

Atlanta Continuum of Care

Introduction

Partners for HOME ("PfH"), on behalf of the Atlanta Continuum of Care, is releasing this Request for Proposals (RFP) to identify qualified nonprofit provider(s) to operate The Support Hub as part of the Atlanta Rising Initiative. Selected provider(s) will deliver Navigation Center, Pallet Shelter, Safe Haven, and Site Management services to provide low barrier shelter, stabilization, housing navigation, behavioral health coordination, and campus operations for individuals experiencing homelessness. PfH is a nonprofit organization that serves as the Collaborative Applicant for the Atlanta Continuum of Care (CoC) — a Housing and Urban Development (HUD) program that promotes community-wide commitment to the goal of ending homelessness and provides funding for efforts by nonprofit providers and state and local governments to quickly rehouse people impacted by homelessness. Its mission is to coordinate a comprehensive crisis response system to end homelessness in the City of Atlanta. *Partners for HOME does not discriminate based on race, color, religion, gender, sexual orientation, national origin, age, or disabilities in hiring practices or service provision.*

Project Overview

The Support Hub - Site Manager:

This opportunity seeks an experienced nonprofit provider to serve as the Site Manager for The Support Hub, a low barrier shelter campus developed as part of the Atlanta Rising Initiative. The Support Hub will include a 24/7 Navigation Center, Pallet Shelter, and Safe Haven program, providing immediate stabilization, shelter, and coordinated pathways to permanent housing for individuals experiencing homelessness.

The Support Hub is designed as an integrated campus that combines multiple shelter models on a single site. The campus will include a 50 bed Navigation Center for short term stabilization, 55 non congregate Pallet Shelter beds, and 50 Safe Haven beds for individuals experiencing severe and persistent mental illness.

The selected provider will oversee day to day campus operations and provide **24/7** on site management to maintain a safe, stable, and trauma informed environment. Responsibilities will include facility operations, safety and security oversight, intake coordination, bed management, resident engagement, access control, meal service coordination, incident response, maintenance oversight, and coordination with service providers and community partners to ensure efficient campus operations and positive client outcomes.

Anticipated Award

Respondents are expected to provide site management services for The Support Hub, including oversight of the 50 bed Navigation Center, 55 bed Pallet Shelter, 50 bed Safe Haven program, and shared campus operations. Providers should submit a budget proposal that reflects the staffing, operational, safety, security, maintenance, meal service, and facility management needs necessary to support a safe, stable, low barrier, and trauma informed campus. Providers should also demonstrate their ability to coordinate effectively with shelter operators, behavioral health partners, and other community stakeholders to ensure efficient campus operations and positive client outcomes.

General Information

This section will be reviewed by internal and external reviewers.

This **Site Manager** funding opportunity is part of the Atlanta CoC homeless response plan. The following documents will be uploaded as part of the application:

- FY25 organizational budget
- Two years of audited financials or internal financial statements to include a State of Financial Position (Balance Sheet), Statement of Activities(Profit & Loss)
- Financial Policies and Procedures (organizations funded by PfH in the past 12 months do not need to submit)

*** 1. Organization and Contact Information.** Provide the information below for the application's point of contact.

Name of Organization	
Organization Tax ID (EIN)	
Organization Founding Year	
Application Contact Name	
Application Contact Email	

Threshold Section

2. Nonprofit: Is your organization a registered 501(c)(3) nonprofit organization in good standing?

- ☐ Yes
- ☐ No

3. Operations: Does your organization agree to operate a pet inclusive program that accepts service animals, emotional support animals, and companion pets without exception?

- ☐ Yes
- ☐ No

4. Operations: Does your organization agree to operate the awarded program using a low barrier, Housing First approach, including 24 hour access to shelter and navigation services, as applicable to the awarded program?

- ☐ Yes
- ☐ No

* 5. **Conflicts of Interest.** Does your agency have any conflicts of interest to disclose? If yes, please detail it here. If no, please enter N/A.

Experience Section (30 points total)

* **6. Length of Experience.** How long has the organization provided homeless services in the below CoCs?

Atlanta CoC	
Balance of State	
Cobb CoC	
DeKalb CoC	
Fulton CoC	
Other CoC (Please share name and years)	

7. Subpopulation Experience. Please check all subpopulations your agency has experience with:

- ☐ Domestic Violence
- ☐ Youth
- ☐ LGBTQ+
- ☐ Veterans
- ☐ Families
- ☐ Chronic

* **8. Team Contacts.** List the name and title of staff contacts in the following areas:

Administration (person responsible for organization management)

Finance (person responsible for grants management and submitting expenses)

Programs (person responsible for leading and managing project implementation)

Performance (person responsible for monitoring HMIS data, project outcomes and submitting performance reports)

* 9. **Housing First.** Give a specific example of how your agency incorporates Housing First when working with clients. If your agency does not currently incorporate Housing First with clients, how will you incorporate this practice model in the proposed project? (1,000 character limit)

* 10. **Cultural and Linguistic Competencies.** Give a specific example of how your agency incorporates cultural and linguistic competencies when working with clients. If your agency does not currently incorporate cultural and linguistic competencies with clients, how will you incorporate this practice model in the proposed project? (1,000 character limit)

* 11. **Trauma-Informed Care.** Give a specific example of how your agency incorporates trauma-informed care when working with clients. If your agency does not currently incorporate trauma-informed care competencies with clients, how will you incorporate this practice model in the proposed project? (1,000 character limit)

* 12. **Representation.** Give a specific example of how Black and Indigenous People of Color (BIPOC) inform decision-making of the organization. (1,000 character limit)

* 13. **Representation.** What percentage of agency's Board, Leadership and Program Staff identify as a BIPOC?

Board

Staff Leadership

Program Staff

* 14. **Lived Expertise.** Give a specific example of how persons with lived expertise (PLE) inform decision-making of the organization. (1,000 character limit)

* 15. **Lived Expertise.** What percentage of the agency's Board, Leadership and Program Staff identify as PLE?

Board

Staff Leadership

Program Staff

* 16. **Financial Management.** Describe your organization's ability to manage grant funds. Include software used to aid in isolating grant expenses and revenues as well as procedures for reporting financial updates to funders. (1,000 character limit)

* 17. **Grant Management.** Has the Atlanta CoC previously funded your organization for a similar project?

☐ Yes. Please answer questions 18 and 19 and write N/A for 20.

☐ No. Please answer question 20.

18. **Grant Management.** If the Atlanta CoC **has previously** funded your organization for a similar project, please indicate the average number of days your financial draw submissions were late. **This may be verified.**

- ☐ 0 - 5 days late on average
- ☐ 6 - 15 days late on average
- ☐ 16 - 30 days late on average
- ☐ 31+ days on average

19. **Grant Management.** Explain any circumstances that contributed to late submissions and what steps have been taken to improve timeliness.

20. **Grant Management.** If the Atlanta CoC **has not** previously funded your organization for a similar project, please describe the processes, internal controls, or staff capacity you will use to ensure draw submissions are completed accurately and submitted on time.

* 21. **Grant Management.** Has your organization previously lost funding from the Atlanta Continuum of Care (CoC)? If yes, describe the circumstances that led to the loss of funding and any corrective actions taken. If no, describe your organization's approach to maintaining compliance and meeting program requirements to ensure successful grant performance.

Partners for HOME reserves the right to verify the information provided.

* 22. **Grant References.** Provide contact information for two funders who have awarded your agency a grant of a similar size to the amount you are requesting in this application. These references cannot be the Atlanta CoC. **This may be verified.**

Grantor 1 Name	
Grantor 1 Point of Contact	
Point of Contact 1 Email	
Point of Contact 1 Phone	
Amount of Grant 1	
Purpose of Grant 1	
Grantor 2 Name	
Grantor 2 Point of Contact	
Point of Contact 2 Email	
Point of Contact 2 Phone	
Amount of Grant 2	
Purpose of Grant 2	

Project Details and Reporting

This section references project components from the Atlanta CoC's Data Quality Plan. This section will be reviewed by internal and external reviewers.

Project Section (35 points total)

* 23. **Site Manager.** Describe the agency's plan for implementing the program components listed below. Please provide a detailed explanation with examples of how your agency will implement each component.

1. **Campus**

Operations and 24/7

Oversight: Describe how your agency will provide continuous operational oversight for the entire Support Hub campus, including the Navigation Center, Pallet Shelter, Safe Haven, common areas, and outdoor spaces.

2. **Safety, Security, and Emergency**

Response: Describe how your agency will maintain a safe, low barrier environment through security operations, incident response, de-escalation practices, emergency preparedness, and visitor management.

3. **Facility**

Operations and

Maintenance:

Describe how your agency will maintain safe, clean, and functional facilities, including preventive maintenance, janitorial services, work order management, grounds maintenance, laundry operations, inventory management, vendor coordination, and quality assurance inspections.

4. Food Service

Operations: Describe your agency's plan to provide nutritious meals to program participants. If meals will be provided through a partner, describe the partnership and how meals will be coordinated. If meals will be prepared on site, describe your agency's experience operating a commercial kitchen, food safety procedures, staffing, meal schedules, and accommodations for dietary restrictions.

5. Community Relations and Good Neighbor Strategy:

Describe how your agency will maintain positive relationships with neighboring businesses, residents, and community stakeholders. Include strategies for preventing camping around the property, maintaining clean public spaces, responding to community concerns, and implementing a Good Neighbor Plan.

6. Shared Campus Coordination:

Describe how your agency will coordinate daily operations across the Navigation Center, Pallet Shelter, and Safe Haven to maximize shared staffing, security, maintenance, sanitation, and operational efficiencies while ensuring each program maintains its intended service model.

**7. Campus
Leadership and
Cross Agency
Coordination:**

Describe how your agency will serve as the operational lead for The Support Hub by coordinating with service providers, behavioral health partners, security personnel, food service providers, Partners for HOME, and other stakeholders. Include your approach to communication, campus meetings, operational decision making, and problem resolution.

24. Project Ramp Up. How long will it take the agency to ramp up for this project after grant execution (e.g. hire and train staff, provide coverage for current staff, etc.)

- ☐ 1-30 days
- ☐ 31-60 days
- ☐ 61-90 days

*** 25. Project Ramp Up.** Provide a detailed timeline of how the agency will ramp up after grant execution. Include details about filling vacant staff roles, training of new staff and staff coverage during the ramp up period.

* **26. Project Outcomes.** Describe the organization's internal processes for reaching the below project outcomes. Please provide a detailed explanation with examples of how your agency will reach the following goals:

1. 100% of staff will complete all required training

2. Maintain documentation of all safety, access, and resident conduct-related incidents, including timely reporting in accordance with PfH requirements.

3. 100% of residents will have access to three meals per day through either on site food service or a formal partnership with a qualified food service provider.

4. Maintain compliance with all applicable food safety and sanitation standards.

5. Maintain a written meal plan reviewed at least quarterly, document food service operations, and ensure applicable staff maintain current food handler certifications in accordance with local and state requirements.

6. 95% of routine maintenance requests will be completed within five business days, and 100% of emergency maintenance requests will be addressed within 24 hours.

Financials

Please attach the following financial documents as part of your application. This section will be reviewed internally by the Partners for HOME Finance team.

Financial Review Section (35 points total)

* 27. Upload your Board-approved, current fiscal year organization budget. **Name this document "Organization Budget."**

Upload this document in PDF format. Maximum file size is 16MB.

Choose File

Choose File

No file chosen

28. Upload the two most recent years of audited financials. **Name this document "Audited Financials."** If an audit was **not completed within the last two years**, please provide the most recent financial statements, including a Statement of Financial Position and a Statement of Activities.

Upload this document in PDF format. Maximum file size is 16MB.

Choose File

Choose File

No file chosen

29. **If Question 28 was not answered**, upload internal financial statements to include a Balance Sheet and Profit & Loss Statement if you do not have audited financials or a Statement of Financial Position and Statement of Activities. **Name this document "Internal Financials."**

Upload this document in PDF format. Maximum file size is 16MB.

Choose File

Choose File

No file chosen

* 30. Upload your financial policies and procedures manual. **Name this document "Financial Policies and Procedures."**

Upload this document in PDF format. Maximum file size is 16MB.

Choose File

Choose File

No file chosen

* 31. Please upload your **Site Manager** project budget using the provided budget template. The budget will serve as your agency's cost proposal and should reflect the proposed staffing structure, site operations, safety and security coverage, meal service coordination, facility coordination activities, and all other costs necessary to operate the 60-unit non-congregate shelter program during the initial grant year.

Upload this document in PDF format. Maximum file size is 16MB.

Choose File

Choose File

No file chosen