Request for Proposals for New Permanent Supportive Housing Projects
Technical Assistance Workshop

2016 CONTINUUM OF CARE FUNDING CYCLE
Agenda

Introduction

FY 2016 CoC Program Notice of Funding Availability

RFP Process Review

Exhibits Review

Attachments Review

HUD Forms Review

Questions
Introductions

NAME, TITLE, AGENCY
FY 2016 CoC Program Notice of Funding Availability

HOUSING FIRST MODEL

THRESHOLD
Housing First

A model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold).

Tier 2 – Commitment to Policy Priorities – up to 10 points for how the PH project commits to applying the Housing First model.
HUD Project Eligibility Threshold (page 23-24 of NOFA)

Projects assessed using the following criteria on a pass/fail basis:

- Project applicants must meet the eligibility requirements of the CoC Program as described in 24 CFR part 578.
- Project applicants must demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and to administer Federal funds.
- Project applicants must submit the required certifications as specified in the NOFA.
- The population to be served must meet program eligibility requirements as described in the Act, and the project application must clearly establish eligibility of project applicants.
- The project must be cost-effective, including costs of construction, operation, and supportive services with such costs not deviating substantially from the norm in that locale for the type of structure of activity.
- Project applicants must agree to participate in the local HMIS system.
To be considered as meeting project quality threshold, new permanent housing – permanent supportive housing – project applications must receive at least 3 out of the 5 points available for the criteria below. New permanent housing projects applications that do not receive at least 3 points will be rejected.

- Whether the type of housing and number and configuration of units will fit the needs of the program participation (1 point);
- Whether the type of supportive services that will be offered to program participants will ensure successful retention or help to obtain permanent housing – this includes all supportive services, regardless of funding source (1 point);
- Whether the specific plan for ensuring that program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs for which they are eligible to apply meets the needs of the program participants (1 point);
- Whether program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (1 point); and
- Whether at least 75 percent of the proposed program participants come from the street or other locations not mean for human habitation, emergency shelters, safe havens, or fleeing domestic violence (1 points).
Request for Proposals
Process Review

AVAILABLE FUNDING
ELIGIBLE PROJECTS
TECHNICAL REQUIREMENTS
DOCUMENT PRESENTATION REQUIREMENTS
## Available Funding for New Projects

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Amount Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent Housing Bonus Project</td>
<td>$1,085,187</td>
</tr>
<tr>
<td>Permanent Supportive Housing created through Reallocation</td>
<td>$478,863 (subject to change upon finalization of 2016 CoC Ad Hoc Recommendations and Appeals process)</td>
</tr>
</tbody>
</table>
Eligible Project Type

Permanent Supportive Housing that will serve 100% chronically homeless individuals and families, including youth experiencing chronic homelessness.

- However, prioritizing chronically homeless individuals is the top priority
<table>
<thead>
<tr>
<th>Category</th>
<th>Permanent Supportive Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible Applicants</td>
<td>Non-profits, government entities, public housing authorities</td>
</tr>
<tr>
<td>Eligible Participants</td>
<td>100% Chronically homeless people</td>
</tr>
<tr>
<td>Eligible Activities/Expenses</td>
<td>• Leasing</td>
</tr>
<tr>
<td></td>
<td>• Rental Assistance (TRA, SRA, PRA)</td>
</tr>
<tr>
<td></td>
<td>• Operating Costs</td>
</tr>
<tr>
<td></td>
<td>• Support Services</td>
</tr>
<tr>
<td>Orange County CoC/2110C HMIS and CE</td>
<td>Annual fee: 1.5% of grant to be budgeted towards HMIS/CE system fee.³</td>
</tr>
<tr>
<td>Support Services</td>
<td>Grant funds may be used for any supportive service listed as eligible under 578.53</td>
</tr>
<tr>
<td>Grant Term</td>
<td>Only one (1) year grant terms will be considered, to maximize available funding.</td>
</tr>
<tr>
<td>Timeliness</td>
<td>Program funds must be obligated by September 30, 2018. Applicants must start programs in a timely manner.</td>
</tr>
<tr>
<td>Match</td>
<td>25% of total grant request. Leasing funds do not have to be matched. Match can be cash or in-kind and must be spent on eligible project costs.</td>
</tr>
<tr>
<td>Leverage</td>
<td>At least 150% of grant request.</td>
</tr>
<tr>
<td>Coordinated Entry</td>
<td>Must agree to participate in Orange County Coordinated Entry System.</td>
</tr>
<tr>
<td>Housing First Model</td>
<td>Must operate a Housing First Model.</td>
</tr>
</tbody>
</table>
Bonus Points

Per HUD, applications focusing on the severity of needs and vulnerabilities of chronically homeless individuals and families, which includes, but is not limited to: low or no income, current or past substance abuse, criminal record – with the exception of restrictions imposed by federal, state, or local law or ordinance are a priority.

The Orange County CoC shares the commitment to addressing chronically homeless individuals and families with the above described severity of needs and vulnerabilities, and referred to as target population.
Bonus Points

Up to five (5) bonus points are available to eligible applicants that demonstrate the capacity to address the needs of the target population in their projects.

Exhibit 6 of the RFP has questions gauge applicants experience in working with the target population.
Review and Ranking Process

- All applications will be reviewed to ensure they meet HUD threshold requirements and quality standards.
- Orange County CoC will convene an unbiased Project Review Panel to review each new project.
- Project Review Panel will hold one (1) meeting to review and average their score and arrive at a decision about which projects to fund and should be submitted as the permanent housing bonuses.
- In keeping with HUD requirements, the Project Review Panel will also assign a ranked order to all projects that will be funded.
- The final ranking of the new projects as determined by the Project Review Panel will be recommended to the CoC Ad Hoc Committee to determine their order on the Project Priority Listing submitted to HUD.
- The final Project Priority List will be approved by the C2eH/CoC Board. Applicants will be notified of the results no later than August 30, 2016.
Rating Criteria (pages 9-10 of RFP)

- Capacity of Grantee – up to 25 points
- Housing Location and Navigation – up to 10 points
- Appropriateness of Housing – up to 10 points
- Service Plan – up to 25 points
- Housing First Approach – up to 6 points
- Timing – up to 8 points
- Budget and Match – up to 8 points
- Participation in CoC meetings, PIT, HIC, HMIS – up to 5 points
- Completeness and Clarity of Application – up to 3 points
- Bonus Points – Chronically Homeless with Severe Needs – up to 5 points
HUD CoC Project Application (e-Snaps)

e-Snaps is not open yet.

Upon opening of e-snaps, agencies will receive notice and be given two weeks to complete e-snaps application and submit two (5) paper copies to 2-1-1 Orange County.

Include a tab in your RFP submittal for this, so it can be included with project documents at a later time.
Exhibits Review
Exhibit 1: Certification of Consistency in the Consolidated Plan

Include all pages of document in submittal.

EXHIBIT 1: CERTIFICATION OF CONSISTENCY WITH THE CONSOLIDATED PLAN (PER PROJECT)

Agency Name:

Project Name:

If project is located in the unincorporated area complete page 3 in its entirety; otherwise respond “N/A.”

For project(s) located in the unincorporated areas of the County only: Complete questions one through five below and return to craig.fae@occgov.com along with the Certificate of Consistency with the Consolidated Plan (Form HUD – 2991.)

1. Applicant Name: Click here to enter text.
2. Project Name: Click here to enter text.
3. Project Location to include address, city and zip code: Click here to enter text.
4. Name of Federal Program to which the applicant is applying: Click here to enter text.
5. Summary of the project to include the information below for this project:
   a. Purpose: Click here to enter text.
EXHIBIT 2: ENVIRONMENTAL REVIEWS

Agency Name:

Project:

Please check and complete applicable environmental items for your proposed project.

☐ Attachment 1: Environmental Review for Continuum of Care Leasing or Rental Assistance Project that is Categorically Excluded Subject to Section 58.5

☐ Attachment 2: Environmental Review for Activity/Project that is Exempt or Categorically Excluded Not Subject to section 58.5

Must select only one box.
Exhibit 3: Financial Commitment

EXHIBIT 3: FINANCIAL COMMITMENT

Agency Name:
Name Project:
Total Requested Amount: $

Amount ($) requested for proposed new Permanent Supportive Housing project.
Exhibit 3: Financial Commitment

Match Requirements - All eligible funding costs, except leasing, must be matched with no less than 25% cash or in-kind contribution.

1. How much match (cash and in-kind) does your agency expect to provide for this project in FY 2016?

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total Commitment Amount ($)</th>
<th>Source(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cash</td>
<td>In-Kind</td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Only one option (Cash or In-Kind) will be filled per line.

Source: Grant, Foundation, Donation, Professional Service

If additional lines are needed to capture Match, additional lines may be added.
Exhibit 3: Financial Commitment

Example

Match Requirements - All eligible funding costs, except leasing, must be matched with no less than 25% cash or in-kind contribution.

1. How much leverage (cash and in-kind) does your agency expect to provide for this project in FY 2016?

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Total Commitment Amount ($)</th>
<th>Source(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cash</td>
<td>In-Kind</td>
</tr>
<tr>
<td>2016</td>
<td>$250,000</td>
<td>Grant ABC from Funder 123</td>
</tr>
<tr>
<td>2016</td>
<td>$40,000</td>
<td>Company A - website hosting and management</td>
</tr>
<tr>
<td>2016</td>
<td>$47,000</td>
<td>Private Funder</td>
</tr>
<tr>
<td>2016</td>
<td>$25,000</td>
<td>Company car</td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Exhibit 3: Financial Commitment

Leverage Requirements - Leveraged resources may include funding or in-kind contributions, such as services or equipment. Partners providing the leveraged resources may include governmental entities, public or private nonprofit organizations, for-profit private organizations, individuals, or other entities willing to partner.

2. **Identify what level your agency will provide leveraging at, and indicate the amount.**

   - At 100% or more.
   - At 150% or more.
   - Other (Indicate %): _______

   **Amount Leveraged:** $

Check only one box, as appropriate.

Indicate total amount ($) leveraged.
EXHIBIT 4: HOUSING FIRST MODEL COMMITMENT

Agency Name:

Project Name:

HOUSING FIRST REVIEW AND CERTIFICATION

Housing First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions (such as sobriety or a minimum income threshold).

The Orange County Continuum of Care supports the Department of Housing and Urban Development’s (HUD) Homeless Policy and Program Priorities of using a Housing First Approach as Indicated in the FY 2015 CoC Program NOFA. As such, agencies submitting a Request for Proposal must demonstrate commitment to the Housing First Model and the program description must demonstrate the implementation of a Housing First Model as detailed on USICH’s website at:

http://usich.gov/usich_resources/fact_sheets/the_housing_first_checklist_a_practical_tool_for_assessing_housing_first_in
Exhibit 4: Housing First Model Commitment

1. Does the agency commit to quickly move participants into permanent housing – permanent supportive housing?
   - Yes  - No

2. Will the agency ensure that participants are not screened out based on...
   a. Having too little or no income?
      - Yes  - No
   b. Having a criminal record with exceptions for state-mandated restrictions?
      - Yes  - No
   c. Active or history of substance abuse?
      - Yes  - No
   d. History of domestic violence (e.g. lack of protective order, period of separation from abuser, or law enforcement involvement?)
      - Yes  - No
   e. Sexual orientation or gender identification?
      - Yes  - No
3. Does the agency commit to not evicting or terminating participants from program for not following through on services and/or treatment plan?
   ☐ Yes ☐ No

4. Does the agency commit to following all Fair Housing laws?
   ☐ Yes ☐ No
Exhibit 4: Housing First Model Commitment

**Certification**

Your signature below indicates that you are certifying that all information submitted in response to Exhibit 4 is correct and accurate.

Name, Title and Signature of Person who will complete the application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Name and Signature of Person authorized to sign the HUD application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
EXHIBIT 5: COORDINATED ENTRY SYSTEM PARTICIPATION

Agency Name:

Project Name:

The Orange County Coordinated Entry System (CES) connects existing programs together into a “no wrong door network” to assess the needs of those who are homeless and link them with the best housing to meet those needs. The goal of the CES is to streamline processes through which communities assess, house, and retain individuals who are homeless; to ensure all of our homeless neighbors are known and supported; to target and maximize limited housing resources; and comply with the federal mandate to adopt a coordinated entry process for housing.
Exhibit 5: Coordinated Entry System Participation

By signing the document, the Agency understands the above named project must participate in CES and failure to fill all PSH and PRH program openings through referrals from the CES will have a negative impact our CoC Performance as well as on the Agency and Project Performance.

Name, Title and Signature of Person who will complete the application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Name and Signature of Person authorized to sign the HUD application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
EXHIBIT 6: BONUS POINTS

Agency Name:

Project Name:

The Orange County Continuum of Care (CoC) is seeking eligible applicants for new Permanent Housing - Permanent Supportive Housing (PSH) projects that will have a commitment to addressing the severity of needs and vulnerabilities experienced by program participants which includes, but is not limited to: low or no income, current or past substance abuse, criminal records – with the exception of restrictions imposed by federal, state, or local law or ordinance – and chronic homelessness in the CoC. Up to 5 bonus points are therefore available for eligible participants that demonstrate the capacity and ability to implement a homeless Youth preference in their projects.

If you are submitting a request for a proposal for a permanent housing project that is intending to target a population preference, please provide a response to the questions below. If not indicate not applicable, (N/A).
Exhibit 6: Bonus Points

1. Does your project have a preference for the above described target population?
   - Yes
   - No

2. Describe experience working with the target population and the type of services and housing provided.

3. The number of years of experience serving this population and the outcomes achieved in ending homelessness for the persons served.

4. Describe experience, relationships and partnership(s) with other agencies (i.e., Homeless Court, Health Care Agency, and Social Service Agency) that provide services to, or advocate for the target population.
Exhibit 6: Bonus Points

Name, Title and Signature of Person who will complete the application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Name and Signature of Person authorized to sign the HUD application:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

There may be duplicate signatures

- Example: Person authorized to sign the HUD application is also the Executive Director of the agency.
Attachment Review
ATTACHMENT 1

Environmental Review for Continuum of Care Leasing or
Rental Assistance Project that is Categorically Excluded

Subject to Section 58.5
Pursuant to 24 CFR 58.35(a)(5)

This CoC Limited Scope Review Form is to be used only for leasing or rental assistance activities
without any associated repairs, rehabilitation, new construction, or other activities with physical impacts
funded under the Continuum of Care (CoC) program.

Certain fields have been completed already based on the specifics of these program activities. It is the
Responsible Entity’s responsibility to ensure that all required fields (those marked with an asterisk) and
analysis are completed.

Project Information
Attachment 2: Environmental Review of Categorically Excluded Not Subject to Section 58.5

Attachment 2
Environmental Review for Activity/Project that is Exempt or Categorically Excluded Not Subject to Section 58.5 Pursuant to 24 CFR Part 58.34(a) and 58.35(b)

Project Information

Project Name:

Responsible Entity:

Grant Recipient (if different than Responsible Entity):
Attachment 3: In-Kind Memorandum of Understanding (MOU)

Document will be on letterhead of agency, who you have an in-kind memorandum of understanding.

Document must indicate the project that is being renewed.

Document must indicate value of in-kind services or materials being received.
Attachment 4: 25% Match Documentation Letters for 2016

Match letter should be on agency letterhead and indicate a source of match.

If using a grant, the grant should indicate that it may be utilized as Match for other funding.

*NOTE:* If match documentation letter will not be ready by submission deadline, they will be needed at time of e-snaps submission.

◦ If that is the case, indicate in Attachment 5 4.
HUD Forms Review
HUD Forms

All HUD Forms must be dated between May 1, 2016 and September 14, 2016.

HUD Forms to be completed for each project.
- SF – 424 Sup
- Form HUD 2880

HUD Forms to be completed once for agency.
- Form HUD 50070
- SF – LLL
SF – 424 Supplement
Survey on Ensuring Equal Opportunity for Applicants

**Grant Name:** Proposed Project Name

**CFDA Number:** 14.267

One form per project must be submitted.
HUD Form 2880

Applicant/Recipient refers to the agency name which is submitting a proposed project. For Domestic Violence and Scattered Sites Projects use the Administrative Office address.

Select “Initial Report” as it is a new project application.

HUD Program Name should be “Continuum of Care Program” for all HUD Form 2880 completed.

Input information as follows:
- Project Name – Complete
- Project Address (if scattered site utilize administrative address)

Project amount requested.
Select “Yes” for all HUD Form 2880 completed.

Select “Yes” for projects with amounts more than $200,000.
→ Continue to Parts II and III

Select “No” for projects with amounts less than $200,000.
→ Form 2880 is complete. Sign and date in the Certification section.
### HUD Form 2880

#### Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

<table>
<thead>
<tr>
<th>Department/State/Local Agency Name and Address</th>
<th>Type of Assistance</th>
<th>Amount Requested/Provided</th>
<th>Expected Uses of the Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Note: Use Additional pages if necessary.)

### Department/State/Local Agency Name and Address

- Enter the name and complete address of the government agency making the assistance available.
- When the source is a contributor(s), multiple donors, an LLP, non-profit, or simply the agency’s own cash, enter the agency’s name and address.
- Use additional pages for additional funding and to ensure legibility.
HUD Form 2880

Type of Assistance

- Other Government Assistance – assistance from the Federal government (aside from that requested of HID in this application), a State, local government that is, or is expected to be made available with respect to this project.
  - Loan, grant, loan insurance
- Non-Government Assistance – any other sources that have been, or are to be, made available for the project.
  - Foundation, private contributors

Amount Requested/Provided

- Enter the dollar amount that is, or is expected to be made available with respect to the project.

Expected Uses of Funds

- Each reportable use of funds must clearly identify the purpose of which they are to be put.
HUD Form 2880

The following information MUST be provided:

◦ List of persons shall be alphabetical (last name, first name)
◦ Social Security Number or Employee ID Number
◦ Type of Participation in Project/Activity
  ◦ Sub-sub recipient, contractor, consultant, planner, and investor
◦ Financial Interest in Project/Activity ($ and %)
  ◦ Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the total amount of the HUD assistance involved.
HUD Form 2880

The form must be signed by an official of the Applicant/Recipient agency.

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed $10,000 for each violation. I certify that this information is true and complete.

Signature: 

Date: (mm/dd/yyyy)

X
Disclosure of Lobbying Activities

- All agencies are required to complete this form.
- One form per agency must be submitted.
- If your agency has hired a lobbyist to make sure more federal funding or state dollars come your way, you **MUST** include the lobbyist information.
HUD Form 50070
Certification for Drug-Free Workplace

Applicant Name is Agency Name

Program/Activity Receiving Federal Grant Funding: Continuum of Care Program

If more than one page is attached, number the pages
   ◦ Example: Page 1 of 3

One form per agency must be submitted.
Deadline for RFP

Tuesday, August 2nd, 2016 by 12:00 pm Pacific Standard Time

Hand delivered to 2-1-1 Orange County
  Attention: Zulima Pelayo
  1505 E. 17th Street, Suite 108
  Santa Ana, Ca 92705
More Information

Email or call Zulima Pelayo

- zpelayo@211oc.org
- 714-589-2358

HUD Exchange:
https://www.hudexchange.info/resources/documents/FY-2016-CoC-Program-NOFA.pdf

Do not contact the HUD office regarding Orange County’s local application deadlines or process.
## Important Dates

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Release of RFP</td>
<td>July 19, 2016</td>
</tr>
<tr>
<td>Deadline for LOI/Part II 12pm (PST)</td>
<td>August 2, 2016</td>
</tr>
<tr>
<td>Complete project application in eSnaps</td>
<td>2 weeks after opening</td>
</tr>
<tr>
<td>Submit <strong>hardcopy</strong> of eSnaps to Zulima</td>
<td>2 weeks after opening</td>
</tr>
</tbody>
</table>
Questions