Eastern PA CoC FY2021 Preliminary Application for DV Bonus: Rapid Re-Housing

Instructions

Eastern PA Continuum of Care, CoC PA-509
Preliminary Application for DV Bonus: Rapid Re-Housing

Instructions:

- **Please complete all required questions within this survey to be considered for funding for new DV Bonus projects (Rapid Re-Housing) within the FY2021 Eastern PA Continuum of Care CoC Application.**
- **All applications must be submitted via Alchemer by COB on October 13, 2021.**
- **BUDGET: Please note that you will be required to submit a proposed budget as part of this preliminary application. Toward the end of this survey there will be a place for you to upload the proposed budget. Please use the Excel budget template provided with the RFP and provided below.**
- **You may click "Save and Continue" in the upper right-hand corner at any time to save your responses and return to complete at a later time- a link will be emailed to you to return to your responses.**
- **Upon submission, a copy of your responses will be emailed to you for your records.**

Resources that you may wish to access as you are completing the preliminary application:

- **Eastern PA CoC FY21 DV Bonus RFP**
- **Eastern PA CoC FY21 DV Bonus Application - Excel Budget Template**
- **Eastern PA 2021 Point in Time Count Data**

Note: Hard copy of preliminary application provided for reference only. Applications must be submitted via Alchemer at: http://s.alchemer.com/s3/Eastern-PA-CoC-FY2021-Preliminary-App-DV-RRH

- **[HUD Housing First Assessment Tool](#)**
- **[Continuum of Care regulations at 24 CFR Part 578, Subpart D – Program Components & Eligible Costs.](#)**
- **FY2021 CoC NOFO Webinar has been posted on [PA CoC website FY21 CoC NOFA page](#).**

Next Steps:

- **If my project is selected for submission, what is the next step? You will be notified no later than October 21, 2021 if your project has been selected for inclusion in the FY2021 CoC Application and the amount of funding that you can request. At that time, you will receive instructions for submission of an application on esnaps, HUD's online application.**
- **If I have questions about this who should I contact? Send an e-mail to easterncoc@pennsylvaniacoc.org and staff from Diana T. Myers and Associates (DMA) will get back to you as quickly as possible.**

Application

1) Agency Name*

_____

2) Contact Person*

_____

3) Phone Number*

_____

4) Email Address*

_____

5) County/ies your organization serves:*

_____

6) Does the geography of the proposed project cover: *

( ) Single County

( ) Multiple Counties

( ) RHAB

( ) Entire CoC

7) Specifically, which county/ies do you intend to cover?*

[ ] Adams

[ ] Bedford

[ ] Blair

[ ] Bradford

[ ] Cambria

[ ] Carbon

[ ] Centre

[ ] Clinton

[ ] Columbia

[ ] Cumberland

[ ] Franklin

[ ] Fulton

[ ] Huntingdon

[ ] Juniata

[ ] Lebanon

[ ] Lehigh

[ ] Lycoming

[ ] Mifflin

[ ] Monroe

[ ] Montour

[ ] Northampton

[ ] Northumberland

[ ] Perry

[ ] Pike

[ ] Schuylkill

[ ] Snyder

[ ] Somerset

[ ] Sullivan

[ ] Susquehanna

[ ] Tioga

[ ] Union

[ ] Wayne

[ ] Wyoming

8) Does your organization have experience (either currently or previously) operating projects funded through homeless assistance grants – ESG or CoC?   *

( ) Yes

( ) No

9) If yes, please describe this experience: *

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10) Does your organization have any unresolved monitoring or audit findings for any grants from HUD, the CoC, and/or DCED (including ESG)? *

( ) Yes

( ) No

11) If yes, please explain:*

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12) What is your current relationship with the Eastern PA CoC? Please check any of the following ways you participate in the CoC:
 *

[ ] Refer clients you serve to the CoC's Coordinated Entry System

[ ] Attend RHAB meetings

[ ] Attend CoC meetings (twice per year)

[ ] Participate on a Committee/Sub-Committee. Which::
_____

[ ] Participate in the planning of the annual point-in-time count

[ ] Provide data for the annual point-in-time count

[ ] Other. Please describe:: _____

13) Describe your organization's experience providing housing- emergency-based, transitional, or permanent, to individuals and families fleeing domestic violence. *

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14) What is the name of the new proposed Rapid Re-Housing project?*

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15) Describe the proposed project. Include a project description, community need and your capacity to implement this project within the identified service area. In addition, please provide the following information:

- **The number of households to be assisted throughout the year;**
- **expected program participant to staff ratio;**
- **your agency's ability to work with landlords to house program participants in the community;**
- **how you will ensure client eligibility and adhere to documentation requirements;**
- **how you will administer rental assistance, which includes processing rent checks and conducting inspections;**
- **how you will track documentation of costs billed to the grant;**
- **how you will track documentation of in-kind match provided;**
- **ensure timely data entry and high data quality into the HMIS comparable database;**
- **and provide tenancy supports to ensure client is able to maintain housing.**

Please limit your response to 3,000 characters*

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16) Describe how your organization will ensure Rapid Re-Housing resources are available to households qualifying under any part of Category 4 of the HUD homeless definition.*

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17) Based on experience, describe how your organization has accomplished the following:

1. **ensured DV survivors experiencing homelessness were assisted to quickly move into safe affordable housing;**
2. **prioritized survivors (as in the process used, e.g. Coordinated Entry, prioritization list, CoC's emergency transfer plan, etc.)**
3. **connected survivors to supportive services; and**
4. **moved clients from assisted housing to housing they could sustain- address housing stability after the housing subsidy ends.**

(please limit your response to 2,000 Characters)*

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18) Please describe:

- **how your organization has ensured the safety of DV survivors experiencing homelessness. Examples may include**

  1. **training staff on safety planning;**
  2. **adjusting intake space to better ensure a private conversation;**
  3. **conducting separate interviews/intake with each member of a couple;**
  4. **working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;**
  5. **maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;**
  6. **keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and**

- **how your organization has measured its ability to ensure the safety of DV survivors served in your programs.**

Please limit your response to 2000 characters.*

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19) Please describe:

1. **your organization's experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors;**
2. **how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:**
   1. **prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;**
   2. **establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;**

3. **providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;**
4. **placing emphasis on the participant's strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;**
5. **centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;**
6. **delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and**
7. **offering support for parenting, e.g., parenting classes, childcare.**

Please limit your response to 4,000 characters*

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20) How will your organization maximize client choice and autonomy regarding housing and services while maximizing safety and ensuring confidentiality? If you are working with a community partner, please include the partner organization's role as well.
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21) Please describe how your organization assists DV survivors (including DV survivors experiencing homelessness) to meet service needs, such as:

- **Child Custody**
- **Legal Services**

- **Criminal History**
- **Bad Credit History**
- **Education**
- **Job Training**
- **Employment**
- **Physical/Mental Healthcare**
- **Drug and Alcohol Treatment**
- **Childcare**

Please limit your response to 2,000 characters
 *

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22) Please describe your organization's experience serving and improving outcomes for communities that have been historically marginalized (e.g. people of color, LGBTQ+, people that do not speak English as their primary or first language).*

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23) Please indicate which of the following requirements you commit to follow:*

[ ] Use a Housing First approach (see HUD Housing First Assessment Tool for more information on Housing First; linked in instructions above)

[ ] Comply with all CoC policies and HUD regulations and notices. This includes compliance with Fair Housing; Prohibition against involuntary family separation; designate a staff person to ensure children are engaged with educational programming (for projects that serve families); HUD's Equal Access to Housing Rule and Equal Access in Accordance with Gender Identity Final Rule; and any other terms and conditions within the NOFA.

[ ] Participate in the Eastern PA Coordinated Entry System

[ ] Follow the CoC's written standards for providing assistance, including minimum case management requirements (linked in instructions above)

[ ] Enter data into HMIS comparable database

[ ] Participate in and attend meetings of the RHAB and CoC

24) Please upload a copy of your proposed budget, using the Excel template provided.

Click "Browse" button to upload the document from your computer. Please upload the document in Excel format.

For a list and description of eligible costs, please refer to the Continuum of Care regulations at 24 CFR Part 578, Subpart D – Program Components & Eligible Costs.

_____1

_____2

Confirmation Information

Please type the name and title of the responsible party for this application below that will serve as your digital signature.

25) Name of Responsible Party for this Application

_____

26) Title for Responsible Party for this Application

_____

27) Today's Date

_____

Thank You!

Thank you for submitting your preliminary application for Eastern PA CoC FY21 Request for DV Bonus Projects. You will receive an automated email with a copy of your responses for your records.