> Applicant participates in local coordinated efforts with other providers to minimize duplication of services, maximize resources available, and is responding collectively to system/community needs (including level of participation or interest in CoC activities). |

| | | |
|----|---|--|
| | | |
| 5. | Overall Quality of Proposal 5% | <input type="checkbox"/> Applicant provides narratives that are well constructed and easy to read and understand. <input type="checkbox"/> Applicant pays close attention to the details requested in each section of the application. <input type="checkbox"/> Applicant demonstrates an understanding of project types and eligibility. |
| 6. | Project Compliance 20% | <input type="checkbox"/> HMIS participation <input type="checkbox"/> Coordinated Access Participation (if applicable) <input type="checkbox"/> Monitoring Results (include fidelity to program regulations, Fair Housing and Equal Access Laws) <input type="checkbox"/> Fiscal Reporting and Timeliness of Expenditures |
| 7. | Performance Outcomes 40% | <input type="checkbox"/> Each renewal project with at least one full year of performance data will receive a performance metrics report from MOHS. The data for the report will be pulled directly from HMIS for all clients that were enrolled in the project during City Fiscal Year 2022 (July 1, 2021- June 30, 2022) and portion of their current project City Fiscal Year 2023 (July 2022 – February 2023). Each project will be scored on metrics associated with their project type that are detailed in the scope of their work in their active contract. |

Appendix A: Outreach

Outreach projects are provided in a strictly unsheltered setting. Any recipients of General Funds who are currently supporting outreach activities will need to apply. Project proposals can include the following different activities:

1. **Engagement** includes activities to locate, identify, and build relationships with *unsheltered* persons experiencing homelessness in and *unsheltered environment* to provide immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs.
2. **Case Management/Support Services** includes services to assess the housing and service needs of *unsheltered individuals*, and arranging/coordinating/monitoring the delivery of individualized services in an *unsheltered environment*.
3. **Emergency Health Services** includes outpatient treatment of urgent medical conditions by licensed medical professionals in *community-based settings* (e.g., streets, parks, and campgrounds) to those eligible participants who are unwilling or unable to access services in an emergency shelter or an appropriate medical facility.
4. **Emergency Mental Health Services** includes outpatient treatment of urgent mental health conditions by licensed professionals in *community-based settings* (e.g., streets, parks, and campgrounds) to those eligible participants unable or unwilling to access services in an emergency shelter or an appropriate medical facility.
5. **Transportation** includes travel by outreach workers, social workers, medical professionals or other service providers to provide the eligible street outreach services described previously; and/or costs to cover client transportation for services.
6. **Services to Special Populations** includes otherwise eligible essential services that have been tailored to address the special needs of homeless youth, victims of domestic violence and related crimes/threats, and/or people living with HIV/AIDS who are literally homeless, in unsheltered settings.

For specific requirements and eligible costs, see [24 CFR 576.101](#).

Appendix B: Emergency Shelter

Emergency shelter proposals are for daytime or overnight shelter operations and support services that provide temporary and short-term services. Special priority may be given to services dedicated to unaccompanied minors and young adults (18-24) and families. Emergency Shelter proposals may include drop-in/day centers. Please note that renewal projects for transitional housing will be funded under Emergency Shelter (no new applications for transitional housing will be accepted). Any recipients of General Funds who are currently supporting emergency shelter activities will need to apply.

1. **Operations** include costs associated with operating and maintaining shelters and providing other emergency lodging when appropriate. May include costs associated with creating new beds in shelter facilities.
2. **Operations Day Shelters** include costs associated with operating drop-in/day time services
3. **Essential Support Services** include services such as case management, child care, education services, employment assistance and job training, outpatient health services, legal services, life skills, mental health services, substance abuse treatment services, transportation, and services for special populations.
4. **Supplies for Shelters** include cost of sheets, blankets, cots, pillows, other supplies.
5. **Food** include the cost of food service at shelters; vouchers for groceries or restaurants, services which provide referrals to food banks, pantries or other similar services to assist clients meet their nutritional needs.
6. **Transportation** include cost of client transport to and from shelters, meal programs, or other service providers. This may include vehicle lease/purchase and maintenance.
7. **Vouchers/checks for lodging** include funds given to clients (or paid to providers on behalf of clients) to purchase shelter in motels, hotels, boarding houses, private homes, or apartments (only when emergency shelter is unavailable).

All emergency shelter projects must adhere by the Emergency Solutions Grants (ESG) Program interim rule, at [24 CFR 576.403](#), establishes minimum standards for safety, sanitation, and privacy in emergency shelters. All grantees must complete the Emergency Shelter Habitability Checklist and Lead-Based Paint Screening Worksheet for each funded emergency shelter annually.

Appendix C: Rapid Re-Housing

Rapid Re-housing provides time-limited rental and financial assistance (up to 24 months) and targeted support services. The goals are to help individuals and families obtain housing quickly, increase self-sufficiency, and maintain housing. All Rapid Re-housing projects must adhere to the Housing First Principles outlined in the application. Housing is offered without preconditions such as employment, income, absence of criminal record, or sobriety.

All projects must receive referrals through the Coordinated Access System to match individuals and families living in emergency shelter or another place described in paragraph (1) of the “homeless” definition.

Project proposals should include the following three core components. While a program must make all three available, it is not required that a single entity provide all three services or that a household utilize all three services. Due to time-limited assistance projects must operate with the goal that participants receive enough assistance and support to ensure households successfully exit homelessness and maintain permanent housing.

1. **Housing Identification** includes housing search and placement. Programs should designate housing identification staff that recruit landlords willing to rent to participants in the program and that are able to match the appropriate housing to the participants in the program.
2. **Rental and Financial Assistance** includes rental Assistance (up to 24 months), moving costs, rental application fees, security deposits, last month’s rent, utility deposits, and utility payments. ***Projects should use a progressive engagement model to determine the length and amount of rental assistance for each household that should be described in the application.***
3. **Support Services** includes, but is not limited to housing stability, case management, mediation, legal services, and credit repair.

All Rapid Re-housing projects must adhere by the Emergency Solutions Grants (ESG) Program interim rule, at [24 CFR 576.403](#), establishes minimum habitability standards for permanent housing funded under the Rapid Re-housing and Homelessness Prevention components of ESG. For specific requirements and eligible costs, see [24 CFR 576.104](#), [576.105](#), and [576.106](#).

Appendix D: Housing Stabilization & Homelessness Prevention

Housing relocation and stabilization services and, or homelessness prevention services consists of short or medium-term rental assistance necessary to prevent the individual or family from moving into an emergency shelter or another place described in paragraph (1) of the “homeless” definition. The outcome of the project is to ensure households regain stability in their current housing or other permanent housing.

Households must meet the criteria under the At Risk of Homelessness Status or Homeless Status as described in the [Program Participant Eligibility by Project Type](#) section of this RFP, and lack the resources to obtain permanent housing and have an annual income that does not exceed 30% AMI.

The goal of housing stabilization and homelessness prevention is to provide supports to stabilize participants once housed. Project proposals should include a focus on connecting participants to services and address barriers that may stand in the way of securing and maintaining housing. This may include assisting participants in building or strengthening support networks with people and programs.

Proposals may include component services and assistance as follows:

1. Short-term and medium-term rental assistance
2. Rental arrears
3. Rental application fees
4. Security deposits
5. Advance payment of last month's rent
6. Utility deposits and payments
7. Moving costs
8. Housing search and placement
9. Housing stability case management
10. Mediation
11. Legal services
12. Credit repair

All Homelessness Prevention projects must adhere by the Emergency Solutions Grants (ESG) Program interim rule, at [24 CFR 576.403](#), establishes minimum habitability standards for permanent housing funded under the Rapid Re-housing and Homelessness Prevention components of ESG.

For specific requirements and eligible costs, see [24 CFR 576.105](#), [24 CFR 576.103](#), and [576.106](#).

Appendix E: Housing and Support Services for Persons living with HIV/AIDS

Funds can be used to assist low-income persons living with HIV/AIDS and their families, who are homeless or at imminent-risk of homelessness by providing the following services:

1. **Eviction Prevention:** Short-term rent, mortgage and utility payments to prevent homelessness.
2. **Supportive Services** that assist persons in obtaining or maintaining housing, including, but not limited to the following, which may only be provided to individuals with HIV/AIDS and not to their family members:
 - Assistance in gaining access to city, state, and federal benefits and services.
 - Health care
 - Mental health services
 - Drug and alcohol abuse treatment and counseling
 - Personal assistance
 - Nutritional services
 - Employment and education assistance services
 - Child care services
 - Legal services
 - Life skills management
 - Intensive care, when required
3. **Permanent Housing Placement Services** may help eligible persons establish a new residence where ongoing occupancy is expected to continue. Costs may include fees for housing services or activities, such as:
 - Tenant counseling
 - Assisting individuals and families to understand leases, secure utilities, and make moving arrangements
 - Paying for representative payee services for persons who utilize them to better manage their own finances
 - Mediation services related to neighbor/landlord issues that may arise
 - Costs may also include application fees, credit checks, and security deposits, of which are not considered rental assistance and should be accounted for as permanent housing placement costs. Permanent housing placement costs cannot exceed the value of two (2) months' rent in the new unit.
4. **Food:** Provide food items and/or gift cards that may be used to purchase food. This also includes the provision of essential non-food items that are limited to the following:
 - Personal hygiene products
 - Household cleaning suppliesFunding may also be used to provide and deliver hot meals to home-bound and medically fragile HIV positive clients. Funds will not be used to purchase household appliances, pet foods, and other non-essential products.

5. **Provide Home and Community-Based Health Services** to home-bound clients living with HIV based on a written plan of care established by a medical care team under the direction of a licensed clinical provider. Services include:
- Appropriate mental health, developmental, and rehabilitation services.
 - Day treatment or other partial hospitalization services.
 - Home health aide services and personal care services in the home.
 - Services will not be provided in inpatient hospitals, nursing homes, and other long-term care facilities.

6. **Provide limited short and medium-term assistance** to support emergency, temporary, or transitional housing to enable a client or family to gain or maintain outpatient/ambulatory health services. Housing-related referral services include:
- Assessment
 - Search
 - Placement
 - Advocacy
 - Fees associated with these services

Housing services are transitional in nature and are accompanied by a strategy to identify, relocate, and/or ensure the client or family is moved to, or capable of maintaining, a long-term, stable living situation. Activities included as follows:

- Initial assessment of service needs
 - Develop a comprehensive, individualized housing stability plan.
 - Payments for bed nights in a hotel or transitional housing program.
 - Monthly rent payments
 - Monthly utilities payments
7. **Provide interpretation and translation services**, oral and/or written, to Ryan White eligible clients. Services will be provided by qualified linguistic services providers and will comply with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) as a component of HIV service delivery between the healthcare provider and the client. These services will be provided as needed to facilitate communication between the provider and client and/or support delivery of Ryan White HIV/AIDS Program eligible services.
8. **Provide Medical Case Management activities** focused on improving health outcomes in support of the HIV care continuum. Activities included as follows:
- Initial assessment of service needs
 - Develop a comprehensive, individualized care plan
 - Timely and coordinated access to medically appropriate levels of health and support services and care continuum
 - Continuous client monitoring to assess the efficacy of the care plan
 - Re-evaluation of the care plan at least every 6 months with adaptations as necessary
 - Ongoing assessment of the client's and other key family members' needs and personal support systems
 - Treatment adherence counseling to ensure readiness for and adherence to complex HIV treatments

- Client-specific advocacy and/or review of utilization of service benefits counseling by assisting eligible clients in obtaining access to other public and private programs
9. **Provide non-emergency transportation services** that enable an eligible client to access or be retained in core medical or support services. Medical transportation may be provided through:
 - Use of company vehicle to provide transportation services
 - Contracts with providers of transportation services
 - Purchase and distribute MTA tokens to clients as needed.
 - Purchase and distribute parking vouchers to clients as needed to attend medical appointments.
 - Purchase gas vouchers to reimburse mileage to clients to attend medical appointments.
 10. **Provide Outpatient Mental Health** (psychological and psychiatric) screening, assessment, diagnosis, treatment, and counseling services with clients living with HIV. Mental Health services are based on a treatment plan and provided by a mental health professional licensed or authorized within the state to render such services.
 11. **Provide Non-Medical Case Management activities** focused on providing guidance and assistance in accessing medical, social, community, legal, financial, public and private programs and other needed services. Activities included as follows:
 - Initial assessment of service needs
 - Develop a comprehensive, individualized care plan
 - Continuous client monitoring to assess the efficacy of the care plan
 - Re-evaluation of the care plan at least every 6 months with adaptations as necessary
 - Ongoing assessment of the client's and other key family members' needs and personal support systems
 12. **Provide outpatient diagnostic, preventive and therapeutic Oral Health Services** to be rendered by dental health care professionals, including general dental practitioners, dental specialists, dental hygienists and licensed dental assistants.
 13. **Provide outpatient services for the treatment of drug or alcohol use disorders.** Services include:
 - Screening
 - Assessment
 - Diagnosis and/or Treatment of substance use disorder, including: Pretreatment/recovery readiness programs
 - Harm reduction
 - Behavioral health counseling associated with substance use disorder
 - Outpatient drug-free treatment and counseling
 - Medication assisted therapy
 - Neuro-psychiatric pharmaceuticals
 - Relapse prevention

Appendix F: Support Services – Permanent Supportive Housing Case Management

Permanent Supportive Housing funding is only available for current grantees (renewal projects only - no new applications will be accepted). These funds may **only** cover case management services for permanent supportive housing.

The eligible costs are as follows:

1. **Staff costs** for case managers that assist clients in applying for food, medical, and other benefits (including the costs associated with Salary, FICA, Unemployment Insurance, and other benefits)
2. **Linking residents to supportive services** such as job training, health care, budgeting, counseling, life-skills, treatment, etc.