

San Francisco Local Homeless Coordinating Board

**HUD CONTINUUM OF CARE HOMELESS
ASSISTANCE GRANTS**

**Bidders Conference
2019 NOFA Competition**

**2019 Local Materials Packet
For Agencies Applying for New Projects**

July 30, 2019

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2019 LOCAL NEW & RENEWAL PROJECTS REVIEW PROCESS

STATEMENT OF POLICY:

While all decisions about the San Francisco Continuum of Care (CoC) Project Review Process are subject to review and approval by the Local Homeless Coordinating Board (LHCB), our community values public input and community discussion around all aspects of the CoC. In the event of requirements or policy directives in the Notice of Funding Availability (NOFA) that necessitate changes to the scoring process, LHCB staff will endeavor to provide a public process for discussion and community input.

- CoC designs a project review process and LHCB approves it prior to NOFA release.
- HomeBase collects Annual Performance Reviews (APRs) and supplemental information as needed.
- HomeBase completes assessment and review of renewal projects and prepares project evaluations.
- After the NOFA is released, application and project review documents are updated to address any unexpected elements of the NOFA. If feasible, the Funding Committee will meet to discuss proposed changes to the application and project review process. All changes are approved by LHCB at next meeting.
- Projects receive preliminary scores with their project evaluations and are invited to provide a narrative response to be considered by the Priority Panel. The Priority Panel will review only those scoring factors identified by the projects and other factors may remain at the pre-scaled score. Panelists have the discretion – but are not required – to review other scores to maintain consistency across all projects.
- Applicants attend a Bidders' Conference, receive application materials, and have time to complete and submit their applications.
- LHCB staff will recruit Priority Panel members, prioritizing members who have served as Priority Panelists in the past or who have other relevant experience. Priority Panel members will sign “no conflict of interest” and confidentiality statements.
- All projects will submit applications to DSHS, including a HUD Project Application, required local application materials, and match documentation. All documents should be submitted electronically in separate PDF files via the instructions on the Proposal Submission Checklist.
 - Late applications received within 48 hours of the due date/time will receive a 15-point score reduction. A 5-point reduction will be applied to any project that fails to submit either the electronic or paper copy of the application by the application deadline. Incomplete applications cannot be cured for Priority Panel scoring, but, if selected for funding by the Priority Panel, must be corrected prior to HUD submission.
- Priority Panel members are trained, as appropriate, and receive applications. Panelists review applications.
- LHCB staff and HomeBase review project applications and provide technical feedback. DSHS/LHCB staff determines whether project thresholds are met.
- If an agency has a grant for a program that it would like to transfer to another program in the agency, perhaps because the original project is not meeting HUD performance expectations or is no longer as needed in the community, that agency may “reallocate to itself.”

- Agencies considering this option should consult with DSHS and/or HomeBase, as grant amendment may be a better option. There are some requirements involved in changing a program via reallocation, including the populations that must be served under the 2019 NOFA.
- In the competition, only that agency may apply for the earmarked funding as long as the reallocated project application is reasonably strong and is compliant with HUD requirements. The reallocated project application will be scored with the other new projects. The application must score at least on a comparable level with the other new project applications.
 - If the application is reasonably strong, an extra 5 points (parallel to the bonus points for renewal permanent housing) will be added to the final score and the project will be placed in rank order with the renewal projects. The project may be in Tier 1 or Tier 2, depending on its score.
 - If the application is not reasonably strong, the Panel may use the funding for another new project, rank the new project at the bottom of Tier 2, or suggest the agency revert to the old program.
- Priority Panel meets to review and discuss applications together, identify technical assistance needs, and to continue to individually score them. Priority Panel members then finalize individual scores. Scores are added and applications are ranked and placed into either Tier 1 or Tier 2.
 - Renewal projects that do not yet have performance data for a full year of operation will be held harmless and awarded full points on all scoring factors that cannot be evaluated. Second-time or older renewal projects that do not have performance data for a full year of operation will be required to submit an explanation as to why they have not started spending out project funds and provide a plan for doing so within the HUD-mandated period. In extreme cases where community funding is at risk, panelists may exercise discretion, including recommending reallocation or placement into Tier 2.
 - First-time renewal housing projects that propose to apply for fewer than 90% of the units in their original New Project application will not be held harmless, and will receive two-thirds points on all scoring factors that cannot be evaluated.
 - Renewal HMIS and Support Services for Coordinated Entry projects will be ranked at the bottom of Tier 1.
 - New HMIS and Support Services for Coordinated Entry project applications will be ranked at the top of Tier 2.
 - If the HUD tier rules allow for projects to “straddle” the tiers, i.e. to fall partially in Tier 1 and partially in Tier 2, then the top-scoring non-HMIS, non-Coordinated Entry project in Tier 2 will be moved to straddle the tiers.
 - New projects will be scored and ranked based on the New Project Scoring Tool.
 - The San Francisco CoC prioritizes projects that will continue to preserve existing permanent housing in order to maximize San Francisco’s housing inventory.
- The Priority Panel may identify projects that should be reallocated, in whole or in part, or re-ranked in favor of a new project, based on community priorities as determined by the CoC and DSHS.
- Preliminary scoring results are delivered to applicants with a reminder about the appeals process.

- All applicants that are eligible to appeal will receive all Priority Panelist scores in advance of the appeals deadline. Projects facing reallocation will have additional appeal rights (see separate Appeals Policy for more detail). In addition, Priority Panel score sheets will be made available upon written request after the local competition closes. All applicants can also report any discrepancies in their score sheet, although this is not considered an official appeal.
 - If a panelist assigns a score, for any scoring factor, that is *lower* than the project's pre-scored points for that factor, that panelist will be asked to explain their decision. Relevant Priority Panel comments on that factor will be provided along with the project's Priority Panel score sheet.
- Appeals, if any, are reviewed by the Appeals Panel of non-conflicted LHCB Members.
- LHCB meets to consider and approve a final CoC ranked funding list. If any renewal project does not apply for funding or is identified by the Priority Panel as in need of reallocation, that funding may be reallocated to a new project. **The LHCB will make all final decisions about reallocating funding from any project.**
- If funding becomes available after approval of the final ranked list, through reallocation or budget corrections, LHCB staff will offer the excess funding to new project applicants in order of project ranking.
- Projects will submit copies of letters or documentation for all match resources listed in their application.
- Applications will be submitted with the City-wide application and applicants will be invited to attend the 2019 NOFA Debrief.

The process is welcoming to persons with disabilities, persons who have experienced homelessness, and persons with limited English proficiency. If you need any accommodations, please contact Charles Minor at Charles.Minor@sfgov.org or 415-557-6007.

SAN FRANCISCO LOCAL HOMELESS COORDINATING BOARD

2019 MCKINNEY-VENTO CONTINUUM OF CARE HOMELESS ASSISTANCE GRANTS

2019 APPEALS POLICY AND PROCESS

Applicants may appeal if: (1) the project is not funded or receives less funding than the amount in the application; (2) the project is ranked in Tier 2 of the CoC application (in which the applicants funding may be at risk); or (3) the project falls into the bottom portion of Tier 1, as described below. All notices of appeal must be based on the information submitted by the application due date. No new or additional information will be considered, unless the project is facing reallocation. Omissions to the application cannot be appealed. The decision of the Appeal Committee will be final.

The Appeal Committee will be made up of three (3) members of the Local Homeless Coordinating Board, along with one non-voting representative from the Priority Panel. The voting members will not have participated on the original Priority Panel or have a conflict of interest with any of the agencies applying for McKinney funding. The role of the Appeal Committee is to read and review only those areas of the application that are being appealed.

PROCESS

- A preliminary ranked CoC Program funding list is posted.
- Each agency will have one (1) business day to request copies of their score sheets, including relevant panel comments. Programs will contact HomeBase at sfNOFA@homebaseccc.org to request score sheets. Once requested, score sheets will be emailed to programs.
- Eligible Appeals: Any project that is 1) not funded or receives less funding than the amount in the application; 2) a renewal project that is ranked in Tier 2 of the CoC application (in which the applicant's funding may be at risk); or 3) falls into the bottom portion of Tier 1 that equals the Tier 2 amount may appeal the application's score based on their score sheets. The preliminary CoC Program project funding list will indicate which applications fall into these categories at the time it is posted.
- Any sponsor agency may report any discrepancies in their score sheet to Charles Minor at (415) 557-6007 for the purpose of avoiding such errors in scoring in future years, and such report will not constitute an appeal.
- Any and all appeals must be received in writing within the two (2) and a half business-day appeal period; therefore, all written appeals for applications that are eligible to appeal at the time the preliminary McKinney project priority list is posted must be received by the appeals deadline established for the local competition.
- All notices of appeal must be submitted electronically to HomeBase at sfNOFA@homebaseccc.org **AND** Charles Minor at Charles.Minor@sfgov.org . Please note that appeals sent only to Charles.Minor@sfgov.org will not be considered.
- The notice of appeal must include a written statement specifying in detail each and every one of the grounds asserted for the appeal. The appeal must be signed by an individual authorized to represent the sponsor agency (i.e., Executive Director) and must include (highlight and/or cite) the specific sections of the application on which the appeal is based. The appealing agency must specify facts and evidence sufficient for the Appeal Committee to determine the validity of the appeal. That is, the notice of appeal must have attached the specific areas of the application being appealed and must also clearly explain why the information provided is adequate to gain additional points. The Appeals Panel may take notice of the fact that issues are being raised that

could and should have been raised in final submissions and may use their discretion in reviewing those and other factors during the Appeals Process.

- If a program is facing reallocation, in part or in whole, the appealing agency may submit a more robust appeal. These appeals can include any information the agency feels is relevant, whether or not it was included in the project's original application. The program will also be given the opportunity to make a brief in-person presentation to the Appeal Committee.
- The Appeal Committee will review and evaluate all notices of appeal and decide whether or not the appeal has any validity based on the appeal policy.
- All valid appeals will be read, reviewed and evaluated by the Appeal Committee.
- The Appeal Committee will hear any in-person presentations by projects facing reallocation. The appealing agency can send up to two staff members to the presentation. The presentation is limited to 5 minutes. Following the presentation, the Appeal Committee will have the opportunity to ask questions of the appealing agency. The results of the in-person presentation will not have an effect on the project's rank; it can only be used to reverse a decision to reallocate funds. The decision of the Appeal Committee will be released after deliberation.
- Appeal Committee deliberates.
- Agencies will receive, in writing, the decision of the Appeal Committee within 2 business days.
- **Appeals Panel List is submitted for consideration and approval by LHCB.**

2019 MCKINNEY-VENTO CONTINUUM OF CARE HOMELESS ASSISTANCE GRANTS
2019 NEW PROJECT SCORING TOOL

THRESHOLD CRITERIA

(Required but not scored. If “no” for any threshold criteria, the project is ineligible.)

Item	Maximum Score
HMIS Implementation: Projects that do not participate, or have not agreed to participate, are not eligible for funding, unless it is a victim-service agency, serving survivors of domestic violence, or a legal services agency. Project has agreed to participate in the DSHS-administered HMIS and has signed a local Certification of Intent to participate. Victim-services agencies must utilize a comparable database to HMIS and be able to produce de-identified aggregate data.	N/A
Coordinated Entry: Projects that have not agreed to participate in Coordinated Entry, when it is available for the program type, are not eligible for funding. Victim-service agencies or those serving survivors of domestic violence shall participate with Coordinated Entry while protecting client data and safety to ensure fair and equal access to the coordinated entry process and housing and services opportunities.	N/A
Eligible Applicant: Applicant and subrecipient (if any) are eligible. Eligible project applicants for the CoC Program are nonprofit organizations, States, local governments, and instrumentalities of State and local governments.	N/A
Project is eligible for bonus, reallocation, or domestic violence bonus funding in the 2019 CoC NOFA.	N/A
Project Shall Meet HUD Timeliness Standards: Project has secured or will secure proof of site control, match, environmental review, and the documentation of financial feasibility within 12 months of the announcement of the award.	N/A
Target Populations: The population to be served must meet CoC program eligibility requirements, and the project application must clearly establish eligibility of project applicants.	N/A
Amount of Request: The LHCBC retains the right to request that new applicants adjust the amount of their requests.	N/A
Match: The agency has committed to match 25% of the grant except for leasing funds.	N/A
Ineligible Activities for New Projects: In order to best optimize the McKinney-Vento Continuum of Care funds, the LHCBC has determined that new projects shall not request funds for construction, rehabilitation, or acquisition.	N/A
Masterleased Units: If units are masterleased, lease is for at least 10 years.	N/A
CoC Strategic Plan Compliance: Project aligns with the San Francisco CoC Strategic Plan.	N/A
Equal Access and Non-Discrimination: The project ensures equal access for program participants regardless of their race, color, national origin, religion, sex, age, familial status or disability. The project complies with all federal and state civil rights and fair housing laws including the Fair Housing Act, Title IV of the Civil Rights Act and the Equal Access Rule.	N/A
Training and Technical Assistance: All projects must agree to be responsive to training and technical assistance from the Collaborative Applicant and the Local Homeless Coordinating Board (LHCBC).	N/A
Substantially Changed Systems: All projects agree to inform LHCBC and Collaborative Applicant if they have key personnel changes or substantially changed systems (such as changes to client admissions criteria).	N/A
Recent Financial Statement: Projects must provide an up to date (within last 21 months) audited financial statement, and single audit (if applicable)	N/A

SCORED CRITERIA

Item	Maximum Available Score
1 Program Description	23
1a Program design includes provision of appropriate supportive services and type, scale, and location of the supportive services fit the needs of the program participants and the mode of transportation to those services. Program participants are helped to obtain and remain in permanent housing in a manner that fits their needs.	10
1b Housing where participants will reside is fully described, accessible and appropriate to the program design proposed, and type, scale, and location of the housing fit the needs of the program participants.	4
1c Linkages to other services or agencies are described.	4
1d Program will use a “housing first” approach, offering assistance without preconditions (such as sobriety) and rapid placement/stabilization in permanent housing.	5
2 Mainstream Resources	5
2a Program has policies and procedures that screen all clients for eligibility for mainstream resources and assist them in accessing mainstream resources, and the specific plan for ensuring clients 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. Participants are assisted to both increase their incomes and live independently using mainstream housing and service programs in a manner that fits their needs.	3
2b Program conducts or provides access to training for staff on available mainstream resources for which clients may qualify.	2
3 Project Population	6
3a Population to be served is all chronically homeless or another high priority population, and process for identifying clients is compatible with Coordinated Assessment and other community values. For new Rapid Re-Housing projects, other high priority populations include: <ul style="list-style-type: none"> • Households with children and transitional age youth coming directly from the streets, emergency shelters, or other places not meant for human habitation, and • Persons fleeing domestic violence or trafficking. 	6

4	Agency Background/Capacity	30												
4a	<p>Agency has successfully operated at least one program similar to the one proposed for at least two years and/or has a strong grant management, compliance and performance history. Agency has prior experience:</p> <ul style="list-style-type: none"> • Providing homeless housing or services; • Administering rental assistance; or • As a landlord or property management entity. <p>If recipient of prior HUD Continuum of Care Grant, project applicants and potential subrecipients must have satisfactory capacity, drawdowns, and performance for existing grant(s), as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings.</p> <p>For DV Bonus RRH and Joint TH-RRH projects: Applicants must demonstrate previous experience in serving survivors of domestic violence, dating violence, sexual assault, or stalking, and their ability to house survivors and meet safety outcomes. Applicants with demonstrated past performance in permanent housing may partner with agencies who demonstrate such experience.</p> <p>For Rapid Re-Housing projects: Applications for Rapid Re-Housing from providers specializing in serving families, single adults, and unaccompanied youth are encouraged. These applicants may not have experience providing Rapid Re-Housing or administering a permanent housing project. If an applicant cannot demonstrate adequate experience as described above, the applicant may identify a consultant or partner agency with the necessary experience. The applicant should describe the consultant or partner agency's experience, as outlined above, and indicate how they will partner with the applicant. The relationship with the consulting or partner agency need not be long term, but should be of a reasonable duration to supplement the applicant agency's own expertise.</p> <p>*This factor will be evaluated and pre-scored by San Francisco Department of Homelessness & Supportive Housing (HSH) or HomeBase staff.</p>	<p>For Permanent Supportive Housing*: 10</p> <p>For Rapid Re-Housing*: 15 Points</p>												
4b	<p>Other housing programs operated by the sponsor have at least 80% of project participants that achieve housing stability in an operating year, by remaining in permanent housing or exiting to permanent housing.</p>	<table border="0"> <tr> <td>5 pts.*</td> <td>>90%</td> </tr> <tr> <td>4 pts.</td> <td>85-89.9%</td> </tr> <tr> <td>3 pts.</td> <td>80-84.9%</td> </tr> <tr> <td>2 pts.</td> <td>75-79.9%</td> </tr> <tr> <td>1 pts.</td> <td>70-74.9%</td> </tr> <tr> <td>0 pts</td> <td><70%</td> </tr> </table>	5 pts.*	>90%	4 pts.	85-89.9%	3 pts.	80-84.9%	2 pts.	75-79.9%	1 pts.	70-74.9%	0 pts	<70%
5 pts.*	>90%													
4 pts.	85-89.9%													
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1 pts.	70-74.9%													
0 pts	<70%													
4c	<p>Agency/Collaborative attended full LHCB and Funding Committee meetings.</p>	<table border="0"> <tr> <td>5 pts.</td> <td>12</td> </tr> <tr> <td>4 pts.</td> <td>10-11</td> </tr> <tr> <td>3 pts.</td> <td>7-9</td> </tr> <tr> <td>2 pts.</td> <td>4-6</td> </tr> <tr> <td>1 pts.</td> <td>1-3</td> </tr> <tr> <td>0 pts.</td> <td>0</td> </tr> </table>	5 pts.	12	4 pts.	10-11	3 pts.	7-9	2 pts.	4-6	1 pts.	1-3	0 pts.	0
5 pts.	12													
4 pts.	10-11													
3 pts.	7-9													
2 pts.	4-6													
1 pts.	1-3													
0 pts.	0													
4d	<p>For new Permanent Supportive Housing projects: Agency has identified a site for the proposed project.</p>	<p>5</p>												

4e	Agency has been responsive to outstanding or pending HUD monitoring findings, HSH findings, City-wide joint fiscal monitoring findings, financial audit findings, and has no other indication of major capacity issues. Agency must provide an up to date (within last 21 months) audited financial statement, and single audit (if applicable) to document these criteria <ul style="list-style-type: none"> Projects that do not provide requested documentation of audit(s) and/or monitoring receive 0 points. 	<i>No outstanding findings: 5 pts</i> <i>Outstanding findings: 0 pts</i> <i>Requested documentation not provided: 0 pts</i>
5	Housing and Placement	5
5a	Housing project to be funded applies to new units in owned or leased housing (and not re-program existing affordable housing units as housing for a McKinney eligible population) and grant funding requested is to be used for housing activities (leasing, rental assistance, operations) instead of supportive services.	3
5b	Agencies who have previously received CoC funding must be in compliance with Coordinated Entry requirements, including taking referrals to housing only from Coordinated Entry. New agencies will be awarded full points here, as long as they meet the threshold requirement that they agree to participate in Coordinated Entry.	2
6	Budget and Cost Effectiveness	10
6a	Budgeted staff and expenses are adequate to support the proposed program and cost-effective.	7
6b	Budget is clearly articulated, with no unnecessary or unexplained items.	3
7	Cultural Competency	10
7a	Program includes involvement of clientele in designing and operating the program, and the program has written policies regarding client participation that align with HEARTH.	2
7b	Method of service delivery described includes culture-specific/sensitive elements, including that for programs serving children the program has policies and procedures that ensure educational needs are met. Program has the most integrated setting appropriate to meet the needs of qualified persons with disabilities. This means that programs or activities must be offered in a setting that enables individuals with disabilities to interact with persons without disabilities to the fullest extent possible. For applicants for DV Bonus projects: Program must be designed using best practices in addressing survivors of domestic violence, dating violence, sexual assault, or stalking, and must demonstrate staff knowledge of VAWA regulations, safety planning, and creating links to survivor-specific networks and services.	2
7c	Program design is intentionally inclusive of and accessible to all eligible clients and amenities (e.g., grocery stores, pharmacies, etc.) are accessible in the community.	2
7d	Program materials reflect cultural competency.	2
7e	Program has written policies regarding client confidentiality, especially for special populations such as survivors of domestic violence.	2
8	Disability Access Checklist	5
8a	Program will be physically accessible to persons with disabilities.	1
8b	Program will provide communications that are accessible to persons with disabilities.	1
8c	Program demonstrates a plan for programmatic accessibility.	2
8d	Program has a plan for informing participants of their rights under the ADA.	1

9	Community Priority for Permanent Housing	6
9a	If program is “reallocating to itself” to create Permanent Supportive Housing or Rapid Re-Housing using leasing, rental assistance, or operations funds , award full points.	5
9b	If the program commits all units made available through turnover to housing chronically homeless individuals or families, award full points.	1
Total:		100

**2019 McKinney-Vento Continuum of Care Homeless Assistance Grants
NEW PROJECT SUBMISSION CHECKLIST**

APPLICANT NAME:
PROJECT NAME:

ON OR BEFORE 5:00pm ON AUGUST 14, 2019:
 Email a copy of the documents requested below (PDF format preferred) to:
sfnofa@homebaseccc.org.

Emailed	
<input type="checkbox"/>	This Proposal Submission Checklist
<input type="checkbox"/>	HUD Project Application
<input type="checkbox"/>	Local Project Narrative
<input type="checkbox"/>	Cultural Competency Narrative and attachments
<input type="checkbox"/>	Disability Access Checklist and attachments
<input type="checkbox"/>	2880 Applicant/Recipient Disclosure/Update Report (leave signature line blank)
<input type="checkbox"/>	Most recent audited financial statement (if not already provided in connection with a renewal project)
<input type="checkbox"/>	Documentation of match resources
<input type="checkbox"/>	Documentation of sponsor eligibility

Contact person's name:
Phone:
E-mail:

IF YOU PLAN ON CONTRACTING OUT TO ANOTHER AGENCY TO PERFORM ACTIVITIES FOR THIS GRANT, YOU MUST PROVIDE THE FOLLOWING INFORMATION:

Subcontractor Agency:
Estimated Contract Amount: \$
Subcontractor Agency DUNS #:
Write YES to verify the subcontractor agency is in good standing with HUD:

2019 PROJECT NARRATIVE (FOR NEW PROJECTS)

Please answer the following questions. Your response to Questions 1-6 should not exceed three pages, single-spaced, 12 point, Times New Roman font, one-inch margins. An electronic version of the form, just the questions, is available at: <http://hsh.sfgov.org/lhcb/2019-continuum-of-care-funding-competition/>. You will be able to type into that form.

1. Please describe your program's policies and procedures for screening clients for appropriate and relevant mainstream programs and resources for which they may be eligible.
2. Please describe how your agency conducts or provides access to training for staff specifically related to accessing mainstream services.
3. Please state yes or no as to whether your project meets the threshold requirement of equal access for program participants regardless of race, color, national origin, religion, sex, age, familial status or disability, sexual orientation or gender identity, in compliance with state and federal law and the 2019 CoC Program NOFA. If necessary, please explain. **Please do not exceed 150 words.**
4. Please state yes or no as to whether your project is inclusive of and serves program participants, within the project's target population, with the highest needs and vulnerability, including but not limited to the following below. If necessary, please explain. **Please do not exceed 150 words.**
 - Low or no income at entry;
 - Current or past experience of substance abuse;
 - Criminal history (to the extent possible within the requirements of federal, state, and local law); and
 - Chronic homelessness
5. Has your agency operated at least one program similar to the one proposed for at least two years and/or has a strong grant management, compliance and performance history? If yes, please describe. Applications for Rapid Re-Housing from providers specializing in serving families, single adults, and unaccompanied youth are encouraged. If you cannot demonstrate adequate experience as described above, you may identify a consultant or partner agency with the necessary experience. You should describe the consultant or partner agency's experience, as outlined above, and indicate how they will partner with you. The relationship with the consulting or partner agency need not be long term, but should be of a reasonable duration to supplement your agency's own expertise.

6. If you indicated on your Project Application that there are any unresolved HUD monitoring findings, or outstanding audit findings related to any of the grant listed therein, provide a copy of such findings and any related correspondence.
7. Identify other housing programs which you (applicant and/or sponsor) operate that have at least an 80% of project participants that achieve housing stability in an operating year, by remaining in permanent housing or exiting to permanent housing:

Housing Program	% of Participants who have achieved housing stability in an operating year.

8. How many Continuum of Care LHC B Meetings did someone from your agency attend from January 2018 to the present? (Meetings include: Full LHC B meetings and LHC B Funding Committee meetings).

Name of Group/Meeting	Number of Meetings Attended

9. Does your project (choose one):
 - Apply to new units in owned or leased housing?
 - Reprogram existing affordable housing units as housing for a McKinney eligible population?
10. Is this application for reallocated funding, bonus funding or would you like it to be considered for both opportunities?
 - Reallocated funding
 - Bonus funding
 - Consider for both reallocated funding and bonus funding
11. Please submit one (1) copy of your agency's most recent audited financial statement.

12. Please list the contact information for your two largest funders.

13. For DV Bonus Projects only:

- a. Please describe how the program is designed using best practices in addressing survivors of domestic violence, dating violence, sexual assault, or stalking, and demonstrate staff knowledge of VAWA regulations, safety planning, and creating links to survivor-specific networks and services.
- b. Please describe how you will maintain confidential participant data in a comparable database to HMIS and your ability to produce de-identified information to the CoC.
- c. Please describe your agency's experience, or the experience of any partner agencies and how the program will use their expertise, in serving survivors of domestic violence, dating violence, sexual assault, or stalking, including the use of trauma-informed care.

General Threshold Questions:

1. Will your project participate in HMIS? Yes ____ No ____
2. Will your project participate in Coordinated Assessment? Yes ____ No ____
 - a. If you're an agency who has previously received CoC funding, are you currently participating and complying with Coordinated Entry, including taking referrals to housing only from Coordinated Entry?
Yes ____ No ____
3. When will your project be ready for occupancy? _____
4. If you are asking for funds for units under a master lease, indicate the length of the lease (must be for at least 10 years): _____
5. HUD promotes energy efficient housing. Will your project use Energy Star appliances?
____ Yes _____ No

2019 CULTURAL COMPETENCY NARRATIVE (FOR NEW PROJECTS)

Please answer the following questions on this document in no more than two pages, single-spaced, 12 point, Times New Roman font, one inch margins. An electronic version of the form is available at: <http://hsh.sfgov.org/lhcb/2019-continuum-of-care-funding-competition/>. You will be able to type into that form.

- a. Describe the ways in which your current and former clients are involved in the design and operation of the program. Be specific, e.g., advisory board, alumni advisors, resident meetings, regular formal feedback, etc. Please be sure to attach any written policies regarding client participation (to align with HEARTH).
- b. How does your method of service delivery take into account the particular characteristics of the clients you will house and serve? For programs serving children in the program, please include information about how you ensure that educational needs of children are met (to align with HEARTH). For persons with disabilities, provide examples of what programs or activities are offered to enable individuals with disabilities to interact with persons without disabilities. Please be sure to attach any written policies you have on this issue.
- c. How do clients find out about the program?
- d. Program design is intentionally inclusive of and accessible to all eligible clients and amenities (e.g. grocery stores, pharmacies, etc.) are accessible in the community.
- e. What do clients need in order to enroll in the program? What are the reasons clients are not accepted into the program? Do you document turnaways? Do you maintain waiting lists? Describe.
- f. Describe the neighborhood and building where the program is located. How do clients get to the program? (e.g., MUNI access.)
- g. Attach the following:
 - Outreach materials
 - Eligibility criteria
 - Rules of the program
 - Expulsion criteria
 - Denial of Service Policy
 - Grievance/complaint procedure
 - Client feedback procedures in place
 - Client confidentiality, especially for special populations such as survivors of domestic violence
 - Attach any other related policies, especially related to:
 - Client involvement in program design and operation
 - Meeting children's educational needs
 - Meeting the need of individuals with disabilities

2019 DISABILITY ACCESS CHECKLIST (For New Projects)

An electronic version of the form is available at: <http://hsh.sfgov.org/lhcb/2019-continuum-of-care-funding-competition/>. You will be able to type into that form.

Name of Department or Agency	Name of Program or Service	
Address	Phone	
Contact Person (ADA Coordinator)	Phone	E-mail
Funding Agency		

This grant is intended for activities at:

New site

Existing site

Rehabilitation of existing site

This grant will fund a:

New program or service

Existing program or service

Multiple programs or services

Address of program site: _____

Please answer the following questions *as they apply to the program for which you are applying for funding.*

Physical Access

Have you had professional review of architectural accessibility of your site?

Yes

No

If yes, what was the date of the review?

Who conducted the review?

The following are major areas for review. If the professional review found any problems, please indicate. Please list additional items at the bottom.

1. The program or service is wheelchair accessible for:

Paths of travel

Yes

No

Restrooms

Yes

No

Areas where services are provided

Yes

No

2. Signage for people with vision impairments:

In elevators

Yes

No

Not applicable (no elevators)

Marking paths of travel

Yes

No

3. If you provide transportation, is it accessible?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not applicable (not provided) <input type="checkbox"/>
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Other identified physical access issues:

Communication Access

1. Program materials are available in:

Large print Braille Cassette Computer disk Other _____

2. Sign language interpretation is available if needed: Yes No

3. The program has a TTY machine:

Yes

No

If yes, please provide the number:

If no, please explain how you communicate with hearing impaired people by phone.

Programmatic Access (the answers to the following questions should not exceed three pages (six pages for collaborative projects), single spaced, 12 point, Times New Roman font.)

1. How do you notify your clients of their rights under disability rights laws? (If you are a new project applicant, please attach any sample language.)

2. How do you train your staff on their obligations under the ADA, the Fair Housing Amendments Act, and other disability rights laws? (If you are a new project applicant, please attach outlines of any trainings and any relevant materials.)

3. Do you have a reasonable accommodation policy? (If yes, and you are a new project applicant, please attach.)

Yes

No

4. We are interested in learning how you have provided, or would provide, reasonable accommodations to clients with a variety of disabilities. If you have actually encountered any of the following situations, please let us know.

a. What would you do with a client with a hearing impairment who needs your services? How would you communicate on the phone and in person?

b. What would you do with a client who is blind? How would you provide her with information that is usually given in writing? How would that person collect information or documentation for you?

- c. What would you do with a client who arrived at your door in a wheelchair or who had mobility impairments that made it difficult to get to your office?
- d. What would you do with a client who appears to have a cognitive impairment that made it difficult for him to understand instructions or remember appointments? How would you provide services?
- e. What would you do with a client who appears to have a psychiatric impairment that made her paranoid and reluctant to reveal required information? How would you provide services?
- f. What would you do with a client who appears to have a psychiatric impairment that made him argumentative? How would you provide services?

5. What percentage of your clients would you estimate have disabilities? _____ %

Please allocate: physical disabilities _____ % mental disabilities _____ %

6. What steps do you take to ensure that eligibility criteria do not screen out people with disabilities?

7. Do you have a grievance procedure? (If yes, and you are a new project applicant, please attach.)

Yes

No

Verified by: _____

Executive Director

Date

Attachments:

- Sample language for how you notify clients of their rights under disability rights laws (item 1 under Programmatic Access).
- Outlines of ADA and Fair Housing trainings and any other relevant materials (item 2 under Programmatic Access).
- Reasonable accommodation policy (item 3 under Programmatic Access).
- Grievance procedure (item 7 under Programmatic Access).
- Any other related materials that you wish to attach.

<https://www.hudexchange.info/resources/documents/how-to-access-the-project-application.pdf>

A. MATCH LETTER FORM (REVISED IN 2019)

[This form must be replicated on the letterhead of the organization *providing* the resource.]

Name of Organization <i>Providing</i> Match Resources	
Type of Organization <i>Providing</i> Match Resources	[PUBLIC or PRIVATE]
Name of Agency <i>Receiving</i> Match Resources	
Name of Project <i>Receiving Match Resources</i>	
Project's Grant Number	
Commitment Type*	[CASH or IN-KIND]
Commitment Value**	\$
Target Fiscal Year for Commitment***	[MM/2020 – MM/2021]
Authorized Agent's Name	
Authorized Agent's Title	
Authorized Agent's Signature	
Date of Written Commitment (Date of Signature)	[Must be signed and dated prior to September 20, 2019]

* E.g., cash, childcare, case management, health care, etc. If cash, also state allowable activities to be funded by match.

** For in-kind, identify method used to determine the value of the donation. If in-kind match for services, a memorandum of understanding (MOU) will be required instead of a match letter.

*** For renewals, this date range should match the project start and end dates in e-snaps.

Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing
and Urban Development

OMB Approval No. 2506-0214 (exp. 2/28/2022)

Instructions. (See Public Reporting Statement and Privacy Act Statement and detailed instructions on page 2.)

Applicant/Recipient Information

Indicate whether this is an Initial Report or an Update Report

1. Applicant/Recipient Name, Address, and Phone (include area code):	2. Amount of HUD Assistance Requested/Received
3. HUD Program Name	
5. State the name and location (street address, City and State) of the project or activity:	

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. (For further information see 24 CFR Sec. 4.3). Yes <input type="checkbox"/> No <input type="checkbox"/>	2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9 <input type="checkbox"/> Yes <input type="checkbox"/> No
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If you answered “No” to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. **However,** you must sign the certification at the end of the report.

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.

Department/State/Local Agency Name and Address	Type of Assistance	Amount Requested/Provided	Expected Uses of the Funds

(Note: Use Additional pages if necessary.)

Part III Interested Parties. You must disclose:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Type of Participation in Project/Activity	Financial Interest in Project/Activity (\$ and %)

(Note: Use Additional pages if necessary.)

Certification

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	

Public reporting burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. Except for Social Security Numbers (SSNs) and Employer Identification Numbers (EINs), the Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under section 102 of the Department of Housing and Urban Development Reform Act of 1989, 42 U.S.C. 3531. Disclosure of SSNs and EINs is voluntary. HUD is authorized to collect this information under the Housing and Community Development Act of 1987 42 U.S.C.3543 (a). The SSN or EIN is used as a unique identifier. The information you provide will enable HUD to carry out its responsibilities under Sections 102(b), (c), and (d) of the Department of Housing and Urban Development Reform Act of 1989, Pub. L. 101-235, approved December 15, 1989. These provisions will help ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. They will also help ensure that HUD assistance for a specific housing project under Section 102(d) is not more than is necessary to make the project feasible after taking account of other government assistance. HUD will make available to the public all applicant disclosure reports for five years in the case of applications for competitive assistance, and for generally three years in the case of other applications. Update reports will be made available along with the disclosure reports, but in no case for a period generally less than three years. All reports, both initial reports and update reports, will be made available in accordance with the Freedom of Information Act (5 U.S.C. §552) and HUD's implementing regulations at 24 CFR Part 15. HUD will use the information in evaluating individual assistance applications and in performing internal administrative analyses to assist in the management of specific HUD programs. The information will also be used in making the determination under Section 102(d) whether HUD assistance for a specific housing project is more than is necessary to make the project feasible after taking account of other government assistance. You must provide all the required information. Failure to provide any required information may delay the processing of your application, and may result in sanctions and penalties, including imposition of the administrative and civil money penalties specified under 24 CFR §4.38.

Note: This form only covers assistance made available by the Department. States and units of general local government that carry out responsibilities under Sections 102(b) and (c) of the Reform Act must develop their own procedures for complying with the Act.

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity **and** you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. Update reports (filed by "Recipients" of HUD Assistance):

General. All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Applicants enter the HUD program name under which the assistance is being requested.
3. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
4. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. **Recipients filing Update Reports should not complete this Part.**

If the answer to **either** questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
2. State the type of other government assistance (e.g., loan, grant, loan insurance).
3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD **and any other source** - that have been or are to be, made available for the project or activity. Non-government sources of

funds typically include (but are not limited to) foundations and private contributors.

Part III. Interested Parties.

This Part is to be completed by both applicants and recipients filing update reports. Applicants must provide information on:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Note: A financial interest means any financial involvement in the project or activity, including (but not limited to) situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided.

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. Please list all names alphabetically.
2. Enter the type of participation in the project or activity for each person listed: i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
3. 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 amount of the HUD assistance involved.

Note that if any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need

not repeat the information, but need only refer to the form and location to incorporate it into this report. (It is likely that some of the information required by this report has been provided on SF 424A, and on various budget forms accompanying the application.) If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required.

Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in Section I.D.5., above.

Notes:

1. All citations are to 24 CFR Part 4, which was published in the Federal Register. [April 1, 1996, at 63 Fed. Reg. 14448.]
2. Assistance means any contract, grant, loan, cooperative agreement, or other form of assistance, including the insurance or guarantee of a loan or mortgage, that is provided with respect to a specific project or activity under a program administered by the Department. The term does not include contracts, such as procurements contracts, that are subject to the Fed. Acquisition Regulation (FAR) (48 CFR Chapter 1).
3. See 24 CFR §4.9 for detailed guidance on how the threshold is calculated.
4. "Other government assistance" is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance from the Federal government (other than that requested from HUD in the application), a State, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project or activities for which the assistance is sought.
5. For the purpose of this form and 24 CFR Part 4, "person" means an individual (including a consultant, lobbyist, or lawyer); corporation; company; association; authority; firm; partnership; society; State, unit of general local government, or other government entity, or agency thereof (including a public housing agency); Indian tribe; and any other organization or group of people.