

2017 Atlanta CoC Renewal Project Review Application

Important information before you begin...

**Like last year, this process will again be online, and much of the information collected is similar.**

**As we anticipate this year being a competitive one, please make sure to fully answer each**

**question, as the Ranking and Review Committee can only score based on the information provided. For each Renewal Project, an agency must:**

**1. Submit this application via surveymonkey, using the APRs that will be provided to you for each project;**

**2. Email to Amy at** [**amzaremba@atlantaga.gov**](mailto:amzaremba@atlantaga.gov) **and** [**azaremba@partnersforhome.org**](mailto:azaremba@partnersforhome.org)

**a. A quick note when the application has been submitted (and she will send a pdf version for your files);**

**b. A complete copy of all project documentation. This will vary from project to project and may include, but will not necessarily be limited to:**

**· A complete intake package;**

**· House rules and polices;**

**· Client handbook;**

**· Client termination and appeals process;**

**· Client Comment/Suggestion form;**

**· Any other project documents;**

**c. A pdf of the most recent APR that was submitted for this project;**

**d. A copy of any monitoring letters (with or without concerns or findings) that cover visits that have occurred since July 1, 2016; and**

**e. This** [**Atlanta CoC Certification for**](https://partnersforhome.org/wp-content/uploads/2017/01/2017-Atlanta-CoC-Agency-Certification-Form_fillable080917.pdf)**m.**

**3. Complete the project application, with all updated forms, in e-snaps, no later than August 28,**

**2017, at 4pm.**

**We are trying to streamline this process as much as possible, so there are fewer items this year that we are asking for. But, please know that there may be additional information that is requested either after the release of this application or during the review process. It is expected that if additional information is requested, it will be provided in a timely manner. Any other documentation requested in the review process will be to help clarify your applications.**

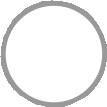
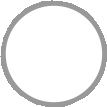
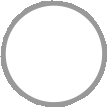
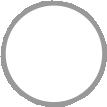
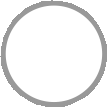
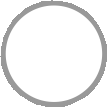
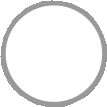
**Although many of these questions will mirror the *e-snaps* application for HUD, please note that there is not a one-to-one comparison as there may be factors that the Ranking and Review Committee need to consider for the ranking on the Priority Listing.**

**The scoring for the 2017 Atlanta CoC NOFA process will be data driven. Therefore, some of the questions that allow for narratives may be for informational purposes only.**

**The submission deadline for all completed renewal review applications, and all required documents, is August 16, 2017, at 4:00pm. An application may be considered incomplete if it does not include all required documents.**

**The deadline for your e-snaps application, and all required attachments, is August 28, 2017. An e- snaps application may be considered incomplete if all required attachments, with the correct updated information, are not uploaded. Failure to submit an e-snaps application, with the required attachments, may result in your application being not scored.**

**No late applications or attachments will be accepted.**



2017 Atlanta CoC Renewal Project Review Application

GENERAL INFORMATION

\* 1. Name of Organization

\* 2. Organization Type

Non-profit 501(c)(3) Unit of Government

Public Housing Authority (PHA)

Other (please specify)

3. Name of Sub-Recipient / Sponsor Organization (if applicable)

4. Sub-Recipient / Sponsor Organization Type (if applicable)

Non-profit 501(c)(3) Unit of Government

Public Housing Authority (PHA) Other (please specify)

\* 5. Contact person for this application

Name and Title

Phone Number

Email Address

\* 6. HUD Project Name

\* 7. Exact HMIS (or equivalent) Project Name

\* 8. HUD Project Type

Permanent Supportive Housing - Project Based Permanent Supportive Housing - Sponsor Based Permanent Supportive Housing - Tenant Based Rapid Rehousing



Support Services Only - HMIS



Support Services Only - Coordinated Entry



\* 9. Total HUD 2017 Funding Request

\* 10. Is this amount less than previous year due to under-utilization or under-spending?

Yes



No



\* 11. If any changes are proposed (Q10), please explain. If no changes, please enter n/a. (500 characters maximum)

\* 12. Please provide a brief, but complete, description that addresses the entire scope of the project. (1000 characters maximum)



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PROJECT OVERVIEW AND STRATEGIC ALIGNMENT

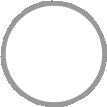
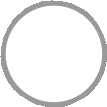
**The Atlanta CoC works to align itself with the HUD priorities, as well as with the USICH Plan, *Opening Doors*. Additionally, the Atlanta CoC has recently adopted *ClearPath*, a five-year strategic plan, which outlines the principles and priorities for the CoC . These next questions correlate to those priorities.**

**While much of the scored information will be taken from project APRs and HMIS, please respond to the questions, addressing the various objectives of the CoC. Provide a brief explanation for each**

**of the subparts, when requested. Please note, however, to remain as objective as possible, much of the scoring is based on the data and backup provided. The explanations may be for informational purposes only.**

**Unless otherwise indicated, for questions that reference project performance, please include the applicable project performance data from the APRs that were provided for this project. These APRs were pulled from HMIS (or equivalent) covering the periods of 07/01/2015 – 06/30/2016 and 07/1/2016**

**- 06/30/2017. If your project is newer and does not have one or both of the complete years to report on, please note that and explain how the project will meet the objectives, when narratives are indicated.**



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Program Policies & Procedures – Program Entry and Continued Program Participation

**The Atlanta CoC Coordinated Entry Process prioritizes individuals and families based upon their duration of homelessness, vulnerability factors as well as barriers to securing and maintaining housing.**

**CoC-funded projects frequently work with individuals and/or families who have significant barriers to securing and maintaining housing, as such CoC and CoC-funded projects, must ensure that our standard of care, program policies and procedures, and portfolio of housing and services options is responsive to those needs. To that end, CoC-funded projects are expected to reduce and remove barriers to accessing services, program acceptance and entry and continued program participation.**

**Please review and answer the following questions as applicable to the renewal project.**

\* 13. Does the project accept 100% of participants from the Coordinated Entry process?

Yes

No

\* 14. Please briefly explain your response from Q13, especially if the response is no. (1000 characters

maximum)

\* 15. PSH - Since July 1, 2016, how many coordinated entry referrals made to this project, were denied admission? Please briefly explain. (1000 characters maximum)

RRH - Since January 1, 2017, how many coordinated entry referrals made to this project, were denied admission? Please briefly explain. (1000 characters maximum)

\* 16. Which of the following does the project screen out referrals from coordinated entry? (That is, if a potential client is referred through the coordinated entry process, which of the following will prohibit this client from being accepted in the project?)

Having too little income

Active or history of substance abuse

Having a criminal record (with the exception of state-mandated restrictions) History of victimization (eg domestic violence, sexual assault, childhood abuse) None of the above

\* 17. Please briefly explain your response from Q16. (1000 characters maximum)

\* 18. Does the project ensure that participants are not terminated from the program for the following

reasons? (That is, which of the following can occur and the participant remain in the program?)

Failure to participate in supportive services Failure to make progress on a service plan Loss of income or failure to improve income

Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area

None of the above

\* 19. Please briefly explain your response from Q18. (1000 characters maximum)

\* 20. Does the project use a harm-reduction model for drugs and/or alcohol use?

Yes



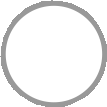
No



\* 21. Please briefly explain your response from Q20. (1000 characters maximum)

\* 22. Does the project have specific policies and procedures that work to prevent eviction or lease violations?

Yes (If yes, please include in email with project materials) No



\* 23. Please briefly explain your response from Q22. (1000 characters maximum)

\* 24. Since July 1, 2016, how many households have been evicted/terminated from this project? Please explain.



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Program Policies & Procedures – Program Entry and Continued Program Participation

(Continued)

\* 25. Please indicate which of the following are required for clients to move into this project. (That is, which

of the following need does a client need in order to move into a unit)

Current employment or other income

State issued identification

No presenting of symptoms of mental illness

*Specific* disabling condition (e.g. MH, SA, HIV/AIDS) Medication compliance

Order of protection, police involvement, or specified time separated from abuser for victims/survivors of domestic violence

Other

None

\* 26. Please briefly explain your response from Q25. Provide a description and explanation for each of the program requirements as selected above. The description should include the reasons for any of the selection program requirements.(1000 characters maximum)



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Populations and Sub-Populations

**For all questions that refer to data from APRs, use the APR documents that were provided specific**

**to this project.**

\* 27. Populations Served (check all the apply)

Adult households without children (individuals and couples, 25 and older, with no children) Adult households with children (individuals and couples, age 25 and older, with children) Youth households without children (individuals and couples, age 18-25, with no children) Youth households with children (individuals and couples, age 18-25, with children)

Unaccompanied youth under age 18

\* 28. Total persons served in one year [July 1, 2016 - June 30, 2017] (APR Q7, Total number of applicable records for all clients)

\* 29. What is the total number of clients served from each of the sub-populations below? (Clients may fall into multiple categories) [APR July 1, 2016 – June 30, 2017]

Mental Illness (APR Q18)

Alcohol Abuse (APR Q18)

Drug Abuse (APR Q18)

Chronic Health Condition

(APR Q18)

HIV/AIDS and Related

Disorders (APR Q18)

Developmental Disability

(APR Q18)

Physical Disability (APR Q18)

Victim/Survivor of Domestic Violence (APR Q19a)

Veteran (APR Q21)

Youth Households (APR Q16, 18-24)

\* 30. What is the percentage of clients served from each of the sub-populations below?

[APR July 1, 2016 – June 30, 2017] (To calculate, divide the number listed in Q29 for the applicable sub- population by the total number from Q28 and multiply by 100.)

Mental Illness

Alcohol Abuse

Drug Abuse

Chronic Health Condition

HIV/AIDS and Related

Disorders

Developmental Disability

Physical Disability

Victim/Survivor of

Domestic Violence

Veteran

Youth Households



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Housing Stability

\* 31. Number of persons served in one year (APR Q7,Total number of applicable records for all clients)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 32. Number of persons exited in one year (APR Q27, Sum of leavers minus APRQ29a1, Other Destination-

deceased)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 33. Number of persons who exited to permanent housing (APR Q29a1, Sum of all in Permanent

Destination chart)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 34. Percent of total leavers who exited who exited to permanent housing

a. APR July 1, 2015 – June

30, 2016 (Q33a/Q32a X

100)

b. APR July 1, 2016 – June

30, 2017 (Q33b/Q32b X

100)

\* 35. Percent of persons who maintained housing within the project or obtained other permanent housing upon exit (APR Q36a. Housing Stability Measure 1)

APR July 1, 2015 – June

30, 2016

APR July 1, 2016 – June

30, 2017

\* 36. Please explain any decreases from last year, **and** how your agency plans to continue to**improve, or maintain,** the housing stability of project participants (1000 characters maximum).



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Project Participant Income

\* 37. Percentage of adults who gained or increased earned income from entry to follow-up/exit (APR Q24b3,

1st Row)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 38. Percentage of adults who gained or increased other (non-employment) income from entry to follow-

up/exit (APR Q24b3, 3rd Row)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 39. Percentage of adults who gained or increased any income from entry to follow-up/exit (APR Q24b3, 5th

Row)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 40. Please explain any decreases from last year, **and** how your agency plans to **continue to improve**

income for project participants (1000 characters maximum).



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Project Participant and Mainstream (Non-Cash) Benefits

\* 41. Number of persons served in one year (APR Q7,Total number of applicable records for all clients)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 42. Total number of clients [leavers] with 1+Source (APR Q26a2, 2nd Row)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 43. Total number of clients [stayers] with 1+Source (APR Q26b2, 2nd Row)

a. APR July 1, 2015 – June

30, 2016

b. APR July 1, 2016 – June

30, 2017

\* 44. Total number of clients with 1+Source

a. APR July 1, 2015 – June

30, 2016 (42a + 43a)

b. APR July 1, 2016 – June

30, 2017 (42b + 43b)

\* 45. Percent of clients with 1+Source at follow-up/exit

a. APR July 1, 2015 – June

30, 2016 (44a / 41a \* 100)

b. APR July 1, 2016 – June

30, 2017 (44b / 41b \* 100)

\* 46. Please describe any decreases from last year, **and** how your agency plans to**continue to increase** the percentage of participants who access mainstream benefits (1000 characters maximum).



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Utilization Rate

\* 47. What was the average daily utilization rate during the most recently completed submitted APR in e- snaps or SAGE?

Projects for individuals should use the bed rate. Projects for families should use the average unit rate. (An

APR pulled from HMIS will not have this information. This must come from the APR submitted in e-snaps or SAGE. Due to the delay in the ability of submitting APRs in esnaps or SAGE, this info may be dated.)

Operating end date of most recently submitted APR

(APR Q10 or Q 11, from the APR submitted in e- snaps or SAGE. An APR pulled from HMIS will not have this information.)

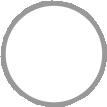
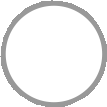
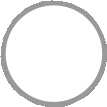
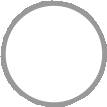
\* 48. Please describe any issues regarding the above utilization rate **and** how your agency plans to **maintain or increase** the utilization rate (1000 characters maximum).



2017 Atlanta CoC Renewal Project Review Application

OTHER IMPORTANT FACTORS

**In addition to project performance, there are other factors that HUD stresses that the CoCs consider when reviewing project applications. Please respond to the following financial and related questions.**



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Spend Down and Cost Efficiency

\* 49. Expended Funding for Current Contract

Start **and** end date of this HUD award that is current

Total amount of award

Total amount of funds not yet drawn down

\* 50. Do you anticipate you will have spent funds at the expiration date of this current contract?

Yes

No

\* 51. If yes, how much? And please explain the reason for the unexpended funds.

\* 52. Did you have unspent HUD funds at the expiration of grant terms in any of the previous years listed in

Q51, if applicable?

Yes

No

\* 53. If yes, how much? (Enter 0 if all funds were expended and n/a if it does not apply)

2016-2017 (ended in

2017, if already expired)

2015-2016 (ended in

2016)

2014-2015 (ended in

2015)

2013-2014 (ended in

2014)

\* 54. Have there been extenuating circumstances in drawing down funds such as a change in the grant year or execution of the contract?

Yes



No



\* 55. If yes, please briefly explain (identifying grant years impacted).

\* 56. Please provide the dates (month/day/year) of each drawdown made under your most recently expired

grant from the first drawdown to the last closeout one.

Start **and** end date of award

Drawdown 1

Drawdown 2

Drawdown 3

Drawdown 4

If needed, listed all remaining dates (enter n/a if no other dates)

\* 57. What was the **total budget** for this project (include all financial resources, excluding in-kind) for the

most recently completed contract year?

a. Total Annual Budget

b. Start and End Date

\* 58. How many persons were served during the above time period? (APR Q7, Total number of applicable records for all clients)

\* 59. What is the average cost per person served (full project budget)?

(Q57a / Q58) =

\* 60. What is the average per person served (these HUD funds only)

(Q49 line 2 / Q58) =

\* 61. How many persons either remained in permanent housing or exited the project to permanent destinations over the course of the program year? (APR Q36, 1st row, 4th column, Actual number of

participants who accomplish this measure)

\* 62. What is the average cost per exit to, or maintenance of, permanent housing over the course of the

program year (full project budget)?

(Q57a / Q61) =

\* 63. What is the average cost per exit to, or maintenance of, permanent housing over the course of the

program year (these HUD funds only)?

(Q49 Line 2 / Q61) =

\* 64. Does the applicant have any outstanding federal debt?

Yes



No



\* 65. If yes, please provide an explanation of debt owed and repayment arrangements (250 characters maximum).



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Program Monitoring

\* 66. When was your most recent HUD monitoring visit (if applicable)?

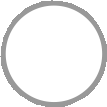
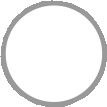
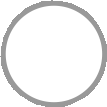
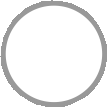
\* 67. Please provide an explanation for any open or unresolved findings or concerns, if applicable (500

characters maximum).

\* 68. Does the agency have any open (unresolved) monitoring findings or concerns from any governmental or foundation funder? If yes, please identify the finding or concern and explain a corrective plan of action

(500 characters maximum).

\* 69. Within your organization, please describe what actions are done to evaluate project and agency performance (1000 characters maximum).



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Match Funds

**HUD requires a 25% match (minus leasing) for this funding. This needs to be based on current commitments at the time of project application, covering the requested grant operating period/term, and NOT based on projections. Documentation is not required at this time, but must be in-hand**

**and dated within 60 days of the HUD application deadline. For additional guidance on match, please refer to the project guides, as well as the FAQs on the HUDexchange website**

**https://**[**www.hudexchange.info/coc/faqs**](http://www.hudexchange.info/coc/faqs) **and search for “match.”**

\* 70. Do you agree to have all required and acceptable match commitments and documentation by the e-

snaps final deadline?

Yes

No

\* 71. Do you acknowledge that failure to have the required and acceptable match documentation may result

in this project being excluded from the project listing (that is, not ranked for future funding)?

Yes

No



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Assurances

**To the best of my knowledge and belief, all information in this application is true and correct. The governing body of the applicant has duly authorized this document and the applicant will comply with the following:**

**\* Applicant will complete the HUD esnaps application form with the same information contained in this application unless adjustments have been requested by the Collaborative Applicant.**

**\* Applicant agrees to participate fully with the HMIS identified by the CoC, or alternate system for domestic violence providers.**

**\* Applicant agrees to participate fully with the CoC Coordinated Entry system.**

**Additionally, the governing body of this applicant understands that:**

**\* Submission of this application and the e-snaps application is not a guarantee of funding.**

**\* Inclusion in the Atlanta CoC application to HUD also does not guarantee funding, as all final funding decisions are made by HUD.**

\* 72. Electronic Acknowledgement

Name and Title

Date



2017 Atlanta CoC Renewal Project Review Application

Thank you!

**Thank you for thoughtfully and thoroughly completing this application.**

**Do not forget that for this application to be considered complete, you need to submit, by email, the following documents:**

**a. A quick note when the application has been submitted (and you will be sent a pdf version for your files);**

**b. A complete copy of all project documentation. This will vary from project to project and may include, but will not necessarily be limited to:**

**· A complete intake package;**

**· House rules and polices;**

**· Client handbook;**

**· Client termination and appeals process;**

**· Client Comment/Suggestion form;**

**· Any other project documents;**

**c. A pdf of the most recent APR that was submitted for this project;**

**d. A copy of any monitoring letters (with or without concerns or findings) that cover visits that have occurred since July 1, 2016; and**

**e. This** [**Atlanta CoC Certificatio**](https://partnersforhome.org/wp-content/uploads/2017/01/2017-Atlanta-CoC-Agency-Certification-Form_fillable080917.pdf)**n form.**

**If any of these do not apply, (HUD monitoring, APR, etc.), please submit a separate document simply stating that so that it is clear that you did not fail to submit the documentation.**

**Once you complete this online application, email Amy Zaremba to let her know and to send the above documents. Please use both of these addresses (to lessen the change of an email getting**

**lost in those big clouds!):**

[**amzaremba@atlantaga.gov**](mailto:amzaremba@atlantaga.gov) [**azaremba@partnersforhome.org**](mailto:azaremba@partnersforhome.org)

**You will receive and acknowledgement that your email has been received.**

**Also, please remember that you need to have your e-snaps application and all required updated documentation (excluding match letters, which will not be due until the final e-snaps date) complete by August 28, 2017, at 4:00pm. An e-snaps application may be considered incomplete if all required attachments, with the correct updated information, are not uploaded.**

**Failure to email the required documentation and/or failure to complete the e-snaps application, with the required attachments, may result in your application being not scored.**

**Also, as we continue through this process, please know that we may request more information, either for scoring clarification or to assist in completing the HUD CoC application.**

**Thanks, again, for all your hard work and dedication to the CoC and to people in need in our community!**