



**FY2023 Continuum of Care  
Renewal Project Application**

Agencies that apply for funds through the CoC Funding Process must complete an application for each program in E-snaps. In addition, agencies must complete this Renewal Project Application for each program.

This form is due on **Tuesday, August 29, 2023 at NOON** by e-mail to [hsc@cityofmadison.com](mailto:hsc@cityofmadison.com). **Late or incomplete applications will not be considered. Please do not wait until the deadline to submit the application. No grace period will be granted.** If you have questions, please contact Torrie Kopp Mueller, [tkoppmueller@cityofmadison.com](mailto:tkoppmueller@cityofmadison.com) or call 608-266-6254.

**Agencies with more than one CoC project must submit a separate form for EACH project.**

Agency Name	<b>Dane County Human Services/Housing Initiatives, Inc.</b>
Project Name	<b>Rental Assistance</b>
Project Type	<input checked="" type="checkbox"/> <b>Permanent Supportive Housing (PSH)</b> <input type="checkbox"/> <b>Rapid Rehousing (RRH)</b>

Project Contact Name	Brad Hinkfuss
Phone Number	608-620-1751
E-Mail	<a href="mailto:bhinkfuss@housinginitiatives.org">bhinkfuss@housinginitiatives.org</a>

Funding Request	\$1,211.734
Proposed # of Units	84
Proposed # of Beds	116

<b>Threshold Criteria</b>	
Does the agency have any outstanding HUD monitoring findings? If yes, please provide explanation.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the project comply with the <a href="#">CoC Interim Rule 24 CFR 578</a> ?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency have a SAM.gov registration?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency have an active Unique Entity ID (formerly DUNS Number)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency have any delinquent federal debt? If yes, please provide explanation.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the agency under debarment or suspension from doing business with the Federal Government and/or on the Federal do not pay list? If yes, please provide explanation.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Threshold Criteria	
Does the agency currently enter data into the Homeless Management Information System (HMIS) or comparable database for Domestic Violence providers? If no, please explain how the agency plans to become an HMIS agency by the project start date in the narrative below.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency commit to participating in system-wide continuous quality improvement activities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency agree to participate in the <a href="#">Coordinated Entry System</a> and follow Coordinated Entry <a href="#">policies and procedures</a> ?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the agency agree to follow the <a href="#">Dane CoC Written Standards</a> ?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Please answer the following questions:**

*Project applications will be reviewed based upon adherence to the HUD CoC Program Interim Rule, FY23 CoC NOFO, as well as results of the Project Performance Scorecard.*

1. Describe the grantee’s (and any sub-grantee’s) experience in administering this type of program. Describe the qualification of the staff assigned to the proposed program, including their knowledge and experience.

*Dane County Human Services (DCHS) provides a comprehensive array of services and programs to over 100,000 customers in Dane County each year. The department employs about 800 staff and contracts with purchase-of-services with 435 organizations. It operates an annual budget of over \$270,000,000 in 2023. The Rental Assistance Grant represents just one valuable component within this huge array of public services. It is a critically valuable piece that addresses a particularly vulnerable population: the chronically homeless and mentally ill. This is where Housing Initiatives, Inc. (HII) aligns and partners with DCHS as a subrecipient of the grant.*

*Housing Initiatives, Inc. (HII) has 30 years of experience providing Permanent Supportive Housing (PSH) for people experiencing homelessness and living with persistent mental illness. Agency staff at all levels contribute to progress and continued improvement of carrying out the agency’s mission which speaks directly to multiple priorities within the Community Plan to Prevent and End Homelessness in Dane County, WI (Est. 2016, updated 2019). Rental Assistance funding directly and exclusively supports individuals who have experienced chronic homelessness and live with mental illness. Permanent Supportive Housing clients supported by Rental Assistance reside at one of the 151 units within one of the 33 properties that HII owns and/or operates within the City of Madison.*

*In addition, HII partners with private landlords which helps to expand housing options in Madison and surrounding Dane County area including Fitchburg, Middleton, the village of DeForest, and towns of Madison and Burke. Over the past 10 years, Housing Initiatives has partnered with 50 private landlords using a team approach between Housing Initiatives, landlords and case workers who assist, monitor, and intervene with clients as needs arise.*

*Clients appreciate moving into neighborhoods to live independently supported at a non-institutional level and value positive, supportive relationships with staff. The Client Services team specializes in case management, which involves collaborating and partnering with agencies who provide mental health and supportive services. Staff share a passion for a harm-reduction, trauma-informed approach with client-centered supportive services. Staff understand the warning signs of mental health crisis and are skilled at engaging with clients, their support teams and crisis intervention.*

*The foundation of HII's success are staff who share a mutual respect for clients and are dedicated to their work in Permanent Supportive Housing.*

*Bradley Hinkfuss, Executive Director, has led Housing Initiatives for the past four years. His diverse history includes leadership of numerous programs while working at Porchlight, Inc. for 16 years, and 2 years at Domestic Abuse Intervention Services including urban development in Illinois. He served overseas with the US Peace Corps in the construction of affordable housing where he gained insight into the cultural dimensions of housing, and the ability to work with a very diverse range of people. Brad served as President of the Dane County Homeless Services Consortium (HSC) in 2021 and has served on the HSC Written Standards committee since 2021.*

*Aruni Wickramasinha (MS), Finance & Business Operations Manager, joined Housing Initiatives in March 2023. She brings an extensive background in finance, coupled with a strong desire to support the disadvantaged clients that HII serves. Her diverse experience in businesses small and large add value to her work with the agency.*

*Tami Fleming (BA), Director of Client Services, joined HII in May of 2022. Prior to this Tami served as Executive Director of Shelter from the Storm Ministries, a transitional living shelter for single moms and their children. Tami's leadership and passionate work in homeless services began in 2011 with Street Outreach, establishing and leading "Friends of the State Street Family", a grass roots advocacy and supportive services organization for individuals and families experiencing homelessness. Tami is a certified EMT and volunteers with Belleville EMS Services. Tami brings incredible knowledge and expertise in leading Client Services at HII. Tami's leadership administering programs that engage in Housing First and Harm Reduction models are an integral part of the HII leadership team.*

*Mary Carrasco-Schoer (MBA), Property Manager, joined HII in 2021 with considerable experience in managing properties and working with clients who receive Section 8 and Section 42 tax credits. Mary's business acumen includes [fill in how many years] of direct supportive service work with individuals at risk of homelessness and who enter supportive housing having experienced homelessness and in recovery. Mary brings lived experience to the team and is involved in recovery support throughout the community.*

*Charlie Arndt, Housing Stability Manager, joined HII in March 2023. He brings strong experience by virtue of his previous work with several local non-profits that serve the homeless, veterans, and other at-risk populations. Charlie's experience working in settings that range from shelter to supportive living environments are an asset to the agency. His experience includes case management working with a diverse group of clients providing trauma informed care supportive services.*

*Additionally, Housing Initiatives has three supportive services staff that collectively serve the Calypso Road Housing First Project, as well as the broader array of clients residing at scattered sites.*

*Kevin McGettigan (MFA, BA), Case Manager & Certified Peer Specialist, Recovery Coach has extensive experience working in the local mental health recovery system with the Dane County Care Center and Tellurian. As a Certified Peer Specialist and Recovery Coach, Kevin brings 27 years of experience and knowledge of local systems to the HII services team.*

*Karen Andro (BBA) Case Manager & Continuum of Care Specialist, CCS Recovery Worker, joined HII in November of 2022. Prior to this Karen worked at Madison Street Medicine's Dairy Drive Shelters providing housing focused case management. The impetus to Karen's work in homeless issues advocacy and service began during her 12-year tenure at First United Methodist Church in downtown Madison where she served as Director of Outreach leading and implementing programs to help fill gaps of unmet needs for individuals and families experiencing homelessness. Karen served as Chair of the Homeless Services Consortium in 2015. She serves on the HSC CORE Committee, HSC Reimagine Coordinated Entry Workgroup, and HSC Data Workgroup.*

Melissa Molina:

Having just started with HII in June 2023, Melissa is the newest member of the HII services team. Her extensive history of work with veteran families and in-home support services complements the skills found among others on the team. She also brings valuable experience from bigger city environments and minority populations.

Housing Initiatives, Inc. has administered the Rental Assistance program (formerly Shelter-Plus-Care) since 1995. That year, HUD awarded a five-year grant totaling \$917,000 (\$194,200 per year). Of the thirty-nine clients initially housed with that grant, several are still housed with Housing Initiatives.

Since then, the program has grown and is slated at \$1,211,734 for the 2023 renewal. The contract in the past has stipulated that the Rental Assistance program provides rental assistance for qualified clients in 84 units. Due to the way Housing Initiatives collects and leverages rental income, as well as improving program stability by housing clients in properties that HII owns and operates, HII has been able to consistently house above and beyond the HUD contract requirements. In fact, for the previously completed program year the program served 158 clients (121 households) at 144% of the unit utilization rates and at 136% of the bed utilization rates.

The Rental Assistance grant is a Continuum of Care program and is subject to HEARTH Act regulations. Housing Initiatives has administered the program for nearly 30 years in good standing with the Department of Housing and Urban Development.

2. Please describe how your project takes proactive steps to minimize or overcome barriers to housing retention.

In 2019, HII increased service worker staffing to four FTE positions for the first time. This staffing increase dramatically improved supportive service provision at all housing locations. The agency adheres to a Housing First approach, and supportive service staff employ a harm reduction, trauma-informed care model in carrying out supportive services. In doing so, they offer multiple options to help clients retain housing and improve their situation. Examples include direct support for emergent needs such as when clients run out of food and household supplies to a client experiencing a mental health crisis. Staff often respond to triage and support clients during personal crisis and develop personal service plans with clients to plan and help prevent crisis. Property management works with clients to provide flexible repayment plans, payee arrangements, and the Client Services team assists with application to mainstream resources including SSI/SSDI, FoodShare, employment, transportation assistance, and basic needs.

Client services staff continue to work with clients to maintain housing stability and adapt to their new housing. This starts on day one, when clients who were literally homeless the day before arriving meet with the Property Manager and Director of Client Services to prepare for their new Permanent Supportive Housing funded by Rental Assistance and move-in. Identifying potential issues at the time of move-in aligns clients with an individualized service plan tailored to their unique needs. The supportive, collaborative relationship continues between Property Management and Client Services which makes a difference in many of the issues clients face while housed. Following lease rules and regulations, housekeeping, and accommodations are common areas which Property Management and Client Services often team up to support clients.

Within the past six months, HII also started the new position of Housing Stability Manager. The focus of this role is to focus on critical situations as they arise with clients, with one foot in property management and the other in supportive services. This approach is proving to be particularly valuable in helping clients when complex issues arise that are not clearly defined as either property management or services exclusively.

*Based on individualized plans, HII staff work to build broader support networks with clients around their needs and goals. Client services include support such as in-home health care needs, AODA treatment, education, mental health care, crisis intervention, elder abuse support, domestic violence survivor support, probation & parole collaboration, and mainstream resources. With clients fresh out of homelessness – oftentimes for several years – and compounded with severe mental illness, it truly takes a collective effort for individuals to stabilize and build long-term solutions. HII realized 90.5% retention rate this past grant year. Every effort is made to retain housing for clients rather than resorting to or relying on any eviction action.*

*Community-based services are a vital pro-active approach to minimizing and overcoming barriers to housing retention. Housing Initiatives case workers assist clients by teaming up with Tellurian, Journey Mental Health, Program of Assertive Community Treatment (PACT), SSI/SSDI Outreach, Access, and Recovery (SOAR) and a variety of service providers. Some clients move-in already having a community-based team which HII case workers become involved with to support client housing stability and retention. Approximately 44% of PSH clients are engaged with a community-based support team.*

*Comprehensive Community Services (CCS) is another community-based team approach which has contributed to housing stability, independent functioning, and assistance of individualized recovery plans. Specifically, 17 clients engaged with CCS services during this past grant year and 15 of those clients work directly with HII staff as a member of their CCS team. HII client services who are CCS certified included three staff during this past grant year who provided Individual Skill Development and Enhancement (ICDE), Physical Health Monitoring and Peer Support. The agency foresees growth of CCS teams as HII continues to network with CCS partner agencies and clients move-in with CCS teams.*

3. In your last operating year:

- a. How many households exited the program?

*11*

- a. Why did the households exit? (i.e. one was terminated from the program & one moved into subsidized housing & one was evicted):

*2 (permanent housing other than RRH)*

*1 (moved in with friends, permanent)*

*2 (exited to homelessness)*

*2 (residential medical facility)*

*1 (jail or prison)*

*3 (deceased)*

- b. If the participant(s) was evicted, please list the reason?

*3 participant evictions (2households) evicted for substantial destruction of property and endangerment of surrounding residents and neighbors.*

- c. Did the program attempt an agency transfer for any of the leavers? If so, what was the outcome?

*Yes, 2 agency transfers; one to PSH Porchlight and one to PSH Heartland/Rethke Terrace.*

- d. How many new households entered the program?

*12 new households*

- e. How many transfers were accepted into the program?

*No transfers were referred to the program, so none were accepted.*

4. Describe your agency's efforts to improve service quality and outcomes for the program. Please include how you solicit and incorporate feedback from program participants.

*Over the past four years, HII has continued to engage in more assertive outreach with clients. This was accomplished primarily through supportive service staff reaching out to all clients to ascertain their well-being and potential need for new or different services. The pandemic brought about new approaches in case management work including care calls and expanding modes of communication to use of email and text messaging when client preference. The Director of Client Services at Housing Initiatives initiated a new website for clients featuring helpful supportive service information, a new print and e-newsletter which features articles highlighting fellow clients, opportunities to engage in community and introductions to new staff. HII sent direct mailings throughout the year to share emerging information and resources. In addition, the Housing Initiatives Property Manager mailed regular direct correspondence to update clients concerning their compliance standing, upcoming lease renewals, and any other matters of concern. The agency maintained regular office hours with ample opportunity for clients to call, drop in, or make an appointment to meet with staff to discuss any issue whether a home visit or at either the Property Management Office or Client Services Office both located at two of Housing Initiatives Permanent Supportive Housing sites. Collectively, these multiple avenues for encouraging and supporting feedback have resulted in the agency having much closer relationships with clients and learning about needs and problems. In turn, this provides an opportunity for strategizing and addressing issues in an effective and timely manner.*

5. What percentage of staff members working for this program identify as Black, Indigenous or a Person of Color?

*For the last program year, 33% (3 of 9) staff members identified as People of Color.*

6. How does this program work against systematic racism and other structures of oppression?

*One of the greatest impacts the agency makes is building relationships with clients by staff getting to know each person through home visits. Listening to clients with an openness and ear toward equity changes the way staff perceive what is being said. Inviting clients to share their voice in ways that impact system level changes such as helping with voter registration and transportation. Other examples include engaging clients to be compensated for participating in Client Services Staff Retreats which began this year initiated by the Director of Client Services at Housing Initiatives. A powerful experience occurred at the most recent Client Services staff retreat (July 2023) when a paid program participant shared about her experiences as a black woman experiencing mental health crisis and how interactions caused unintended harm, and conversely what would have been most helpful.*

*At an agency level racism and other forms of oppression are addressed in the adoption of policies embodied in the agency's Affirmative Marketing Plan and Tenant Selection Plan. Housing Initiatives partners with agencies including the Institute for Community Alliances that operates the Coordinated Entry program and Housing Initiatives is committed to accepting new clients directly from Coordinated Entry irrespective of race, nationality, or other protected classes. HII staff engaged in all-staff meetings in which discussions about ways in which existing practices might have unintended racist effects and implications.*

*At the Board of Directors level, the bylaws require that the board contain at least three resident representatives drawn from the current residents. All members are elected for three-year terms. In filling these positions, the board seeks residents who reflect the racial, gender, cultural, and experiential diversity of the larger resident population. For the first time in HII history, during the past program year the Board of Directors and all staff gathered to begin Strategic Planning together. One issue identified during this process was staffing composition and need for more diversity. This was followed up upon by the hiring of two staff members who replaced positions for individuals leaving the agency (one retired and one for career advancement) and both positions were filled by individuals of color who infuse greater cultural diversity, and together staff Board members and staff will implement a strategic plan of action including Diversity, Equity and Inclusion (DEI) training and practices connected to the current agency's policies and procedures.*

*At a systemic level, HII staff participate within the local Continuum of Care to identify and address system-wide issues that may be furthering systemic racism, and then working collaboratively to meaningfully address those concerns. One such issue became apparent in the past year when a data analysis showed that a disproportionately low number of Black people were being housed relative to the total number of Black people within the Coordinated Entry system. This resulted in a focused group to “reimagine” the coordinated entry system, and thereby how placement decisions are made.*

7. How is this program and its practices culturally responsive to the population(s) who participate?

*Program practices and cultural responsiveness with the populations who participate in HII Permanent Supportive Housing has improved with hiring of staff of color and lived experience. Housing Initiatives continues to improve upon how staff engage with clients by actively seeking out opportunities to listen from diverse client perspectives how the program is assisting participants best and what is most challenging. The annual assessment process provides an excellent feedback loop to collect required information and hear how the program fits participant needs and where program services may fall short.*

*Since all clients at HII present with histories of chronic homelessness and severe mental health conditions, staff have developed an approach of building service plans with clients that are relationship-based, and that consider the mental health, physical health, trauma, cultural disposition, and behavioral history of each client. Cultural responsiveness is an integral component of this approach. Staff are committed to ongoing training; examples include Improving Cultural Competency and Person-Centered Planning (PCP) training.*

*Housing Initiatives has a long history of working with minority populations and people from diverse cultural backgrounds. The agency typically learns of these concerns upon referral and program intake, and since the agency does not take referrals from the general public. In those cases where there is a cultural concern or English as a second language, the agency takes care to make accommodations and ensure effective communication and/or translation on a case-by-case basis. The Wisconsin Telephone Relay Service is an option if needs arise to communicate with a client and/or fellow service provider who may have hearing loss or speech disability by dialing 711 to reach the Relay Service.*

8. What barriers does your project have for participation by Black, Indigenous and Persons of Color (e.g. lack of outreach)? What steps has your agency taken or will take to eliminate the identified barriers?

*Housing Initiatives receives client referrals for PSH through the Dane County Continuum of Care Coordinated Entry process (VI-SPDAT). With the Housing First approach, HII does not make the selections of who will participate in the Housing Initiatives Permanent Supportive Housing Rental Assistance project and have little to no criteria for denying someone housing (e.g., previous criminal record, substance use, etc.). With that in mind, staff interactions with individuals in person and receiving inquiries outside of the Coordinated Entry process have informed the agency that better communication is needed to engage participation by Black, Indigenous and Persons of Color with the Coordinated Entry process and local Continuum of Care. Often, staff found that the process was little known and felt overwhelming as they listened and engaged with individuals from diverse backgrounds who reached out directly to HII seeking information about housing.*

*Staff engage in a person-centered approach responding to individual preferences, feelings and needs which helps build a bridge to outreach workers, housing navigators and providers. HII works to eliminate barriers by listening and responding to a person’s unique situation with cultural awareness and sensitivity. Listening to clients who shared about their positive experiences has been insightful and beneficial in the agency’s ability to facilitate connections such as with Centro Hispano, the Catholic Multicultural Center, Urban League, and organizations who specialize in services a client expresses a need. HII staff participate within the local Continuum of Care to identify and address system-wide issues that may be furthering systemic racism, and then working with other partner agencies to meaningfully address those concerns.*

9. **FOR RRH Projects** – Please describe the method the project uses for providing rental assistance (progressive engagement, flat fee for all participants, tiered payments, etc.) and the rationale for this approach.

**For PSH Projects** – Please describe any resources, formal partnerships or best practices the project has to serve participants with the most severe needs.

*Best practices for serving participants in Housing Initiatives Rental Assistance project participants with the most severe needs include building support teams around those clients. Client services intake upon entering the program is key to learning about and assessing what may be done to help each client remain stably housed.*

*At the time of lease signing and enrollment into Housing Initiatives PSH Rental Assistance, the Property Manager and Director of Client Services meet with the client. The Property Manager goes over the lease and information related to tenancy. The Director of Client Services provides an orientation of Client Services and conducts the Program Enrollment as well as an intake.*

*During the Client Services intake the following is covered:*

- *Ascertain past issues and difficulties in maintaining housing.*
- *Determine client desires and goals.*
- *Assess clients' mental and/or physical health diagnosis and if they are currently receiving any treatment.*
- *Determine if clients have situations that may require legal counsel.*
- *Obtain ROI signatures that include being able to speak with their existing providers, case managers, parole agents and any other potential agencies with insight to what staff can do to help the client stabilize, what to do when they are activated, and learn how best to interact with them.*
- *Develop a plan with client, existing providers and bring in appropriate and agreed upon identified services such as PACT, CIT, CCS, ADRC, and arrange for come in support with long term care plans/providers (I care, WisCares, etc.) or connect them with MAT or other treatment programs and the necessary transportation to be able to get to them consistently.*
- *Help them apply for SSI/SSDI and/or work, as appropriate, if they are no or very low income.*

Please provide any information that will give context to any low scores on the Project Performance Scorecard.

## **BONUS POINTS**

PSH and RRH projects that leverage housing and healthcare resources are eligible for up to 20 bonus points. For housing leverage, please attach a letter of commitment, contract, or other formal documents that demonstrate the number of subsidies being provided or units being provided to support this project. For healthcare leverage, please attach a written commitment that includes the value of the commitment and dates the healthcare resources will be provided.

Information for Bonus points, from p. 103-104 of the NOFO

**Leveraging Housing Resources:** CoCs will receive full points by demonstrating that they have applied for at least one PSH or RRH project that utilizes housing subsidies or subsidized housing units not funded through the CoC or ESG programs. The CoC must demonstrate that these housing units will:

-in the case of PSH, provide at least 25% of the units included in the project

-in the case of RRH, serve at least 25% of the program participants anticipated to be served by the project

Housing leverage can come from the following sources: private organizations, state or local government (including through the use of HOME funding provided through the American Rescue Plan), Public Housing Agencies (including through the use of a set aside or limited preference), faith-based organizations or federal programs other than the CoC or ESG programs.

**Leveraging Healthcare Resources:** CoCs must demonstrate through a written commitment from a healthcare organization that:

-in the case of a substance use disorder treatment or recovery provider, it will provide access to treatment or recovery services for all program participants who qualify and choose those services; or

-the value of assistance being provided is at least an amount that is equivalent to 25% of the funding being requested for the project, which will be covered by the healthcare organization.

Sources of healthcare resources include: direct contributions from a public or private health insurance provider to the project (e.g. Medicaid) and provision of health care services by a private or public organization (e.g., Ryan White funded organization) tailored to the program participants of the projects.